



ICE ICE BABY

Between breakups and boardrooms, today's women have it tough when making time for babies. We look at those who are taking control and choosing to invest in their future by freezing their eggs. Is it fail-safe fertility or false hope?

BY SARAH LANG

Kim Kardashian did it on TV. *Modern Family's* Sofia Vergara along with Hugh Hefner's ex Bridget Marquardt have done it. And rumour has it that Jennifer Aniston and Jennifer Love Hewitt have done it too. No, we're not talking about Botox, boob jobs or even bikini shoots. We're talking about getting your eggs frozen for potential future use, usually when Mr Right comes along. Just freeze, thaw, fertilise and implant.

What began in the 1980s as essentially a tool to preserve the fertility of women facing cancer treatment has, in the 21st century, become a weapon in the war against age-related infertility. And it's easy to see why, when the modern phenomenon of women delaying motherhood butts up against the fact that a woman's fertility starts declining from 27, falls sharply from 35 and plummets from 40. As word has spread, egg freezing for 'social' rather than medical reasons has entered the mainstream around the world, particularly in Italy and Spain. And now it's recently made news here.

GRABBING HEADLINES

In 2013, social egg freezing – social oocyte cryopreservation (SOC) in science speak – has hogged headlines with far more catchy terms: game changer, gender-equaliser, stopping the clock and buying time. In May, US journalist Sarah Elizabeth Richards, who has frozen her eggs, released the book

Motherhood, Rescheduled: The New Frontier Of Egg Freezing and the Women Who Tried It. The self-appointed SOC cheerleader has been pushing the procedure in articles titled 'Why I Froze My Eggs (And You Should Too)' and 'Why ALL Women Should Freeze Their Eggs at 30'. No wonder the spotlight then swung onto world-leading fertility expert Professor William Ledger when he spoke at an Adelaide conference in April. NEXT talked to Ledger in order to clarify comments that made global headlines but were, he says, partially misrepresented.

"I said women in their late 20s and early 30s who aren't planning on having children until later should consider freezing their eggs. The key word is 'consider' because this is something women can do now and they should think about it."

Ledger didn't intend his comments to cause a stir, but they have. Women are now asking about it at fertility clinics. Margaret Merrilees, scientific director of Fertility Plus – a largely public Auckland clinic that usually freezes eggs for medical reasons – says they've been fielding enquiries.

"Usually the woman hasn't found Mr Right, is nearing 40, hears about this and thinks 'I'd like to put away some eggs'. But most are shocked to find out just how expensive it is."

Let's say you get your eggs frozen at Fertility Associates, New Zealand's largest fertility clinic and, so far, the only one to

freeze eggs for social reasons. Once you add up the egg collection, medication, doctor consultations, counselling – the tally's \$9000-\$10,500. And that's not counting the storage costs after six months is up (\$252 a month or \$1520 for 10 years), nor the cost should you eventually use the eggs (\$4195-\$5000 per cycle, including medication etc).

NO GUARANTEES

Dr Richard Fisher, Fertility Associates' co-founder, working clinician, and the country's best-known fertility expert, knows the cost is off-putting, if not prohibitive.

"When you're freezing eggs with no idea if you'll need them, it's a significant cost." To the question, might the price fall? "I wouldn't hold my breath," Fisher replies.

As the technology becomes more complex and outcomes get better, he says, the costs usually rise. Most enquiries come from single, professional women pushing 40 and earning good money, but he's certainly not trying to talk them into it. "They say 'why wouldn't I just do it now?' The answer is 'we will if that's what you want, but you have to understand the issues.'"

"This gives a woman a considerably better chance of conception than she'd have trying naturally. This isn't a guarantee. This isn't insurance; this ensures if trouble strikes, you've got a good chance of dealing with it." Mandatory counselling reinforces the message before the process starts. >>



Occasionally, enquiries progress to actual treatment, which is offered in Auckland, Hamilton, Wellington and Christchurch.

“A small but increasing number of women are freezing eggs as a back-up for the future,” Fisher says. Between 2004 and 2012, Fertility Associates performed 57 egg-freezing cycles for medical and eight for social reasons. Of the 11 cycles so far in 2013, two were for social reasons. Eggs can be frozen for up to 10 years, but some women have already been back after meeting the right man; the arrival of the first baby conceived this way is – at the time of writing – imminent.

While the numbers aren’t big, based on international trends, along with scientific advancements and better data, Fisher expects demand to swell over the next few years.

What about the process itself? As Fisher explains, it’s the same as IVF (apart from the fertilisation technique). Women give themselves hormone injections for 10-12 days to stimulate ovulation of multiple eggs. Egg collection takes 10-15 minutes, usually under sedation.

“Women cope with it pretty well,” Fisher

says. Ledger, however, says while the stages are medically safe, it puts a healthy woman through an intensive medical process.

“You’re injecting hormones you don’t otherwise need, then there’s egg collection. Some women find that intrusive and unpleasant. These are mostly full-time working women and the whole process takes time out of their days.”

Plus if you have the eggs implanted it’s well documented that IVF is emotionally and physically taxing. Because society quickly grew comfortable with IVF, Ledger thinks the same will likely happen with SOC. “People are a bit suspicious at first but as they learn more, it will become more accepted.”

We’re not there yet. None of the women who had eggs frozen for social reasons at Fertility Associates were prepared to be interviewed. Fertility Associates’ Hilary Bush says the women don’t want to talk publicly because currently society is far less comfortable with freezing eggs for social reasons (as opposed to medical reasons) as it’s still a new trend. Social egg freezing,

Fisher says, is still in its infancy here because clinicians held back on using the technology widely until the emergence of consistently good data.

That begs the question: from what we now know, is social egg freezing buying time – or a waste of time and money?

Fertility Plus’ Margaret Merrilees, a highly regarded fertility scientist, medical adviser to Fertility NZ and a University of Auckland visiting professor, says the science stacks up, with some excellent results coming from recent studies in the research hubs of Italy and Spain. That’s largely down to the process of vitrification: the 21st-century technique of flash-freezing eggs in liquid nitrogen, which preserves the eggs’ quality by freezing them within seconds.

Ledger heralds vitrification as a “game changer”, citing a study which found that a 40-year-old woman implanted with eggs vitrified from when she was 30 is six times more likely to have a baby than by trying to conceive naturally at 40. What’s more, that 40-year-old no longer has the one-in-three chance of miscarriage and the one-in-100 chance of Down syndrome associated with her age, but the much lower risks of a 30-year-old.

THE BIG FREEZE

Vitrification is the reason why 50% of the estimated 2000 babies born this way worldwide arrived in the past five years, and it’s the catalyst for tens if not hundreds of thousands of women freezing their eggs. It’s tricky to get exact stats because there’s limited long-term and no local data, no central reporting database internationally, and few eggs have been thawed yet. However, an American Society of Reproductive Medicine (ASRM) report released in October 2012 found that, with young patients, egg-freezing techniques produce live-birth rates comparable to IVF cycles using fresh eggs: between 40-45%.

Here comes the hitch: the older you are at egg collection, the worse your chances of conception later, as the quality and quantity of eggs decline with age. If a woman is 38 at egg collection, she has a less than 10% chance of having a baby from those eggs, and as age at collection goes up, that percentage falls further. What’s more, older women may need more than one egg collection to hit the target of around 10-12 eggs, and, later on, are more likely to need several cycles to get pregnant.

So when is the deadline for most women?

Ledger, who’s reviewed data from five prominent international studies, puts it at age 35. A woman 35 or under who freezes 12 eggs has a 50-50 chance of having a healthy baby later on from those eggs, he says. Percentage-wise it’s the younger the better, but Fisher says mid-to-late 20s is ideal. “You’ve got to be mature enough to know what you’re doing.”

TICK TOCK

Kelly*, a 25-year-old Auckland who’ll only speak anonymously, is considering freezing her eggs because she’s worried there’s not enough time to “make her mark” in the field of marketing before her fertility wanes. A 50-something friend, who didn’t meet the right man while fertile, told Kelly she wished SOC had been around when she was younger. “She thought it was such a good security option.”

Kelly plans to do more research, but finds the intrusive process and cost off-putting. “It’s about priorities. If you really, really want children and you’re that worried about it, then this is a good insurance policy.”

Tess Labett, a Wellington corporate-research director in her 40s, also sees it as insurance. At 26, she was diagnosed with endometriosis and told she might well have trouble having children which, she says, was like a “slap across the face”. At the time she was living with her fiancé, “but because the relationship didn’t feel right” she called off the engagement. Later she rescheduled the wedding, partly because she felt time pressure to have children.

“Had egg freezing been an option, I may have done that rather than rush the marriage and baby decisions,” Labett says.

At 31, she had Louie, now 16, through IVF, and later conceived daughters Evie, now 14, and Bo, eight, naturally (after discovering and treating her other health conditions). Labett thinks it’s great that women can freeze eggs for social reasons.

“I’m all for women having as many options as possible because we’re in a pressure-cooker [situation] about when we should have children. With egg freezing you can relax, especially if it’s done before age 35 so you don’t worry about the eggs’ quality.” Moreover, she knows women who’ve spent \$40,000-plus on IVF, which costs \$9500-\$11,000 a cycle, so thinks SOC might be more cost-effective. “We insure what we value most in life: our properties, contents,

health – why not our fertility? Now, I worry my daughters may end up having the same health problems. So I’d fully support them considering the process.”

It’s not unheard of for some wannabe grandparents to help out. Ledger says if he himself had daughters who weren’t ready for children, he’d give them an egg-freezing cycle for their 30th birthdays (and a test to estimate their ovarian reserves). Luckily for his bank balance he has three sons, but Fisher has seen a young woman whose parents are paying.

Someone who is unconvinced the costly gamble is worth it is University of Auckland associate professor Neil Johnson, who’s also a specialist with fertility clinic Repromed Auckland: “We potentially offer it [SOC], but don’t generally promote it.”

Johnson – who chairs various organisa-

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tions, among them the Australasian fertility-research network REACT-ANZ along with the Australasian committee that oversees fertility specialists’ higher training, outlines the catch-22.

“We’re saying you must freeze eggs by 35 for it to be efficient and relatively useful, but most of those women can’t afford it. It’s usually older women who strongly want to freeze their eggs, but then it’s not very effective. Egg freezing seems to be the ambulance at the bottom of the cliff which, in almost all cases, arrives too late.”

THE GAMBLE

He’s not saying don’t do it. “It’s a very real option and issue for women, but a radical step to take.” Rather, Johnson wants to see better information and systems so women don’t need to turn to SOC – and a central reporting database to share and access egg-freezing information internationally. “Who is it [SOC] appropriate for? What’s the likely outcome? For now, there’s no real consensus, and the outcomes are at best uncertain.”

Leading European fertility researcher Tomáš Sobotka aired his concerns at the first International Symposium on Social Egg Freezing in Spain in February, making a convincing case that uptake will be limited by various factors, including “real-world forces”: high costs; no guarantee of success; lack of social acceptance; the stress involved; the need to decide at an early age; the tiny fraction (between 0.7 and 7.6%) who will use the eggs.

He also mentioned ethical concerns: unequal access by high-earners, possible postponement of childbearing contributing to infertility, and potential health risks for older mothers.

It’s also worth noting the lowered risks of miscarriage and Down syndrome relate to the baby’s health, not the mother’s. She faces the same health risks as any older pregnant woman (which include diabetes and pre-eclampsia). But Ledger says these risks boil down to an individual’s health as she ages. “Most women who take the trouble to freeze their eggs are women who’ll look after their health.”

When it comes to the child’s health, the news is, as Fisher puts it, “entirely reassuring”. In 2012, the European Society of Human Reproduction and Embryology endorsed egg freezing as safe, and ASRM removed the procedure’s ‘experimental’ label, saying children born this way are just as healthy as children born from ‘fresh’ IVF. However, ASRM stopped short of endorsing SOC, citing a lack of data on safety, efficacy, cost-effectiveness and potential emotional risks. It also raised concerns that marketing this technology “may give women false hope and encourage women to delay childbearing”.

Fisher says there is that danger – and that women considering the process need to know there are no guarantees. “Egg freezing isn’t a way of putting off having children if you could reasonably do that today, because it’s too difficult, too hard and too unsure.”

Experts stress this isn’t a yes-you-should, no-you-shouldn’t debate, because only the individual woman can decide whether it’s worth the gamble. As Ledger says, it’s not for him to recommend it.

“We put out what can be done and let women make an informed choice. If they want to spend their money on egg freezing rather than a holiday in Bali, that’s their choice. But it’s a shame if they miss out because they never knew it was possible.” □

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