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UCD Assistant Clinical Professor

EUROPEAN ATLAS OF FERTILITY TREATMENT POLICIES

DECEMBER 2021



TIME FOR A EUROPEAN GAME-CHANGING MOVEMENT ON INFERTILITY



unite European Upon Aone 25 million citizens face

1 in 6 couples

WE CALL ON POLICY MAKERS TO

- Recognise the right to try to have
- Ensure equal, fair and rafe access to Settity treatments.
- Provide public funding for all line of fertility treatments.
- 4. Engage the public sector

 In providing better information
- Cempagns to remove the stigmal

JOIN OUR CALL TO ACTION AT HTTPS://FERTILITYEUROPE.EU/CTA/

INTERNATIONAL GUIDELINES

URDES AN PARLIAMENT

States that infemility is a medical condition recognised by World Health Organization that can have severe effects such as depression, points out that infemility is on the increase, and now occurs in about 15 to of couples, calls on the Member States, therefore, to ensure the right of couples to universal access to infemility treatment!

calls on the winder states to involve that all persons of reproductive age have access to femility treatments, negaridess of their social economic or martial status, gender identity or sexual order tatum, stresses the importance of classifiexamining fertility in the EU as a poblic health is suite and the pervalence of infertility and subfertility which are a difficult and pentul resulty for many families and persons, calls on the Member Status to take a notifier, lightly-based, including and non-discriminatory approach to fertility including measure to prevent infertility, and ensuring equality of access to services for all persons of reproductive age, and to make medically assisted reproduction available and accessible in Europe².

WORLD HEALTH ORGANISATION

Government policies could mitigate the many hequities in access to safe and effective fertility care?

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Who is behind the Atlas? This installive is pureered by Fertility Tumps (FI) and the European Parliamentary Found in Sessal and Reproductive Rights (IPP). We are quiteful to SSRRE IIM Survey on ATT and to the numerous national organisations are country experts who contributed to gathering the disapprented in the Atlas was produced in partnership with a group of superts in reproductive health (see above years) who designed the questions and structures. The people and the content of the European Atlas of Fertility Treatment Policies is the sale responsibility of Exposited office-plent lique supple and EFF content.

EUROPEAN ATLAS OF FERTILITY TREATMENT POLICIES JUNE 2024

For more information, please visit epfweb.org



TIME FOR A EUROPEAN GAME-CHANGING MOVEMENT ON INFERTILITY



25 million citizens face



VE CALL ON POLICY MAKERS TO:

- Recognise the right to try
 1. to have a child as a univ
 right across Europe;
- Ensure equal access to safe and efficient fertility treatm
- Provide public funding for all lines of fertility treatments;
- Engage the public sector in providing better infor about fertility and intertility;
- 5. campaigns to remove the sociated with infertility.

JOIN OUR CALL TO ACTION AT



VISIT ATLAS 2024 AT



INTERNATIONAL GUIDELINES

EUROPEAN PARLIAMENT

Notes that infertility is a medical condition recognised. by World Health Organization that can have severe effects such as depression; points out that infertility is on the increase and now occurs in about 15 % of couples; calls on the Member States, therefore, to ensure the right of couples to universal access to infertility treatment1.

WORLD HEALTH ORGANISATION

Government policies could mitigate the many inequities in access to safe and effective fertility care2.





Who is behind



The National Maternity Hospital

Vita Gloriosa Vita ~ Life Glorious Life

Launched 2022









Eligibility for Fertility Hub Referral

Female partner <36 years and trying to conceive ≥ 12 months

Female partner ≥36 years and trying to conceive ≥ 6 months

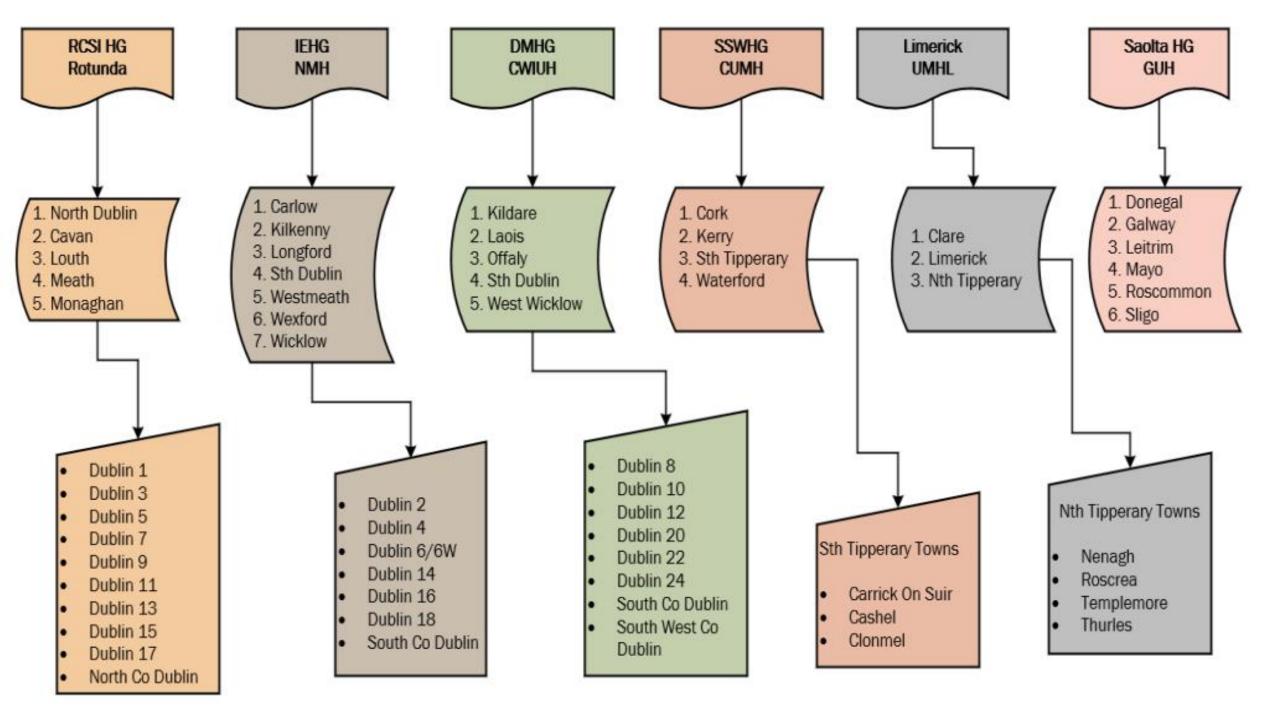
Age and BMI criteria at time of referral

Female BMI 18.5 – 35.0 kg/m²

Female age 18 – 42 years and 364 days

Male age 18 – 59 years and 364 days

Patient address within the Hospital Group Catchment Area

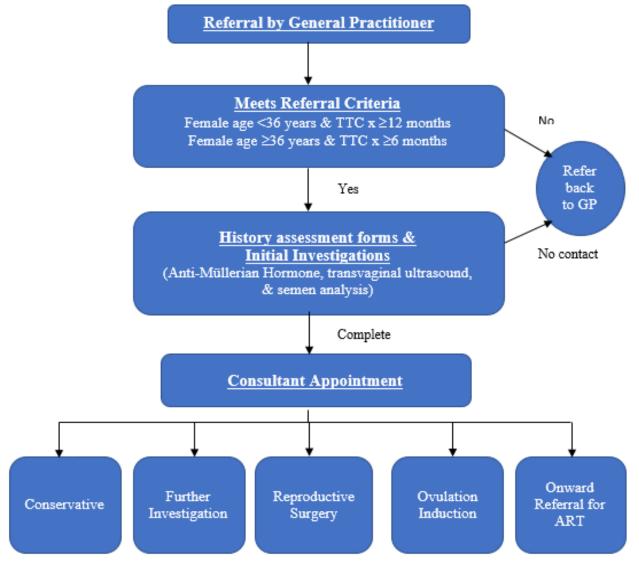




The National Maternity Hospital

Vita Gloriosa Vita ~ Life Glorious Life









Ovulation Induction

Letrozole is now considered first line treatment – less multiples than clomid Starting dose of 2.5mg once per day x 5/7

1-2 follicles developing, 3+ cancel cycle

Risks – multiple pregnancy 10% even with tracked cycles

80% will ovulate with OI treatment, Livebirth rate 40-50%

May need FSH injections (2nd line)

Irish Guideline (2023)

Women should be scanned for at least 1-2 cycles for OI

Not recommended for unexplained infertility





Ovulation Induction

Multiple pregnancy

3 Dublin maternity hospitals 1999-2008, Clomid use -

14 triplets

1 quadruplet

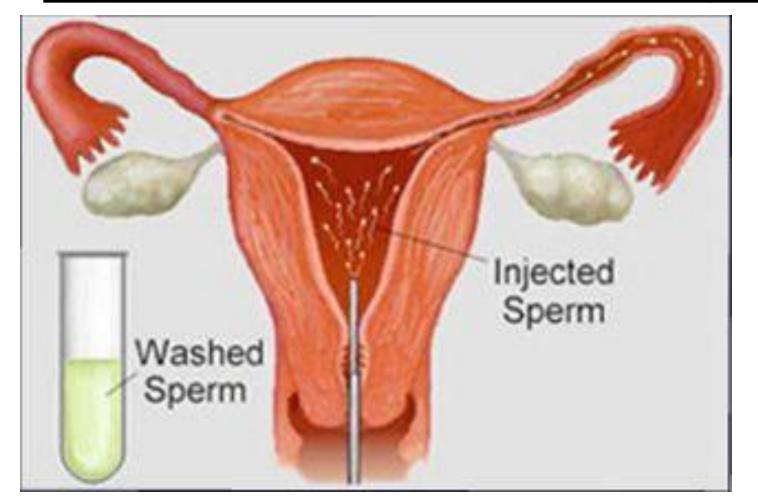
1 quintuplet

Basit I et al. Ir Med J. 2012

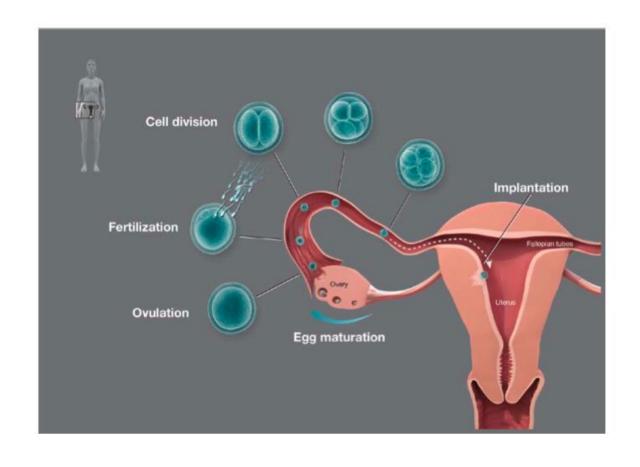


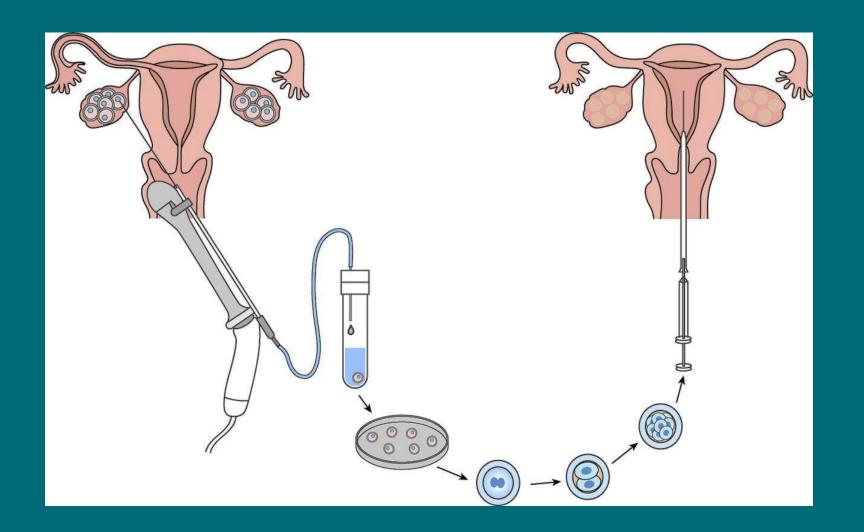


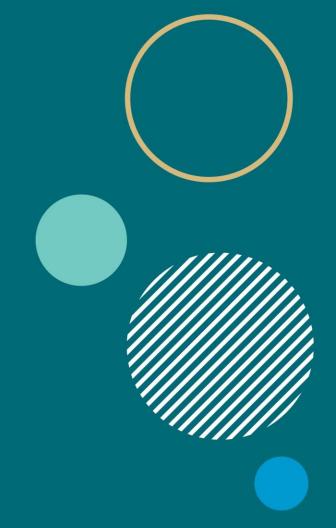
Intrauterine Insemination (IUI)



Natural Fertilisation

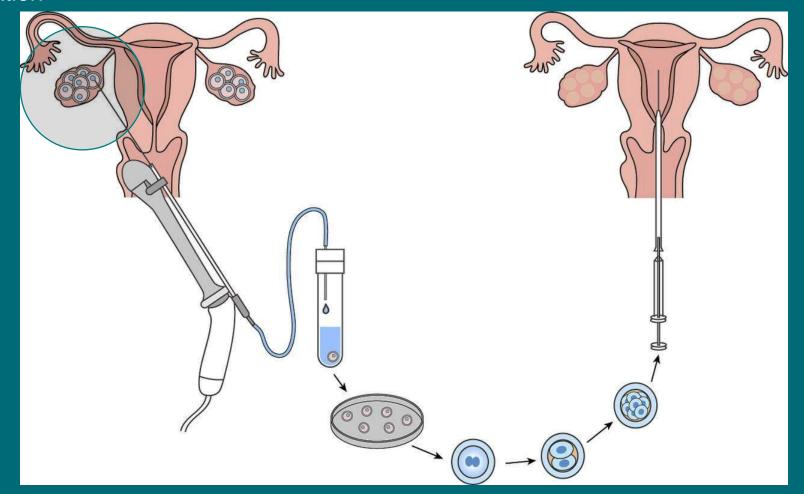


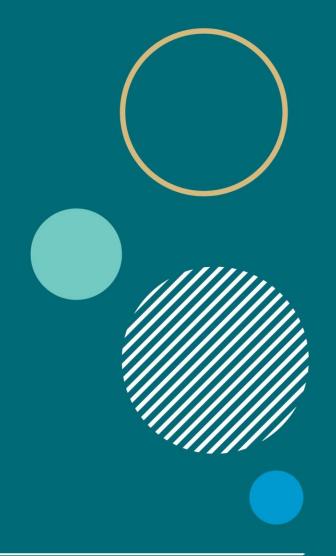




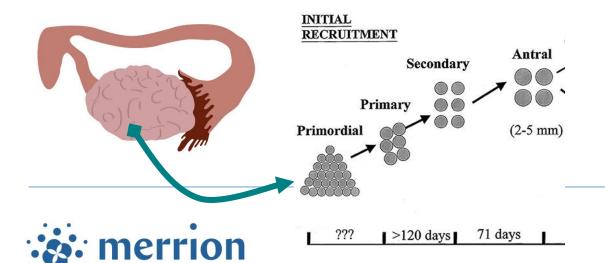


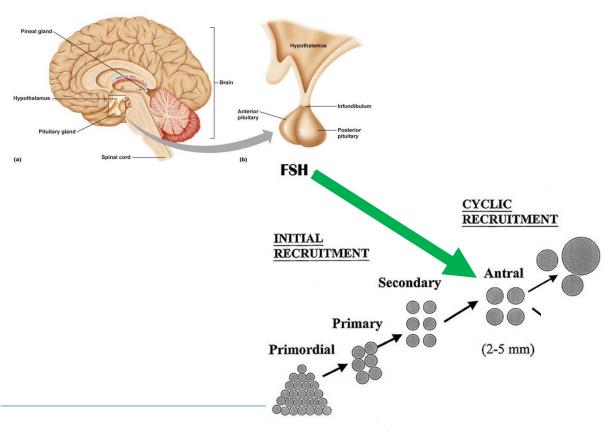
Ovarian Stimulation







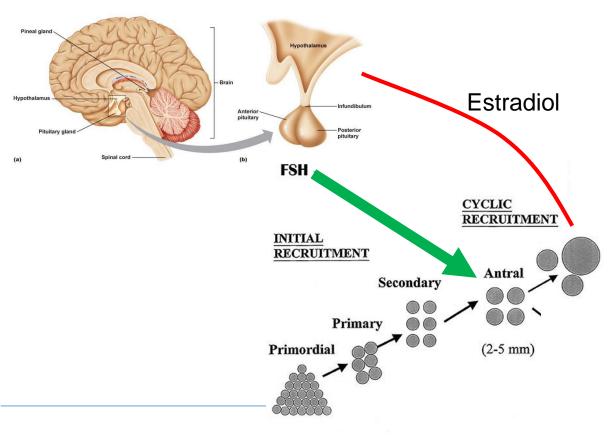






>120 days 71 days

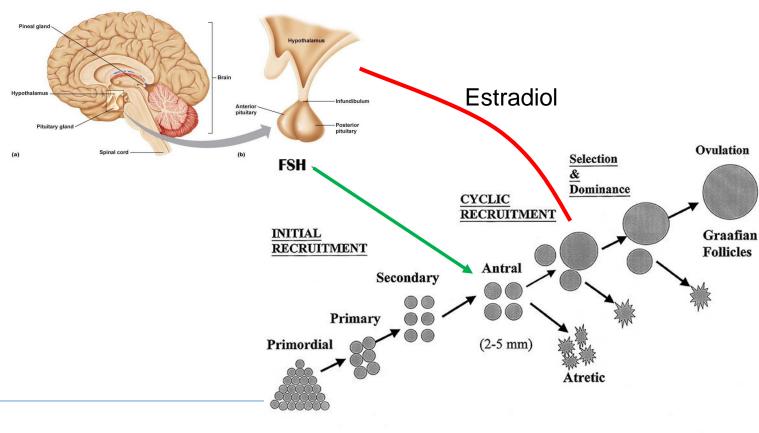
14 days





>120 days 71 days

14 days

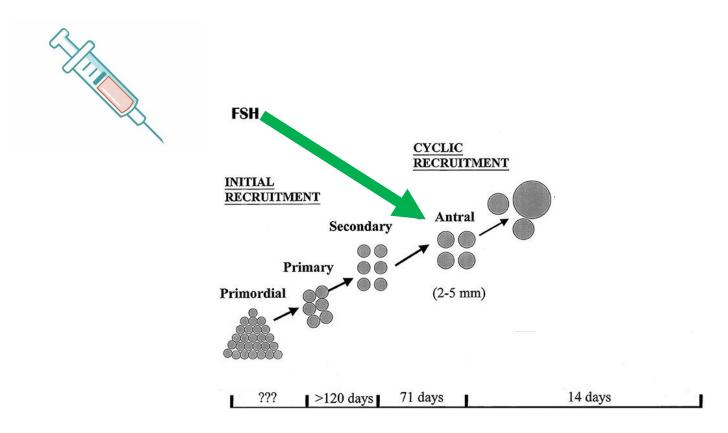




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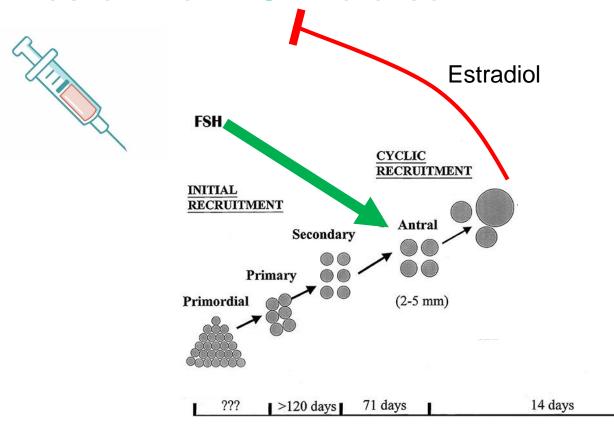
14 days

Ovarian Recruitment: Stimulated



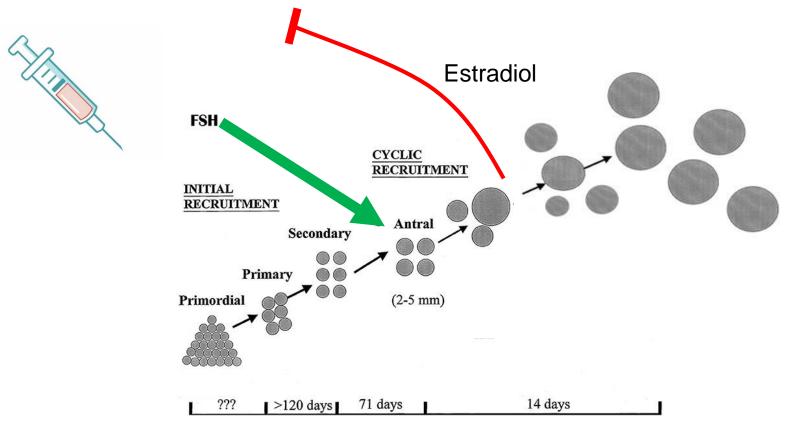


Ovarian Recruitment: Stimulated

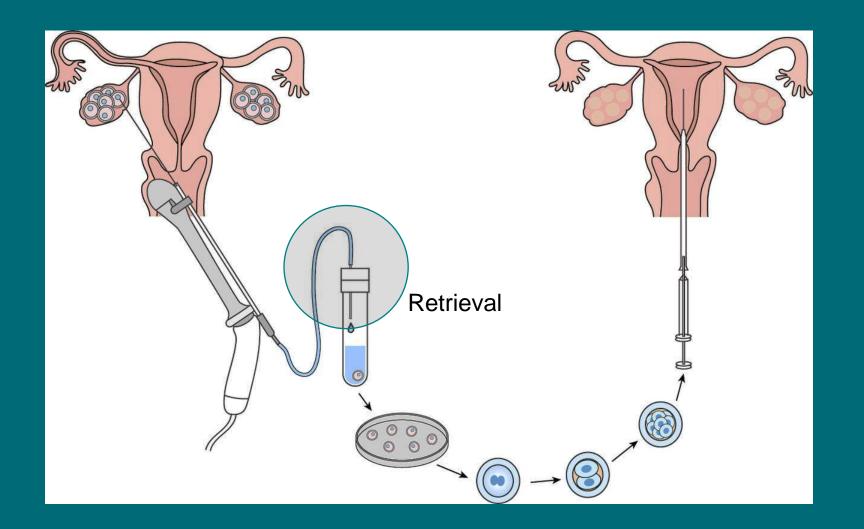


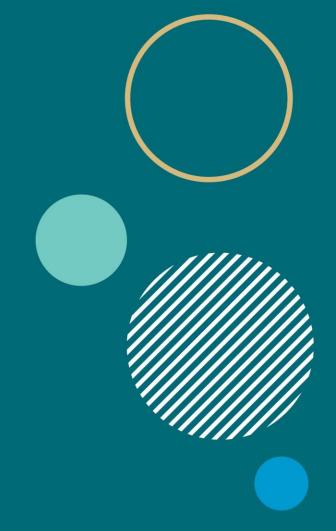


Ovarian Recruitment: Stimulated



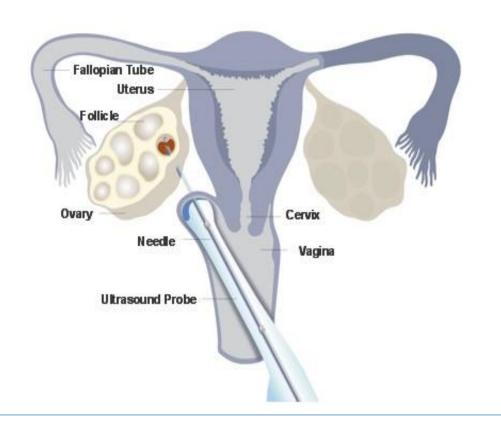






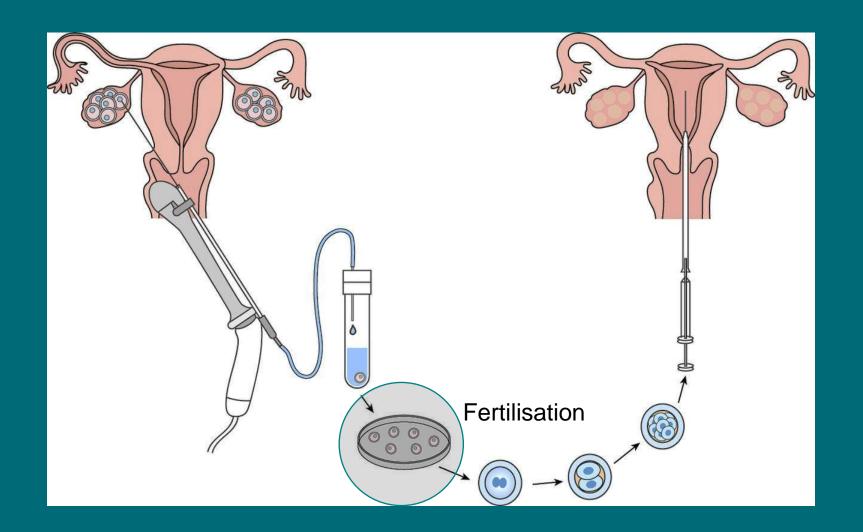


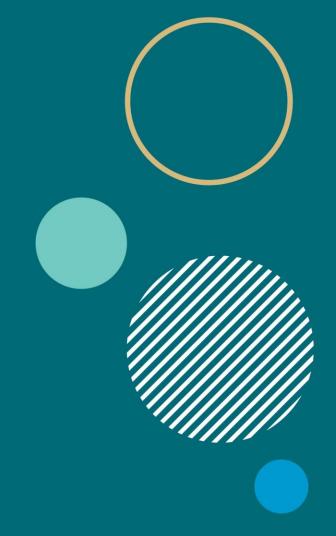
Egg Retrieval





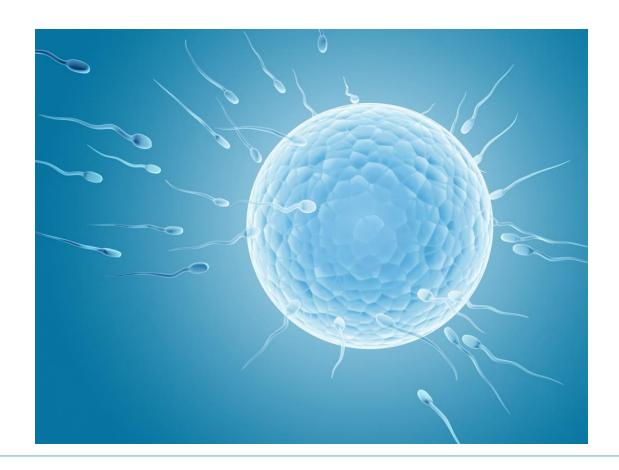






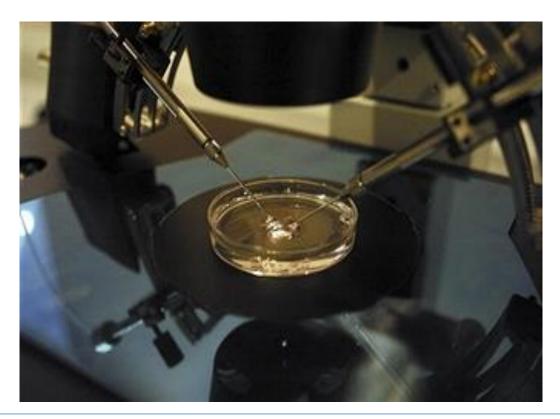


In vitro fertilisation (IVF)



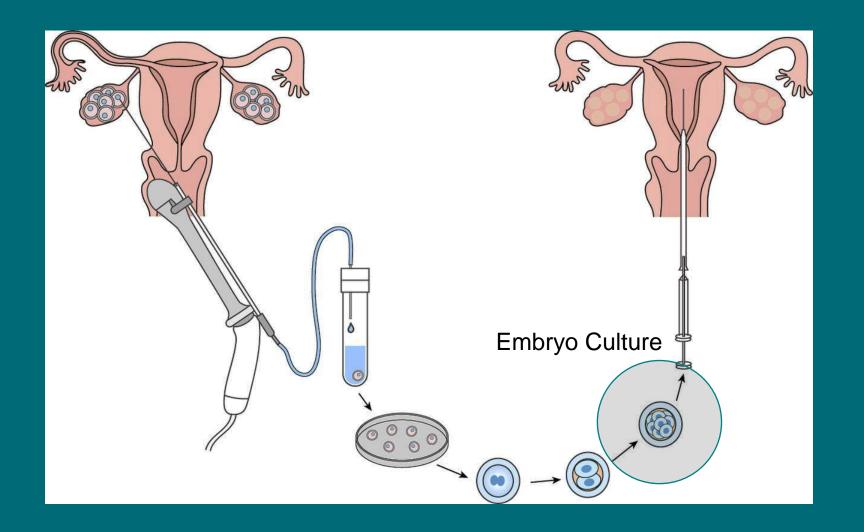


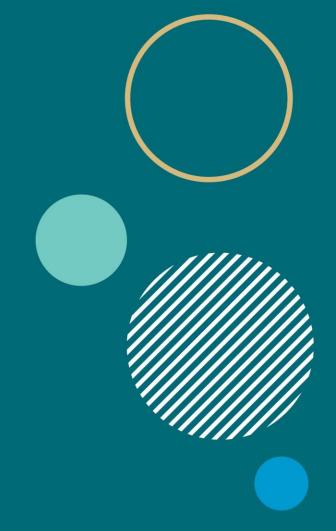
Intracytoplasmic Sperm Injection (ICSI)









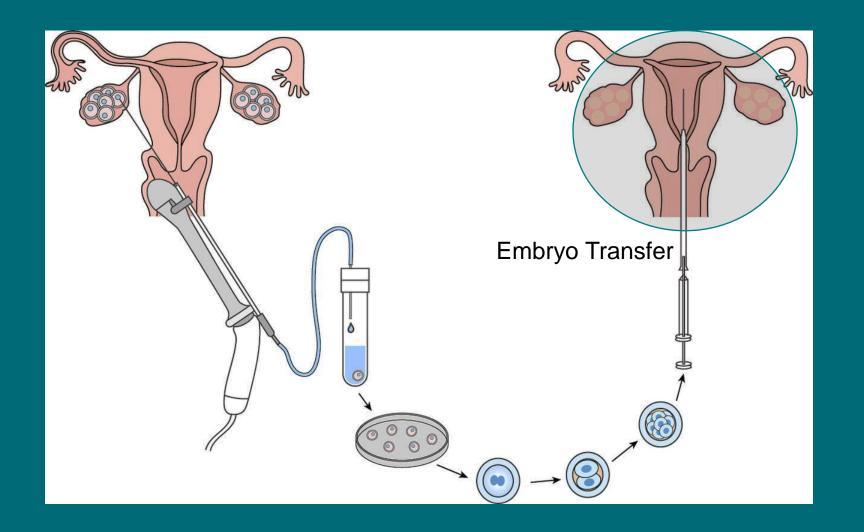


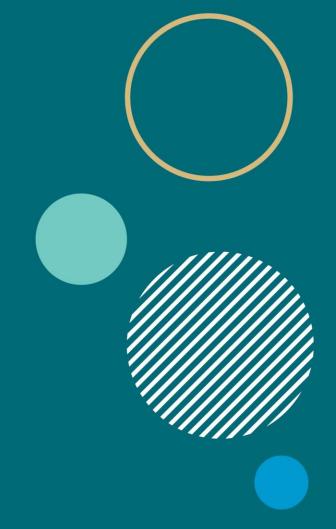


Embryo Culture

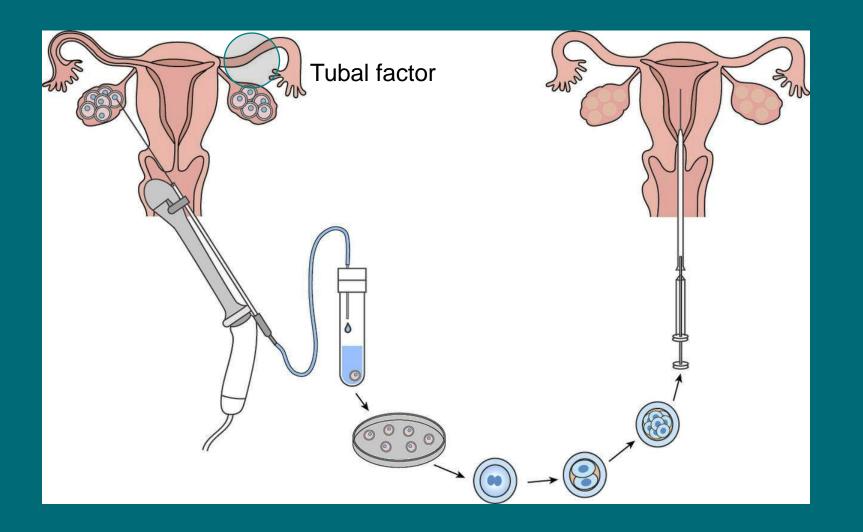


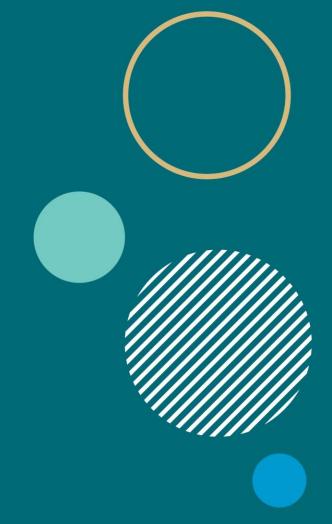




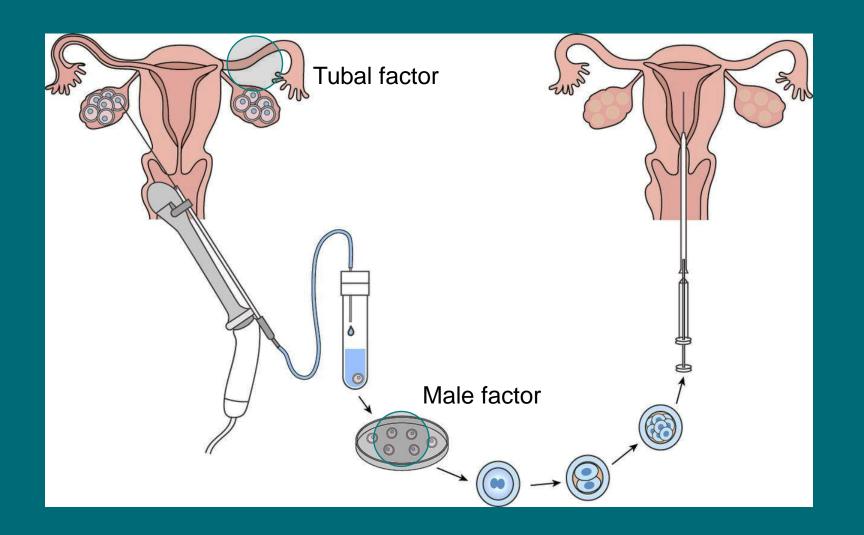


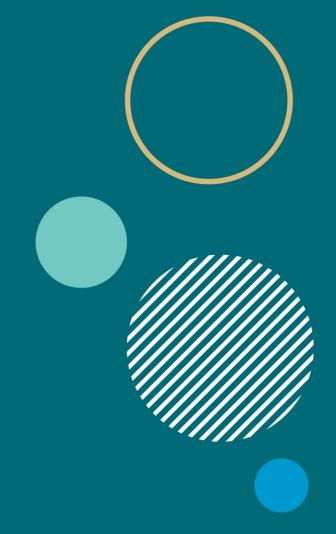




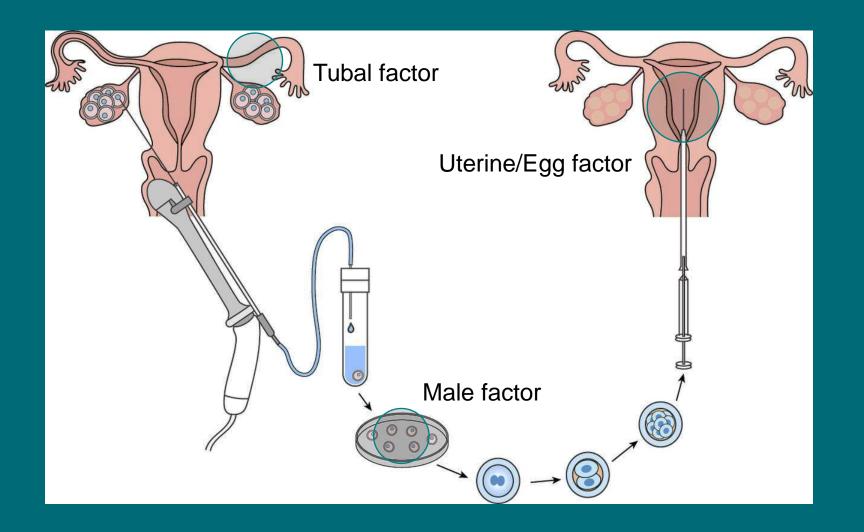


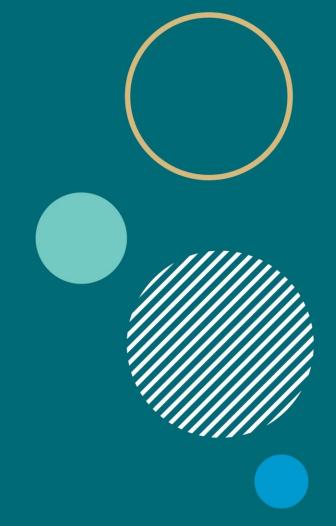




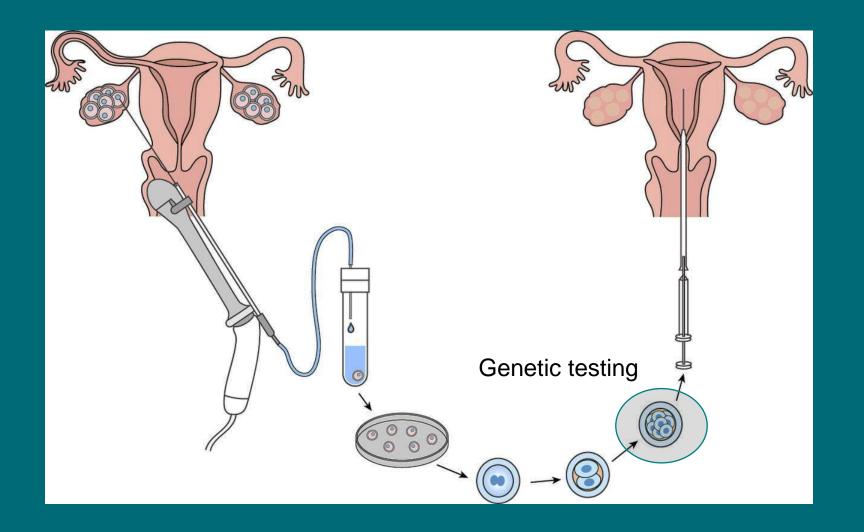


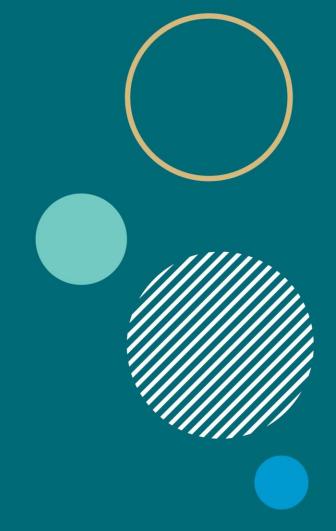




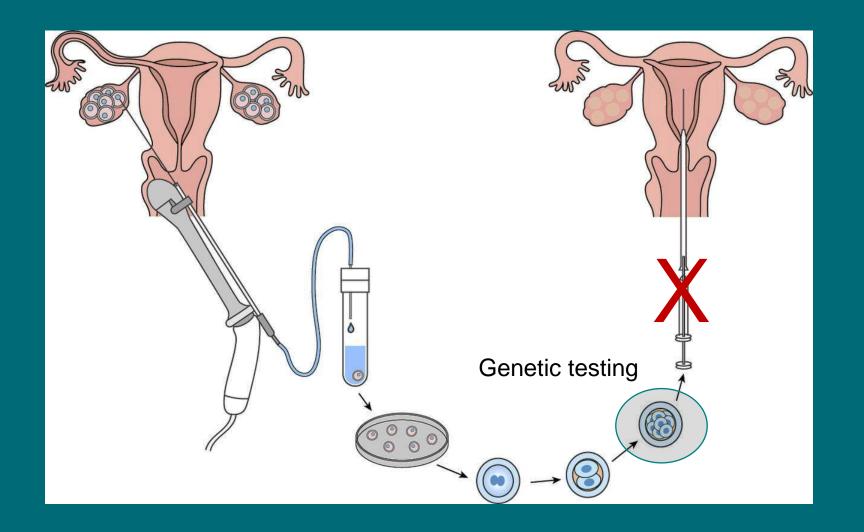


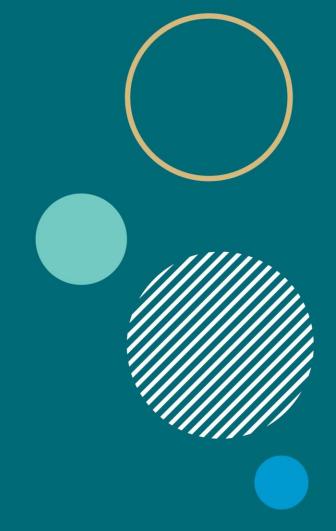


















Access criteria for ART (HSE)

- Referred by fertility hub
- Resident in the Republic of Ireland
- Relationship with partner for at least 1 year
- Never had a sterilisation vasectomy/tubal ligation
- No children with current partner, including if legal guardian to children
- Age 18 40 years + 365 days for female
- Age 18 59 years + 365 days for male
- Female BMI 18.5 30kg/m2
- No more than 1 round of IVF previously must have used all frozen embryos





Access criteria for ART (HSE)

Q Sections \equiv THE IRISH TIMES

Furthermore, access to free IVF (in-vitro fertilisation) will be expanded in two areas – to include donor assisted IVF and to assist couples experiencing "secondary infertility", which is when couples have an existing child but are having fertility issues.





If meet criteria - ART Approval clinic

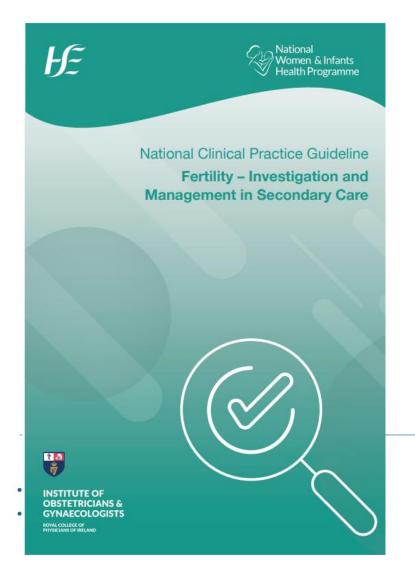
- Consent that agree to HSE terms no add ons
- Of the 8 approved private providers, patients rank 1 3
- Full care package provided by private providers SLA with HSE
- Full cycle to live birth funded (fresh and frozen embryos)
- If live birth during cycle, patients must self pay for subsequent frozen embryo cycles
- If unsuccessful cycle, referred back to fertility hub



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Quality and Safety in Practice Committee IC9P













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