

Buying time

MORE WOMEN ARE RELYING ON EGG FREEZING TO PRESERVE THEIR FERTILITY, BUT HOW EFFECTIVE IS IT REALLY? Rhiane Kirkby FINDS OUT

Whatever your thoughts on egg freezing, there's no denying it's becoming increasingly popular in the UK. So much so that it's included, for the first time, in the Human Fertilisation and Embryology Authority's latest report. Its data shows a surge in the number of women freezing their eggs, from just 29 in 2001 to 816 in 2014 (the latest year it has figures for).

The introduction of a more effective freezing technique called vitrification, which was adopted by most clinics in 2010, is part of the reason for the growth in popularity. Yet, despite the scientific advances, the number of frozen eggs being thawed and used in successful IVF treatment in the UK remains low, with fewer than 60 babies being born in the past 16 years.

Those figures may look exceptionally bleak, but experts stress they don't tell the whole story. Many of the women who have frozen their eggs haven't returned for them, perhaps because they've changed their minds, or become pregnant naturally. Added to which, there's no information about the quality of the eggs frozen or the age of the women involved. "Eggs frozen for medical reasons, for example, from a woman about to start cancer treatment, are, by their very nature, generally not such good quality and can result in lower birth rates than those harvested from a healthy woman," explains consultant gynaecologist Dr Sarah Martins da Silva. "Also, most women freezing their eggs are in their late thirties or early forties, which, from a fertility point of view, can be too late."

Thankfully, figures collated from private clinics over the last five years paint a much rosier picture. They suggest the chances of an IVF cycle being successful are about the same, whether frozen or freshly harvested eggs are used. "I'd like to stress it's now an absolutely valuable technique," says Dr Melanie Davies, of University College Hospital, "especially for women facing infertility for medical reasons."

It seems this message is getting through,

with more women spending around £5,000 in an attempt to future-proof their fertility. New research from Yale University in America shows the reason women there are doing it is not, as it's generally believed, to further their careers, but because they haven't yet found 'Mr Right'. "The same is true here," says Zeynep Gurtin, who last year began the first in-depth study into egg freezing in the UK. As well as analysing data for The London Women's Clinic and the Centre for Family Research at the University of Cambridge, Zeynep has spoken to fertility clinic patients about their circumstances. "I ask whether they feel they chose career over family," she says, "and not

Laura is one of those women. Having suffered multiple miscarriages in her early thirties and later discovering she had premature ageing of her ovaries, she is now mother to a little girl. Laura says it was a "massive shock" when IVF worked at the first attempt, but having embryos left over, she decided to freeze them. She's now trying to get pregnant again and despite it being a rollercoaster for her and her husband, she says she has nothing but gratitude for the people who have made this possible. "I think egg freezing is a brilliant idea," she explains. "I just wish I'd done it earlier. My 20-year-old eggs would be amazing to have, compared to the

HAVING COMPLETED THEIR CYCLE, MANY SAY THEY FEEL LUCKY, GRATEFUL AND EMPOWERED

a single woman has yet said yes.

"I see three different types of women," she adds. "The first group are determined to become mothers but have given up on finding 'Mr Right' and want information on using donor sperm. The second group, women in their early thirties, are proactively planning and freezing their eggs at their biological prime. And the third, and fastest growing group, are women in their late thirties and early forties who, while aware they're standing on their reproductive precipice, still want to hold out for that elusive partner."

I ask Zeynep about the emotional state of the women entering London fertility clinics. "Attitudes vary," she explains, "and of course for many it's not Plan A. There's ambivalence, disappointment, especially from women whose social group has morphed into parents. Some are concerned about the physical side effects, while others are more focused on the emotional aspects. However, having completed their egg-freezing cycle, many say they feel lucky, grateful and empowered."

40-year-old ones I'm currently doing IVF with."

While there are many positive messages about egg freezing's potential, there are also voices of concern, with experts warning it shouldn't become the fall back option for the 'have it all' generation. "Increasing numbers of women think they can use it to hit snooze on the biological clock and alleviate the time pressure on relationships," explains Zeynep.

"The reality is, egg freezing risks not living up to the hype," adds Dr Ainsley Newson, associate professor of bioethics at the University of Sydney. "It should not be the default option. It certainly isn't an easy solution and should never be marketed as such." Dr Sarah Martins da Silva agrees, "Every week I see women in front of me and I have to tell them that at 42, they've left it too late."

So while science has made it easier to wait for 'Mr Right', and given women who not so long ago would have been forced to remain childless the chance to become mothers, there's still a long way to go before it becomes a guarantee of future happiness. **b**



THE PROCESS

"Although vitrification allows women to control the timing of pregnancy in order to fit with other commitments, it's important to remember that it's usually only effective for those under the age of 35, as the chances of having genetic problems within the eggs increase rapidly after that," says Dr Victoria Walker, fertility specialist at Institut Marqués.

The procedure is essentially IVF, but without the embryo transfer at the end. As with IVF, medication is used to stimulate a woman's ovaries to produce lots of eggs at once, and these are then harvested at the same time, usually under a short general anaesthesia.

"The medication comes in the form of small daily injections – the needles are similar in size to the ones used by diabetic patients injecting insulin – for about 12 days. And while it's never very pleasant to inject oneself, most patients find it tolerable," adds Dr Walker.

"In the days and weeks after ovarian stimulation, the patient may note she is feeling bloated, and some complain of constipation, but these side effects are often short-lived and her body will return to normal."