Studies of women's attitudes to 'social egg freezing' find reasons differ with age

EurekAlert

Rome, Italy: Women of different ages differ in their reasons for wishing to undergo egg freezing, show two studies presented to the 26th annual meeting of the European Society of Human Reproduction and Embryology today (Monday). A large number of female university students would be prepared to undertake egg freezing in an attempt to combine career success and motherhood, said Dr. Srilatha Gorthi, a research fellow at the Leeds Centre for Reproductive Medicine, Leeds, UK, adding that her team's research emphasised the importance of educating young women about their biological clocks in order that they could take informed decisions about future reproduction.

Dr. Gorthi surveyed 98 medical students (group A) and 97 students of education and sports studies (group B) from the University of Leeds. Information regarding egg freezing was provided, including the fact that they would have to finance their own egg freezing. The average age was 21 with age range from 18-30 years in both the groups; 63.3% of the medical students were not in a relationship, as opposed to 25.8% in group B, probably reflecting the level of commitment and time needed for their courses.

While 85.7% in group A said that they would be prepared to delay starting a family, only 49.5% in group B said they would consider this. Eight out of ten from group A said they would undergo egg collection and freezing, compared with only half as many (four out of ten) from group B. In group A, 85.3% were prepared to undergo up to three cycles of egg collection to bank enough eggs to give them a realistic chance of pregnancy. In contrast, the majority (79%) of those who would bank their eggs from group B said they would be prepared to undergo only one cycle of egg collection.

"Career considerations were given as the commonest reason to delay starting a family in group A, followed by financial stability and marriage or a stable relationship," said Dr. Gorthi. "However, in group B, financial stability came first, followed by a stable relationship and then career reasons. We think that this is the first time that young women's attitudes to egg freezing have been studied in this way."

Egg freezing is still a relatively new technology; a woman has to go through an IVF treatment cycle, which takes two to four weeks and carries certain risks: ovarian hyperstimulation, haemorrhage, infection and a possible, albeit small, effect on future natural fertility.

Until a few years ago, egg freezing was largely restricted to women undergoing chemotherapy for cancer because the chances of an egg surviving the slow freezing

and thawing process was as low as two percent. Now, thanks to new techniques such as vitrification, where water from the eggs is removed and they are flash-frozen, frozen eggs are as good as the fresh ones. Women seem to have a realistic prospect of delaying motherhood if they wish to do so, similar to men. The average cost of egg freezing is around £3000 per attempt and some women may have to undergo up to three cycles in order to cryopreserve a good number of eggs.

At a time when women are increasingly delaying having children until their late 30s and even 40s, clinics offering egg freezing are in need of information on the attitudes and expectations of young women in order to enable them to tailor counselling more appropriately. "There has been a vogue for offering freezing for social reasons to women, especially those embarking on their careers, or those who haven't found their Prince Charming, as a kind of insurance policy for later life. Research has proven that young eggs have a better genetic competency than older ones, and the chance of egg freezing working also declines with age. While the best results are likely to be in those under 30 years old, in reality it is predominantly women in their late thirties who are requesting egg freezing," said Dr. Gorthi.

"There is still a lot of misinformation about the age at which the women could start their families, the likelihood of success of treatment and the number of oocytes that need to be retrieved and frozen in order to give a realistic prospect for future success. Women thinking about undergoing this procedure must be provided with accurate information and have counselling to both the benefits and limitations of oocyte freezing compared with other options. This will enable them to take the decision which is right for their circumstances," she said.

"In addition, support from society is warranted for young women who choose to have a family when they are ready without compromising their careers. Experience from clinics who offer egg freezing for social reasons has shown that the use of frozen eggs is considered the last resort when women fail to conceive naturally," Dr. Gorthi said.

In a second study, Dr. Julie Nekkebroeck*, a senior psychologist at the Centre for Reproductive Medicine, UZ Brussel, Brussels, Belgium, found that a group of highly educated and financially secure women with an average age of just over 38 years had applied to have their eggs frozen because they had not yet found the right partner with whom to have children. Dr. Nekkebroeck and colleagues interviewed the 15 egg-freezing candidates in order to ascertain their reasons for wishing to undergo the procedure.

"We found that they had all had partners in the past, and one was currently in a relationship, but they had not fulfilled their desire to have a child because they thought that they had not found the right man," she said. The women found out about the possibility of egg freezing via the internet; before that, 46.7% had thought about becoming a single mother through the use of donor sperm, and 26.7% of them had considered adoption or staying childless.

The main reasons for opting for oocyte freezing were taking the pressure off the search for the right partner (53.3%), and giving a future relationship more time to

blossom before bringing up the subject of their desire for a child (26.7%), whereas for 33.3% it was an insurance against future infertility. All 15 candidates had shared their intentions with their family and close friends and none of them felt discouraged by their entourage.

Out of the 15 women, 53.3% felt that the financial cost was a disadvantage of undergoing treatment, and 26.7% considered that the use of hormones was a deterrent. However, all of them accepted that they needed to undergo treatment while they were still healthy and fertile and they were also willing to repeat the treatment at least twice.

"The average age that the women thought they would use their frozen oocytes was 43.4 years, an age at which, for most women, there is considerable difficulty in achieving a spontaneous conception. But if they found a suitable partner, most of them would prefer to try to become pregnant spontaneously, rather than perform IVF with fresh material or, in the last instance, use their frozen oocytes," said Dr. Nekkebroeck.

If the women did not need their oocytes, 46.7% said that they would donate them for scientific research, 13.3% would donate them to another woman, and 26.7% were unsure about what to do with them.

"We intend to continue interviewing these women in order to confirm our preliminary results and will also arrange follow-up interviews after their egg collection and freezing, and when they return to the hospital to collect and use their vitrified eggs. Because women have only just gained access to this efficient method of preserving their fertility, we believe that our results will add to the continuing debate about egg freezing for social reasons. Such research seems to indicate that social freezing might be added to the list of preventive measures to be taken against future age-related subfertility in women, besides fertility awareness campaigns, but only on the understanding that these women are properly counselled and educated about success rates, fees, treatment procedure etc.," Dr. Nekkebroeck concluded.

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