Position Statement on Egg Freezing

October 2014

Current Status of Oocyte Freezing:

Recent advances in oocyte cryopreservation (“egg freezing”) techniques have greatly improved the survival when thawing frozen eggs and the subsequent effectiveness when used to achieve pregnancies. As a result, women can now bank their eggs with a reasonable expectation that those eggs may provide a future pregnancy after storage and thawing.

Women face the reality that their ovaries age more rapidly than other organs and tissues. As a result, fertility declines at an increasing rate, particularly after age 35. For this reason, some women may consider banking their eggs if they expect to delay starting a family. In such cases oocyte cryopreservation provides more options in the future if spontaneous conception is not possible.

CFAS Position on Egg Freezing:

The Canadian Fertility and Andrology Society considers oocyte cryopreservation to be a well-established technique that is no longer considered experimental. It has become an option for women wishing to preserve their fertility in the face of anticipated decline, as with radiation therapy or chemotherapy, or through the natural aging process.

The CFAS recommends education for young women regarding the effects of aging on fertility and natural conception, as part of routine well-woman care. Such discussions are a medical necessity and a societal responsibility. Prior to oocyte cryopreservation, women are encouraged to consider all aspects of this process including the risks of ovarian stimulation and oocyte retrieval, and the risks associated with pregnancy with both assisted reproductive technologies and conception at advanced ages.
Physicians offering oocyte banking should provide suitable resources and counselling including information regarding risks, expected outcomes including pregnancy rates, and alternatives to egg freezing that will enable women to make informed choices.