When it comes to success in fertility treatment, the US outperforms Europe by a clear mile. In America, babies are born after a single completed treatment in 31 per cent of cases, compared with just 18 per cent in Europe. How can we account for such a significant difference?

“One difference is the number of fertilised eggs that are put back into the uterus,” says Dr John Waterstone, head of Cork Fertility Centre. “In America, it’s a matter of routine to put back two, three, four or even more embryos, whereas in many European countries the norm is to put back only one or two embryos. This may partly explain why America has higher success rates.”

Since an American trained scientist joined the staff of Cork Fertility Centre, success rates have increased dramatically. Dr Waterstone credits new laboratory techniques with this success. “We used to put back embryos after two days. Protocols were changed so that embryos were put back after three days or five days,” he explains. “After five days, the embryo is at the blastocyst stage. No other aspect of our practice altered and our success rates went from being average to being exceptionally good. Judging from our experience, better laboratory techniques are likely to account for some of America’s superiority.”

The incidence of IVF per head of population is lower in the US than it is in Europe. In many European countries IVF treatment is State-funded, whereas the majority of Americans must pay for their own treatment. “In America, fewer people have IVF because they probably can’t afford it,” admits Dr Waterstone. “This may mean that people who have just one or two unsuccessful rounds of IVF without losing out financially. IVF doctors in Europe may be treating less favourable patients than is the case in the USA, which could also explain some of the difference in success rates. Transparency of success rates in the USA also encourages clinics there to exclude less favourable patients in order to appear more successful.”

Another difference between fertility practice in the USA compared to Europe is Europe’s lack of egg donors. While in America there may be a lower rate of IVF treatment per head of population, there is also a much higher rate of egg donation treatment per head of population. “Americans have a very different attitude towards egg donation compared to Europeans,” says Dr Waterstone. “Egg donors advertise their services on the Internet in the US whereas in Europe the notion of selling your eggs is seen as politically incorrect, hence the shortage of egg donors.”

In Europe, if couples are not successful in a couple of attempts they may have several unsuccessful rounds of IVF without losing out financially. IVF doctors in Europe may be treating less favourable patients than in the case in the USA, which could also explain some of the difference in success rates. Transparency of success rates in the USA also encourages clinics there to exclude less favourable patients in order to appear more successful.

Additionally, there are also important differences in practice in the USA compared to Europe. In America, the majority of clinics are funded by the government and therefore have a financial incentive to treat more patients. In Europe, many clinics are funded by private investors and therefore have a financial incentive to treat fewer patients.

Another important difference is the availability of egg donors. In the USA, egg donors are often paid for their services. In Europe, however, the process of selling eggs is often seen as politically incorrect and therefore not widely available.

In conclusion, the differences in success rates between the USA and Europe can be attributed to a variety of factors, including differences in funding, practice, and availability of egg donors. These differences highlight the importance of continued research and development in the field of fertility treatment in order to improve success rates for all patients.
Egg Donation Abroad

As many Irish couples are now travelling abroad to avail of egg donation treatment, Dr Lavy of the New England Fertility Institute in the United States discusses their egg donation programme.

Although Ireland has seen huge improvements and developments in its fertility treatments, many doctors argue that Ireland is still lagging behind in its variety of cutting-edge treatments available to Irish couples. Even though Ireland now has a lot more fertility clinics it is still significantly behind the success rates in the United States with many doctors believing there is lots of room for improvement.

In fact, there is only one clinic in Ireland that offer an egg donation programme. According to Dr Lavy of the New England Fertility Institute, there are five main categories in the egg donation programme that recipient men and women fall under. Firstly, there are women with age related decreases in ovarian function. Most of these women are in their early 40’s and their decreased ovarian function does not allow for successful pregnancy.

Premature ovulation failure, or other genetic diseases, environmental factors and surgery can also result in fertility problems. As eggs lost cannot be replenished, egg donation is a remedy for these problems. Even in the absence of ovarian function the uterus, under certain hormonal control, retains its ability to carry a pregnancy.

Egg donation is also suited to couples who have had repeated IVF failure due to poor egg quality. It is also a viable option for women who carry genetic conditions that affect her ability to conceive naturally.

Finally, egg donation is suited to gay couples and single men that would like to have children who are genetically related to both partners.

Egg donation is a relatively new treatment in reproductive medicine and has only been practiced in the United States for just over 20 years. The process has gradually become more common place as the rates of success have improved, as well as the increased availability of donors. Rigorous screening has brought standardization to this area and ensures high quality donors.

The process involves an initial consultation with your doctor and the egg donor team. At this early stage you also meet with the clinic’s psychological coordinator. This meeting is important as it gives you the opportunity to ask whatever questions you have regarding the emotion impact of egg donation and of making sure that it is the right option for you. This same councillor will also meet with the donor.

Once you have decided on egg donation, you and your partner will be screened and the female partner will have hormonal tests. Next, you begin the process of choosing a donor which usually involves listing the important characteristics you are seeking in a donor.

Once an egg donor has been chosen, the couple and the donor prepare for egg donation. This involves egg retrieval, fertilisation, and transfer. Two weeks after the transfer a pregnancy test will determine if the cycle was successful.

According to Dr Lavy, there are a number of advantages for individuals living in Ireland to avail of donor egg treatment in the US. “Donors are completely anonymous. There are no laws allowing children of donors to locate the donor. Our program hosts a large pool of available donors which helps to alleviate the wait time in locating a donor. “All donors are carefully screened. This screening includes a medical review, evaluation of egg reserve, a medical examination, a psychological assessment, genetic screening and final assessment where the team reviews the information and comes to a decision on the eligibility of the donor into our program.

“At New England Fertility Institute, approved donors must be between the ages of 21 and 30, have a healthy family history, and must be a non-smoker with a normal body mass index.”

According to Dr Lavy, this stringent screening enables the clinic to control donor selection, and to improve quality and success rates.

To further assist the recipient couple, a partial profile of each of the donors is available on the New England Fertility Institutes’ website, as well as photos of the donor. The anonymous donors provide a detailed history of themselves and their family. A fifteen page document is also available for the couple to review which includes current and childhood photographs.

The American Society of Reproductive Medicine advises IVF clinics to allow only six retrievals per egg donor. At the New England Fertility Institute, their success rates for egg donation using their donors is an incredible 70 per cent. The costs associated with egg donation in the United States is approximately $25,000 - $35,000.
Barbados Fertility Centre

First class cutting edge fertility treatments without a first class price

Barbados Fertility Centre opened in 2002 to provide fertility services for Barbadian couples, and other couples experiencing fertility problems in the Caribbean where there had previously been no such facilities. The Centre has now been open full time since 2004 and provides first class fertility treatments to patients from all over the world. In fact, 80 per cent of patients now come from outside Barbados and it is recognised internationally as a centre of excellence for affordable IVF treatment.

Co-founders Dr Juliet Skinner and Anna Hosford, both with vast amounts of experience in the area of fertility (Anna is a native of Cork and worked in one of the top fertility clinics in the USA while Barbadian Dr Skinner studied in Trinity and worked in the Coombe Hospital), recognised that there was an increasing demand for more personalised care and treatment at lower costs than patients were having to pay at home. They used their knowledge to set up the Barbados Fertility Centre, a clinic that could provide a high standard of care and more.

Barbados Fertility Centre is at the top of their game, providing cutting edge fertility treatments that are the envy of clinics all over the world. Among the treatments provided are donor eggs, donor sperm, pre-implanation genetic screening (PGS), embryo vitrification and now egg vitrification. Vitrification is the term used for fast freezing, which gives couples a much better chance of success than traditional slow freeze methods.

Complimented with state of the art equipment and technology, the standard of care is unquestionable. In 2007, the American medical accreditation body, the Joint Commission International, awarded the gold seal of approval to the Barbados Fertility Centre for their strict patient safety standards and exceptional operating procedures.

Carefully selected, each of the internationally trained staff at the clinic is incredibly focussed on individual care and making a positive difference in the lives of every couple they treat. Each patient from the moment of contact with the clinic, is enveloped with the dedication and fervour of making the patients dream of having a family come true.

One of the many challenges facing many couples at home is that you can’t hide the fact that you are going through IVF. However having IVF treatment on the warm, beautiful island of Barbados allows you to keep complete anonymity and gives you a chance to get away from prying eyes. Fertility treatment can be hugely stressful for patients - according to studies it is the second most stressful diagnosis in the world after HIV – and the lower your stress levels the greater your chances of success. You can see the stresses of a couple melt away within 24 hours of them arriving at the clinic. They don’t have to explain to their boss where they have been or worry about rush hour traffic!

Everything at the Barbados Fertility Centre is aimed at keeping your fertility treatment as stress-free as possible. A personalised taxi collects you from the airport and brings you to your hotel where you meet with your patient liaison manager who checks you in. You are given a local mobile phone so that the medical team can contact you at all times and so you don’t have to worry about roaming charges. Added to this are the acupuncturists, reflexologists, massage therapists and healthy mind-body therapists that are available to you at the clinic throughout your stay in Barbados. All this, combined with the naturally beautiful island of Barbados, makes for a wonderfully stress-free experience.

The success of the Barbados Fertility Centre is directly attributed to the success rates of their patients. Infertility affects everyone. Statistics from January to June of 2009 make good reading for all patients. They show that the clinical pregnancy rate (CPR) for women aged under 35 stands at 51.2 per cent per embryo transfer (ET). The CPR for women of all ages with day four or five ET is 63.3 per cent, while the CPR for women of all ages with IVF is 60 per cent per ET.

Patient feedback has shown complete confidence in the medical team at the Barbados Fertility Centre. Couples need to have 100 per cent confidence in their clinic to prevent further stress because ultimately if stress levels go up pregnancy levels go down. At the Barbados Fertility Centre, patients have this reassurance. They are given the best chance of success. “For you and I, success is just a number. For our patients, it’s a baby.”
When your best chance of a pregnancy is through egg donation, your treatment may start with an airline ticket

Cathy Scott recounts her own experiences

Every week, planes arrive at St. Petersburg’s international airport containing patients heading for the AVA-Peter fertility clinic in the centre of the city. And every week, the same planes depart again for destinations all across Europe, often containing more people than are stated on the boarding cards. With a pregnancy rate of 60% for egg donation, this Russian clinic is responsible for a lot of extra, very tiny, unseen passengers. In fact, one of them was my own child, conceived with the help of a Russian egg donor.

It’s not actually surprising that an increasing number of infertile couples are seeking egg donation abroad. Within Ireland itself, egg donors are so scarce that Irish clinics often have to send the male partner’s frozen sperm to Eastern European countries where it is used to fertilise eggs from local donors. The resultant embryos are then frozen and sent back to Ireland before they can be transferred to the would-be mother. However, freezing embryos at any stage reduces the chances of success. And with prices of up to €12,000 for egg donation treatment (plus additional costs for tests and consultations), Irish couples are finding they can often save thousands of Euros and achieve a higher chance of success by going directly to a foreign clinic.

So how do you choose the right one? It’s a huge investment, not just financially but also in terms of hopes and dreams, so my husband and I researched the options. We decided not to go to Spain as we wanted a donor who resembled us (we’re both blond with blue eyes), and didn’t want to ‘share’ the eggs with other people as this would reduce our chances. We also looked at Cyprus, but found it extremely difficult to communicate with the staff at the clinic as few of them spoke English and the doctors who did often forgot to phone me back. The UK was a non-starter due to long waiting lists, sky-high prices and the use of frozen embryos from foreign egg donors. And then we tried Russia. Simply by googling, we came up with AVA-Peter (www.avapeter.com).

The first big surprise was that after e-mailing the clinic, the consultant herself called me to answer my questions in perfect English. This cut out all the usual communication problems when having a three-way conversation via translators and medically untrained receptionists. The second was that there was no waiting list: as the clinic maintains a large bank of medically and psychologically pre-screened donors, we could start as soon as I was ready. All the donors had proven fertility (i.e. at least one child of their own), were aged under 30 (very important as younger donors have higher success rates), and would donate anonymously under Russian law.

Dr. Olga Zaytseff, or Dr. Olga as we called her, was very clear about every aspect of the procedure, and the costs were much lower than elsewhere. So we booked our flight. At the initial appointment, we had blood tests, a semen test, a smear test, an endometrial scan and a frank discussion with Dr. Zaytseff in a clinic that was so clean, we could have eaten our lunch off the floor. As AVA-Peter has its own laboratory, the results were available just a few hours later. They were okay, so Dr. Zaytseff offered us a donor with the same hair colour, eye colour and blood group as myself, and started me on a course of medication the very same day. Just six weeks later, after a second visit to St. Petersburg to fertilise the eggs and have two embryos transferred, I was pregnant with my daughter.

After 8 years of unsuccessfully trying for a child and 7 failed IVF attempts, it was incredible to finally pass my first pregnancy test at the ripe old age of 45. Getting on that plane to Russia was the best thing we ever did.