



FERTILITY FACT SHEET

San Ramon / Orinda / San Jose

When it is not in your best interest to do IVF with your own eggs?

There are times when your physician may recommend that you do not start an IVF cycle using your own eggs. The American Society of Reproductive Medicine Ethics committee suggests that there are situations in which IVF with your own eggs is *futile* (1% or less live birth rate) or of *very poor prognosis* (1-5% live birth rate).

In these situations the ASRM suggests that the most ethical thing for a physician to do is to recommend against treatment. The reasons for this are potential risks from the treatment outweighing the benefits of the very low chance for a successful pregnancy. These risks may include medical risks from the procedure (infection, bleeding, injury to bowel or bladder, and anesthetic risks), financial risks (each treatment is very expensive) and the emotional toll from treatment that has very little chance for success. As patients consider whether to proceed with treatment that will give them less than a 1 in 20 chance to have a child, they need to consider how this treatment may affect them, and their ultimate stamina to then continue treatment with donor egg or adoption.

We have identified certain clinical situations where we feel the chance to have a successful pregnancy is less than 5%. Each case will be individually considered. We would highly recommend not undertaking treatment using your own eggs if you are in one of these groups.

- Women over 45 years of age.
- Women over 43 or older with any 2 of the following:
 1. FSH > 10
 2. AMH < 0.9
 3. Antral Follicle Count (AFC) < 9
- Women over 40-42 years of age with:
 1. FSH > 12
 2. AMH < 0.5
 3. AFC < 8
- Women 38 or younger with:
 1. FSH > 14
 2. AMH < 0.1
 3. AFC < 5