

Canadian Assisted Technologies Register

CARTR Plus Annual Report 2026

Canadian Fertility and Andrology Society (CFAS)

72nd Annual Meeting – Calgary, AB

17-19 September 2026



Report Notes



Disclaimer

- This report is based on data submitted by assisted reproductive technology clinics across Canada to the CARTR Plus database.
- While every effort has been made to ensure the information is accurate and complete, neither BORN Ontario nor any other parties make any representation or warranties as to the accuracy, reliability or completeness of the information contained herein.
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Report Notes

- This report uses data from 2013-2025 for treatments, retrievals, embryo transfers, and pregnancies. Data from 2013-2024 are used for birth outcomes.
- The estimates in this report are descriptive and should be interpreted with caution. No formal statistical testing has been conducted, unless otherwise specified.



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Suggested Citation

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Key Terms and Definitions

1	2PN	Two-pronuclear stage of embryo development
2	ET	Embryo transfer
3	FET	Frozen embryo transfer
4	FOIVF	Frozen oocyte IVF
5	Fresh ET	Fresh embryo transfer
6	ICSI	Intracytoplasmic sperm injection
7	MII	Mature oocyte that is in the metaphase II stage of meiosis
8	Male factor (inferred)	Identifies cases meeting WHO semen-analysis or sperm-source criteria when male factor was not selected by the clinic.
9	PGT	Preimplantation genetic testing
10	PGT-A	Preimplantation genetic testing for aneuploidy
11	PGT-M	Preimplantation genetic testing for monogenic disorders
12	PGT-SR	Preimplantation genetic testing for chromosomal structural rearrangement
13	Primary transfer	First embryo transfer following an oocyte retrieval
14	Utilizable embryo	An embryo deemed viable enough to be transferred into the uterus, frozen for future use, or biopsied for genetic testing

Pregnancy and Birth Outcome Terms and Definitions

1	Intended Parent	An individual or couple who plans to raise the child and take full legal parental responsibility after birth, including when a gestational carrier is used
2	Live birth	One or more births at any gestational age in which the infant showed signs of life after delivery
3	Miscarriage	Fetal loss at < 20 weeks' gestation
4	Multiple live birth	At least one live birth from a multiple pregnancy
5	Multiple pregnancy	Ongoing pregnancy with 2+ fetal heartbeats
6	Ongoing pregnancy	Pregnancy with ≥ 1 fetal heartbeat on ultrasound
7	Singleton birth	One live birth at any gestational age
8	Singleton pregnancy	Ongoing pregnancy with only one fetal heartbeat on ultrasound
9	Stillbirth	No fetus(es) was born alive and fetal loss occurred at ≥ 20 weeks' gestation

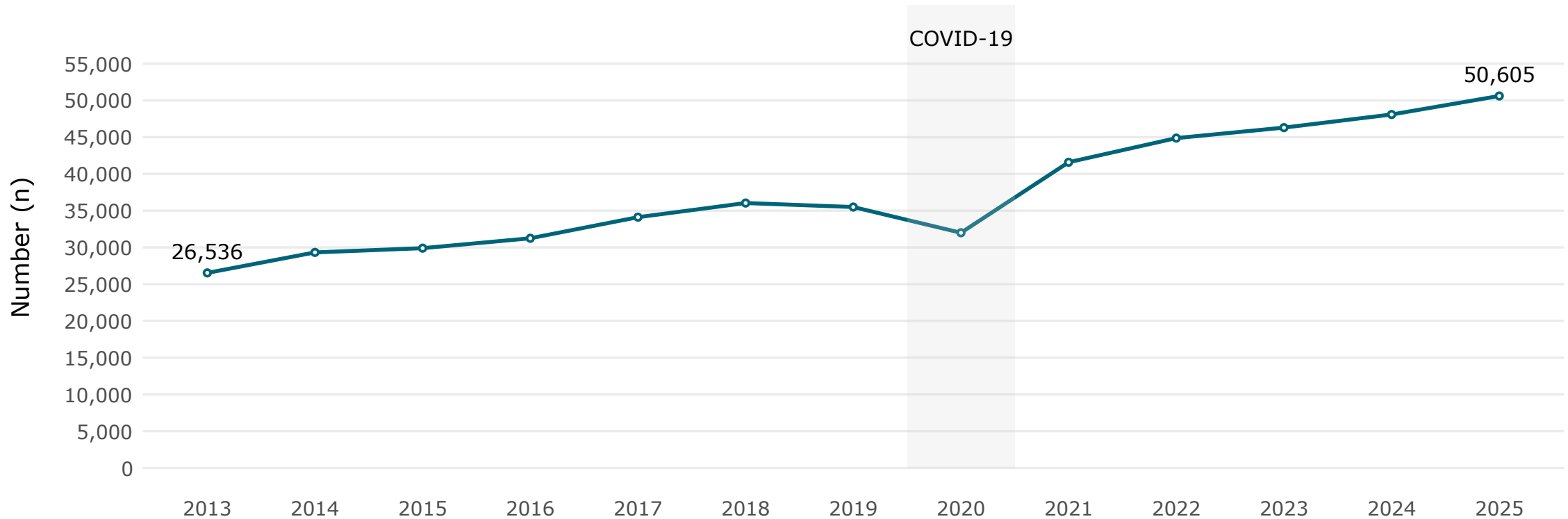
For additional terms and definitions, see the [CARTR Plus Data Dictionary](#).

Calculations

1	Cumulative live birth rate with or without ET – 12 months	Percentage of oocyte retrievals resulting in at least one live birth, with or without an embryo transfer performed within 12 months of the oocyte retrieval
2	Cumulative live birth rate with ET – 12 months	Percentage of oocyte retrievals resulting in at least one live birth from one or more embryo transfers performed within 12 months of the oocyte retrieval
3	Cumulative ongoing pregnancy rate with or without ET – 12 months	Percentage of oocyte retrievals resulting in at least one ongoing pregnancy, with or without an embryo transfer performed within 12 months of the oocyte retrieval
4	Cumulative ongoing pregnancy rate with ET – 12 months	Percentage of oocyte retrievals resulting in at least one ongoing pregnancy from one or more embryo transfers performed within 12 months of the oocyte retrieval
5	Fertilization rate	Number of normally fertilized oocytes (2PN)/number of oocytes inseminated or injected
6	Implantation rate	Number of gestational sacs observed on ultrasound/number of embryos transferred
7	Interquartile Range (IQR)	The difference between the first quartile (Q1) and the third quartile (Q3), representing the middle 50% of the data
8	Maturity rate	Number of MII oocytes/total number of oocytes retrieved
9	Mean	The average, calculated by dividing the sum of all values by the number of values
10	Median	The centre number in a sorted list of values. Half the numbers are smaller than the median and half are larger
11	Oocyte cryopreservation survival rate	Number of MII oocytes inseminated/total number of MII warmed or thawed

Total ART Cycles by Year

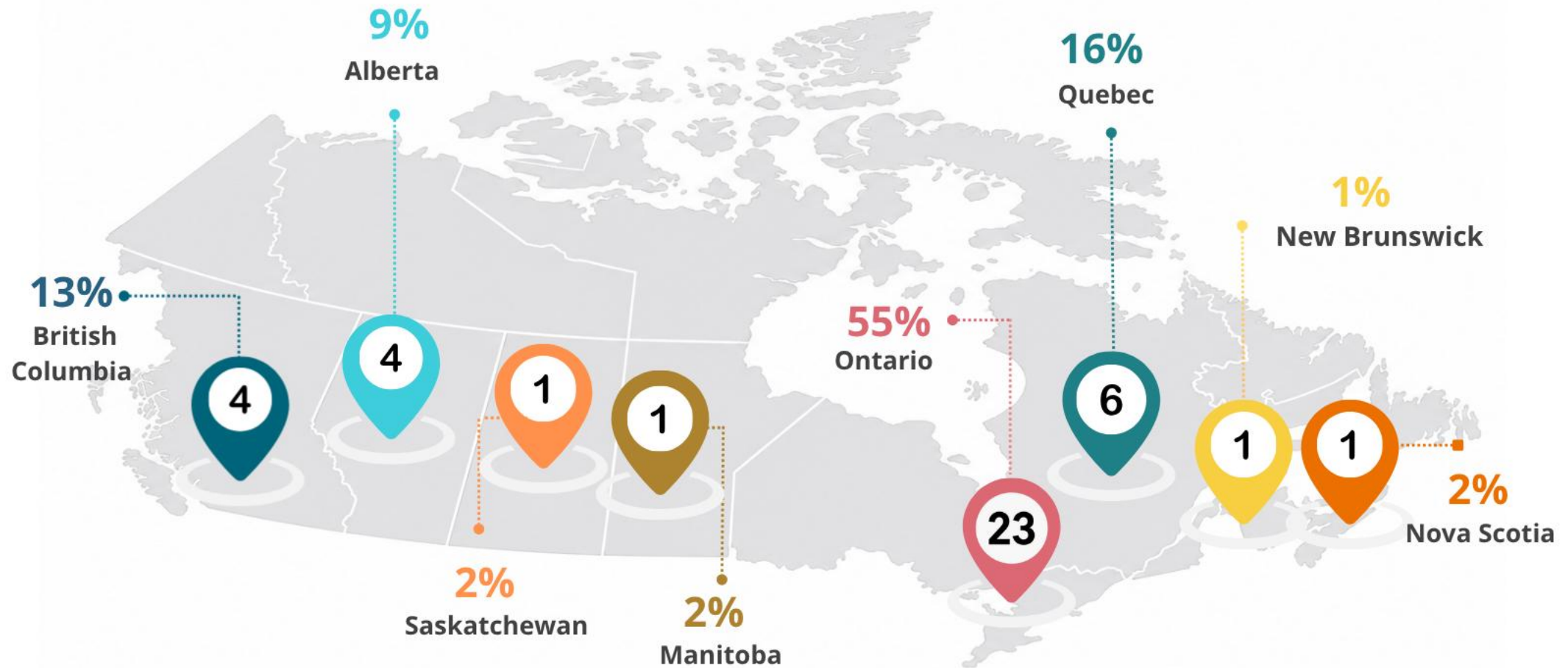
All cycle types (retrievals, oocyte banking, frozen/thaw and frozen embryo transfers), own and donor oocytes



CARTR Plus reached a new milestone in 2025. For the first time, participating clinics submitted data for more than 50,000 treatment cycles that began in the 2025 calendar year. This achievement reflects the hard work and collaboration of participating clinics and everyone who supports the collection of complete and accurate data.

41 Participating Clinics

Canada, 2025



Percentages represent each province's share of all cycles submitted for the 2025 calendar year.

Fertility Treatment Pathway

Own and donor oocytes, 2025



41

Clinics



32,302

Unique
Patients



23,720

Oocyte
Retrievals



84,478

Utilizable
Embryos



28,215

Embryo
Transfers



10,679

Ongoing
Pregnancies



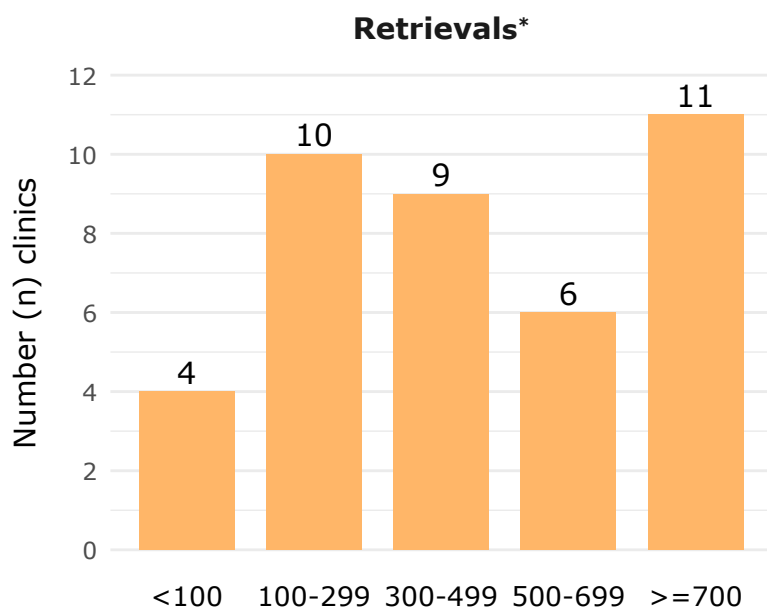
8,413

Live Births
(2024)

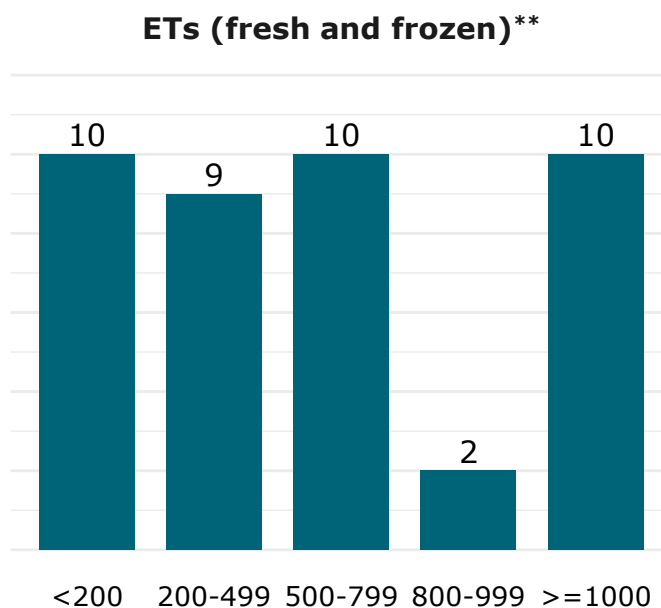
Birth outcome data are available for cycles initiated in 2024.

Clinics Characteristics

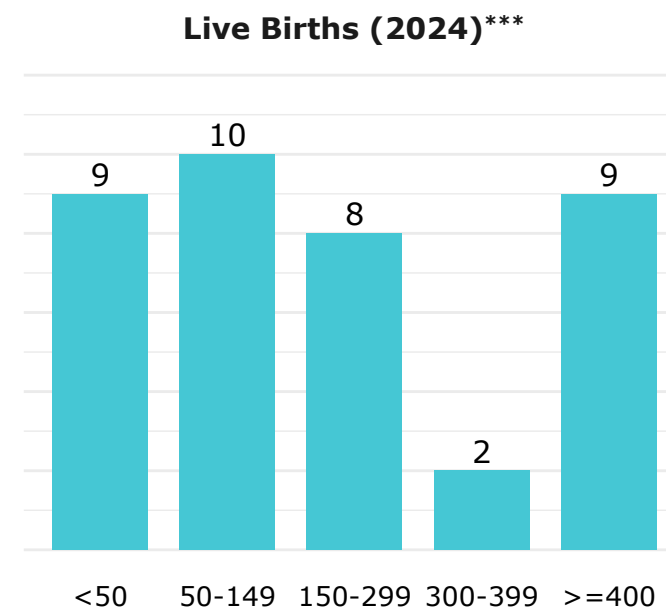
Own and donor oocytes, 2025



Number of retrievals: 23,720
 Median per clinic: 383.5 (IQR: 226-789.5)
 Min, Max: 11, 2,191



Number of ETs: 28,215
 Median per clinic: 553.0 (IQR: 220-973.0)
 Min, Max: 3, 2,564



Number of live births: 8,413
 Median per clinic: 150.0 (IQR: 63-357.0)
 Min, Max: 0, 803

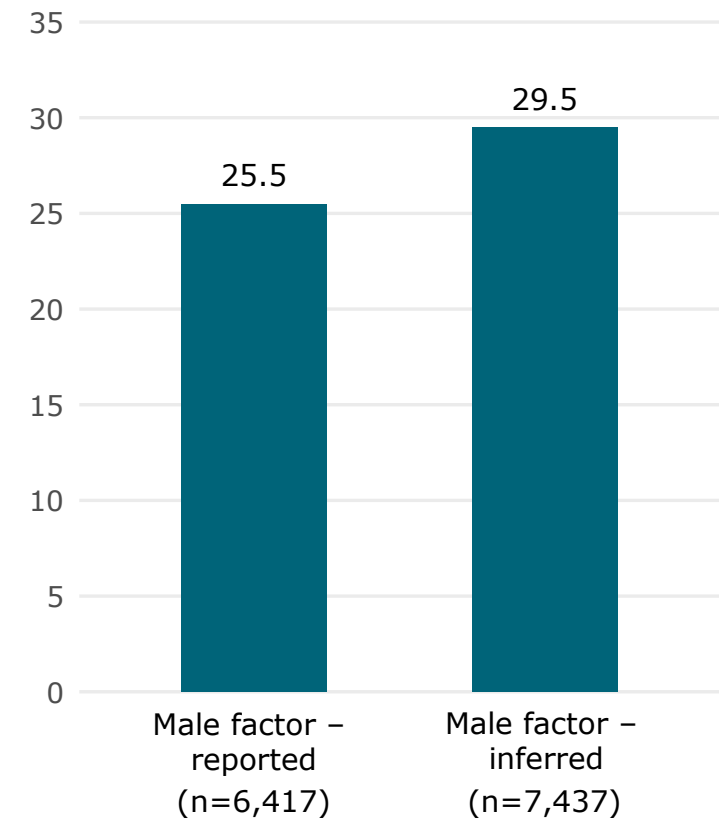
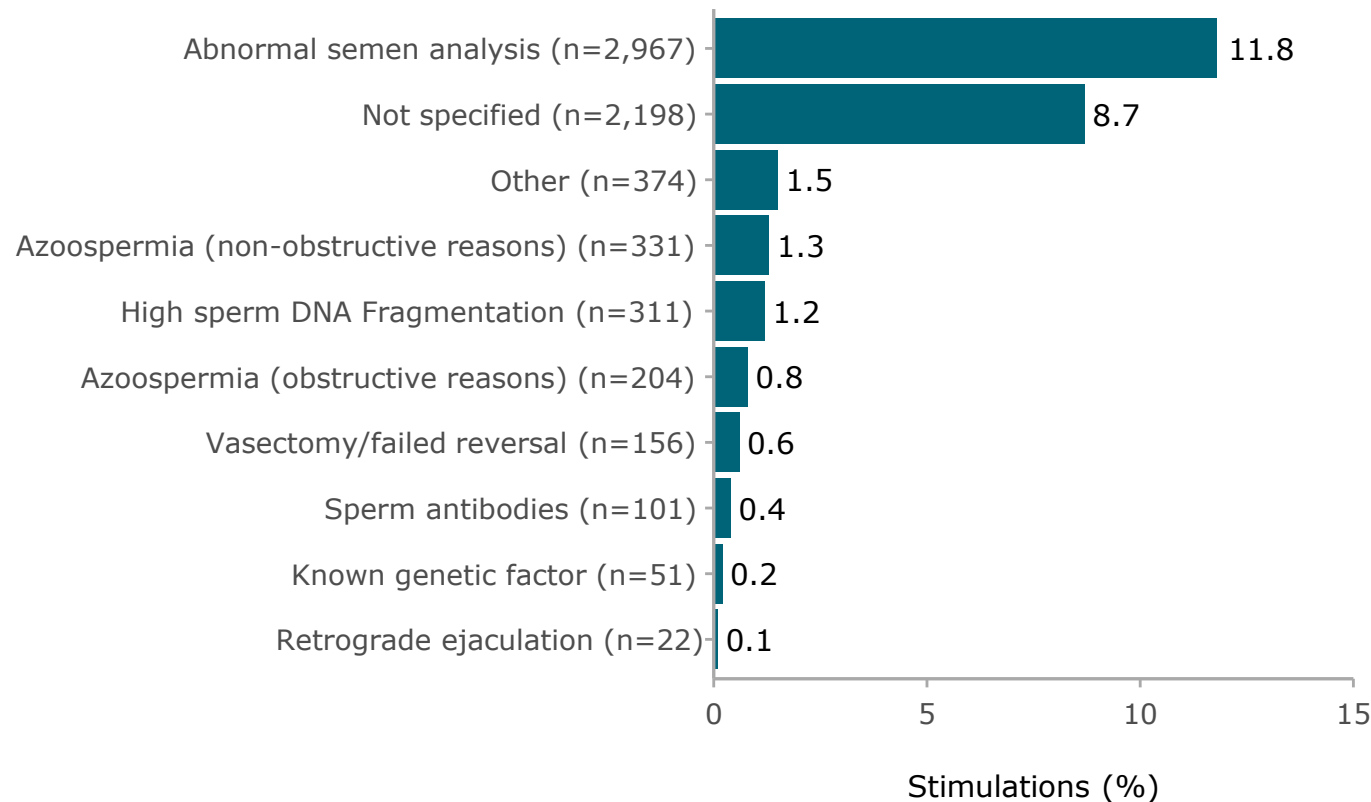
* A total of 40 clinics submitted data on retrievals performed in 2025

** A total of 41 clinics submitted data on embryo transfers performed in 2025.

*** A total of 38 clinics submitted data on live births resulting from cycles initiated in 2024.

Reasons for IVF Treatment: Male Factor (sperm-related)

Stimulations, own and donor oocytes, 2025



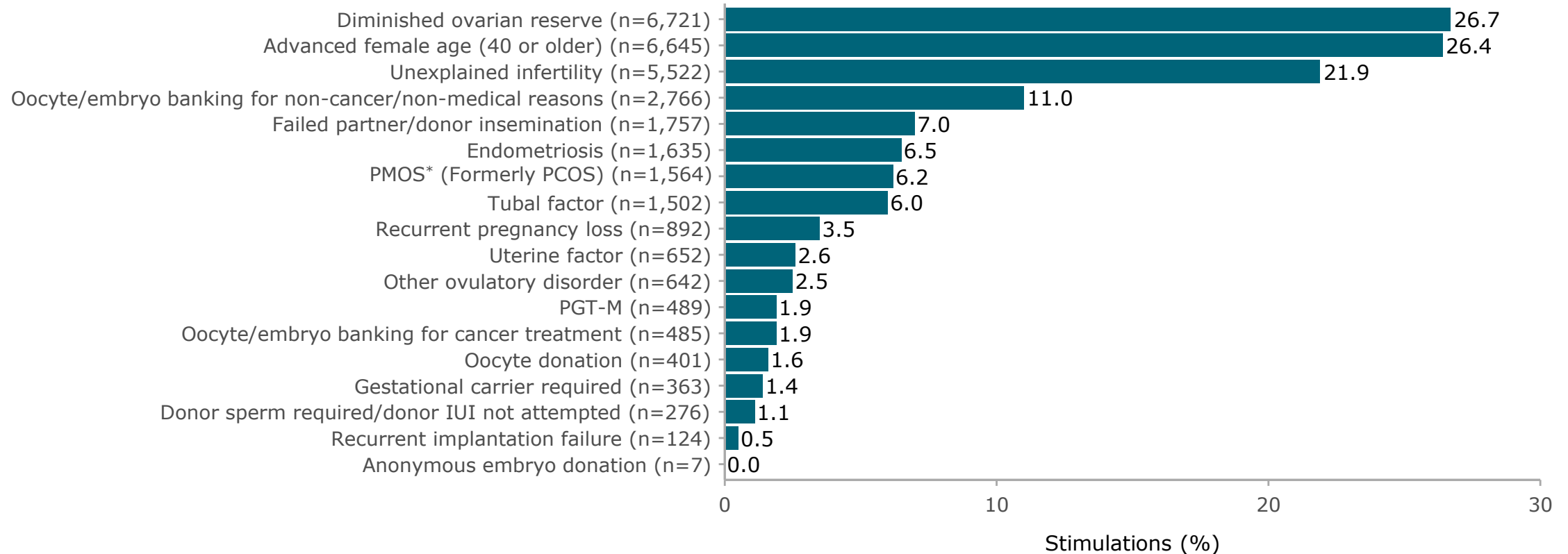
Categories are not mutually exclusive.

"Male factor - reported" reflects clinic-selected diagnoses. Beginning in 2025, "Male factor - inferred" also identifies cases not selected by the clinic but meeting World Health Organization semen-analysis or sperm-source criteria. This enhancement improves identification of male factor infertility and may contribute to the higher percentage reported in 2025.

"Male factor" and other reproductive-factor classifications describe the clinical reason for treatment based on reproductive anatomy, gamete source and/or related clinical findings. These classifications do not describe or imply the gender identity of the patient or their partner.

Reasons for IVF Treatment: Other Clinical Indications

Stimulations, own and donor oocytes, 2025



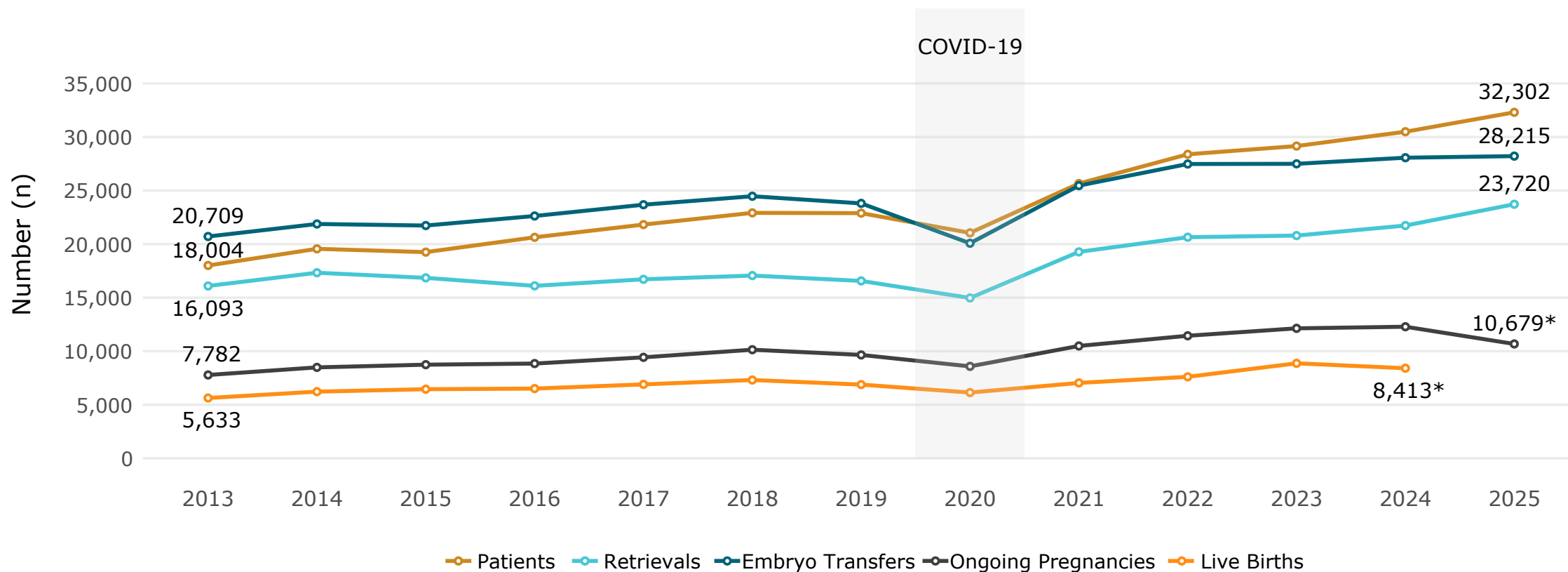
Categories are not mutually exclusive.

*Polyendocrine metabolic ovarian syndrome (PMOS) was formerly known as polycystic ovarian syndrome (PCOS). Data were collected using the term PCOS.

"Advanced female age" and other reproductive-factor classifications describe the clinical reason for treatment based on reproductive anatomy, gamete source and/or related clinical findings. These classifications do not describe or imply the gender identity of the patient or their partner.

Patients, Retrievals, ETs, Pregnancies, & Births by Year

Own and donor oocytes, 2013-2025

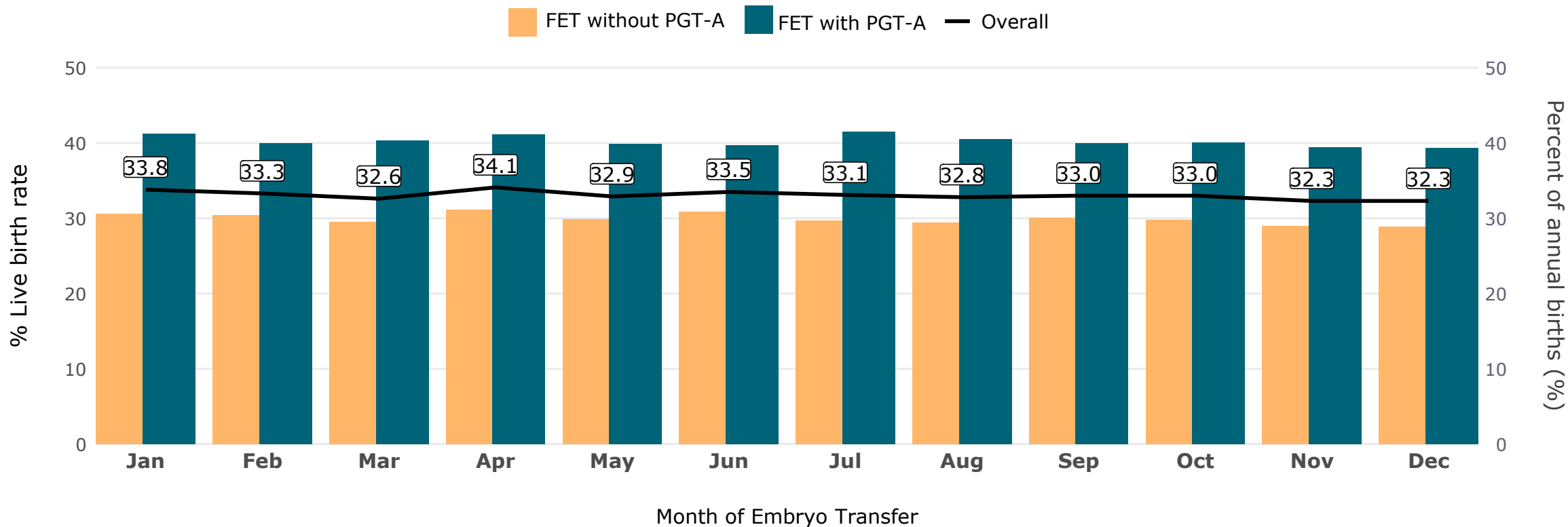


*The number of ongoing pregnancies and live births may increase in the following year as outcomes are reported and entered up to 9 months later.

Ongoing data quality improvement efforts have led to updates in the CARTR data. Therefore, the figure presented here differs from previously reported values and represents the most current available data.

Live Birth Rate by Month of Transfer

FETs, own oocytes, 2020-2024



Live birth rates ranged from 32.3% to 34.1% across months of embryo transfer. Despite this modest variation, there was no statistically significant overall difference in live birth rates by month ($\chi^2(11) = 18.80, p = 0.065$).

01

CFAS Compliance Seal

CFAS Compliance Seal

The CFAS Compliance Seal Program was designed to encourage all clinics to report their clinic specific success rates in a standardized way that is clear and easy to understand. The program has several requirements including:

-  Separating fresh cycles from frozen-thaw cycles,
-  Separating non-PGT-A from PGT-A cycles,
-  Separating own oocyte from donor oocyte cycles,
-  Reporting the number of cycles in each CARTR-Plus age category,
-  Reporting the time period to which the data refers, and
-  Using standardized definitions for clinical outcomes.



To qualify for the CFAS Seal clinics can present their data using clinical pregnancy, ongoing pregnancy and/or live birth as their benchmark for success



Clinics may also report outcomes per embryo transfer, primary embryo transfer, or cumulative success per oocyte retrieval. Those using this standardized framework can apply for the CFAS Seal.



https://cfas.ca/Compliance_Seal.html



OUTCOMES INCLUDED

Each outcome is separated by oocyte origin (own vs donor), by age (<35, 35-37, 38-40, 41-42, 43+), and embryo transfer method - Fresh ET, FET (no PGT-A), and FET with PGT-A.

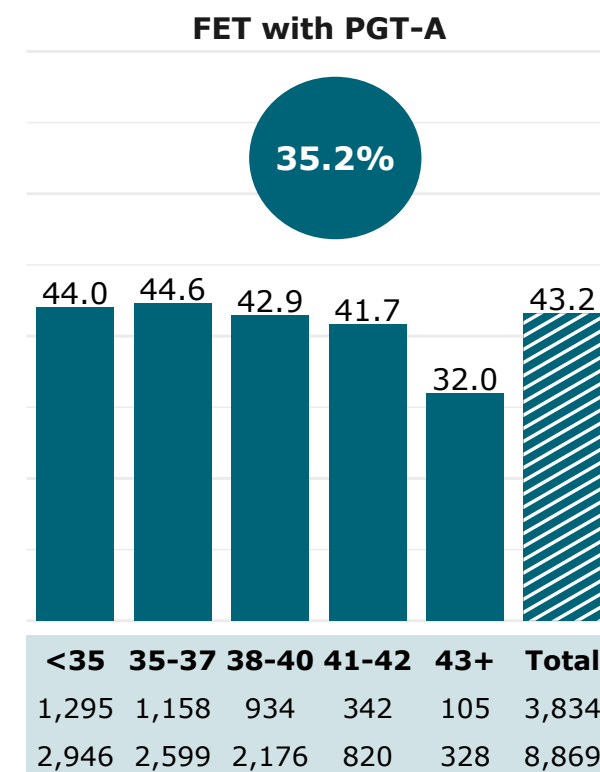
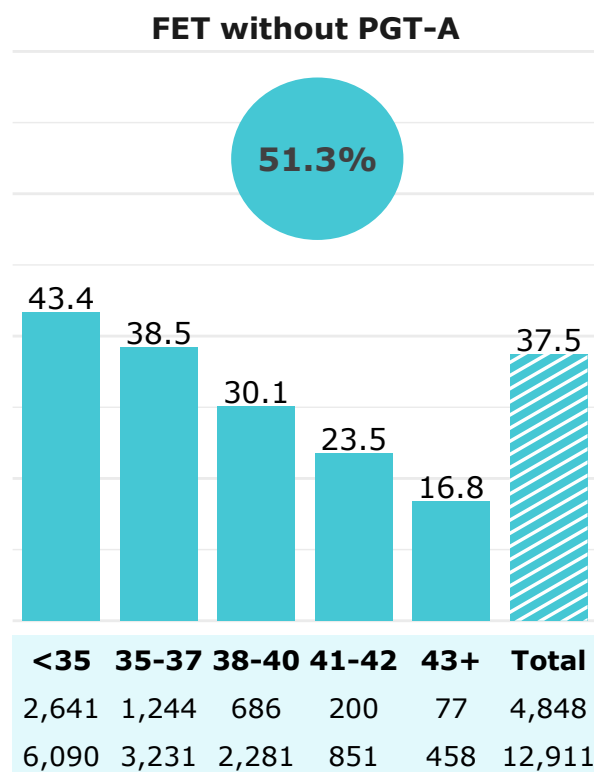
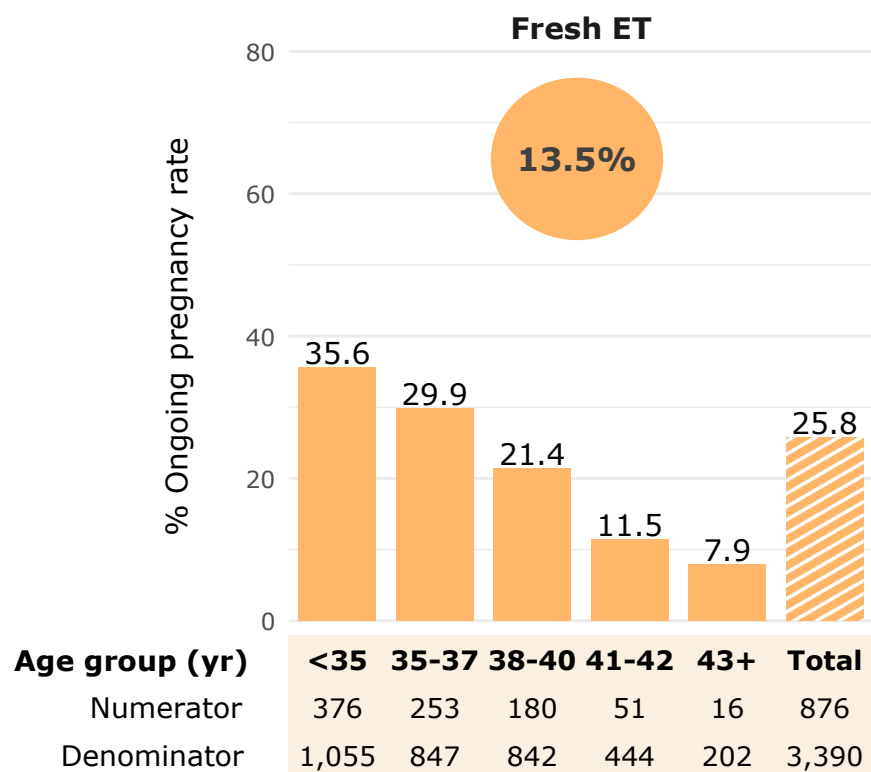
- 1 Clinical pregnancy per ET
- 2 Ongoing pregnancy per ET
- 3 Live birth per ET
- 4 Clinical pregnancy per primary transfer
- 5 Ongoing pregnancy per primary transfer
- 6 Live birth per primary transfer
- 7 Cumulative clinical pregnancy rate
- 8 Cumulative ongoing pregnancy rate
- 9 Cumulative live birth rate



The 2026 Annual Report will calculate 2, 3, 5, 6, 8, and 9 with own oocytes only

Ongoing Pregnancy Rate per ET

Own oocytes, 2025



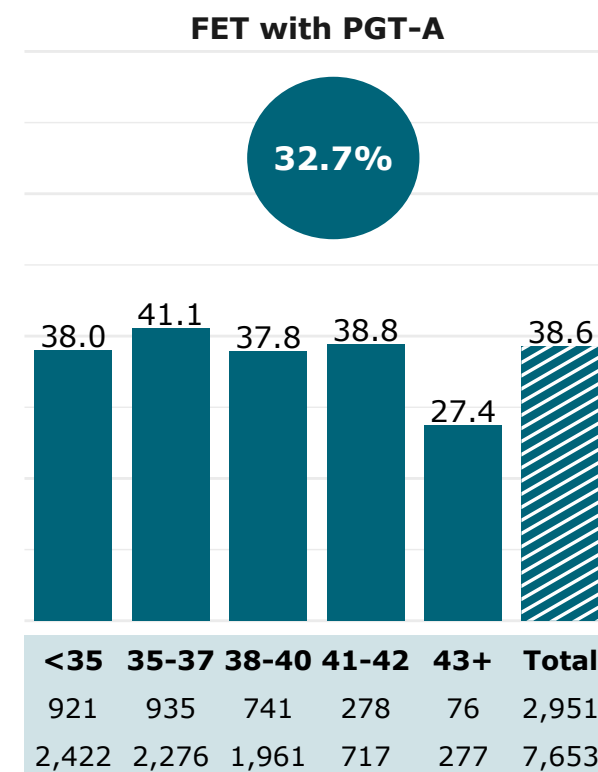
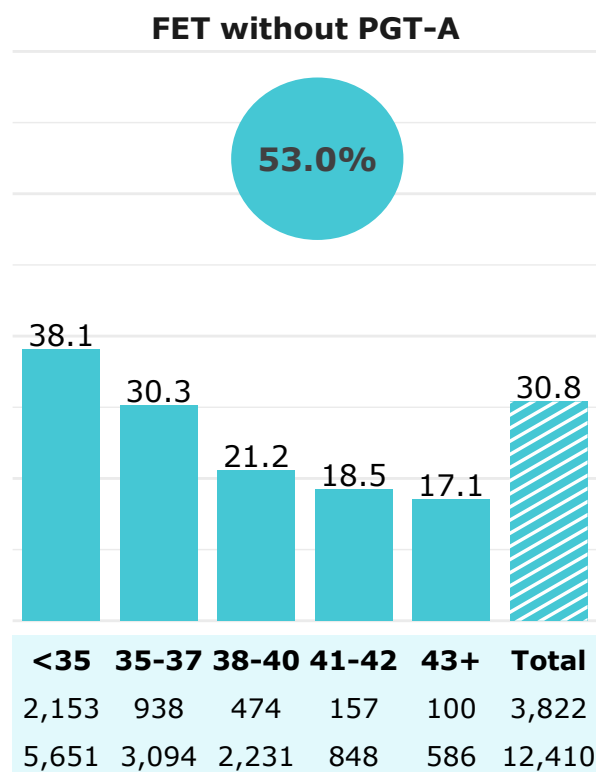
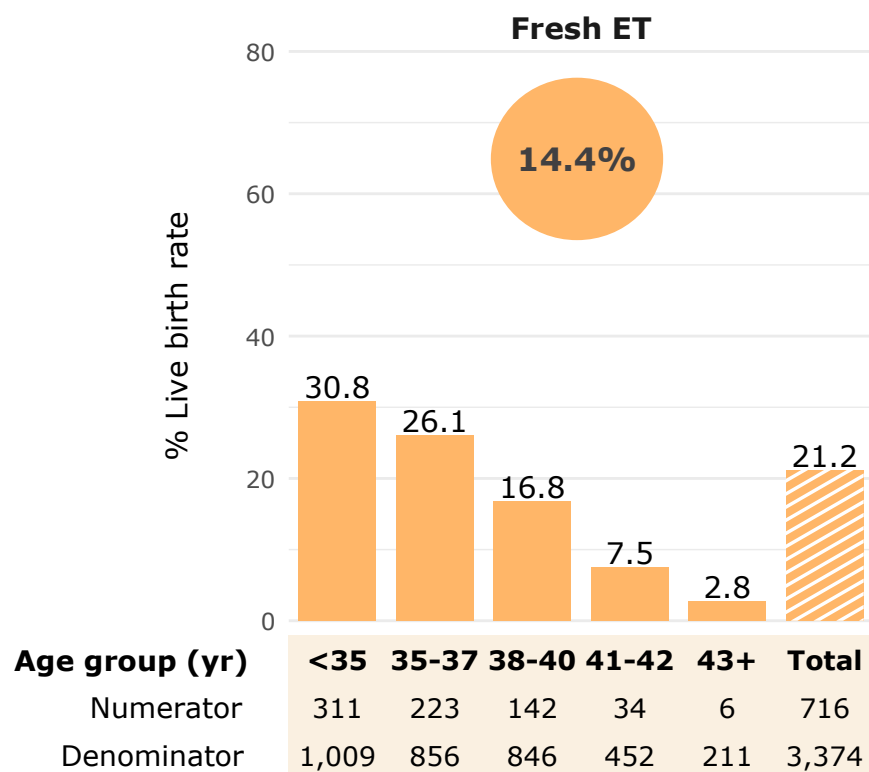
Numerator: Number of ongoing pregnancies.

Denominator: Number of embryo transfers.

Age refers to the age of oocyte provider at the time of retrieval.

Live Birth Rate per ET

Own oocytes, 2024



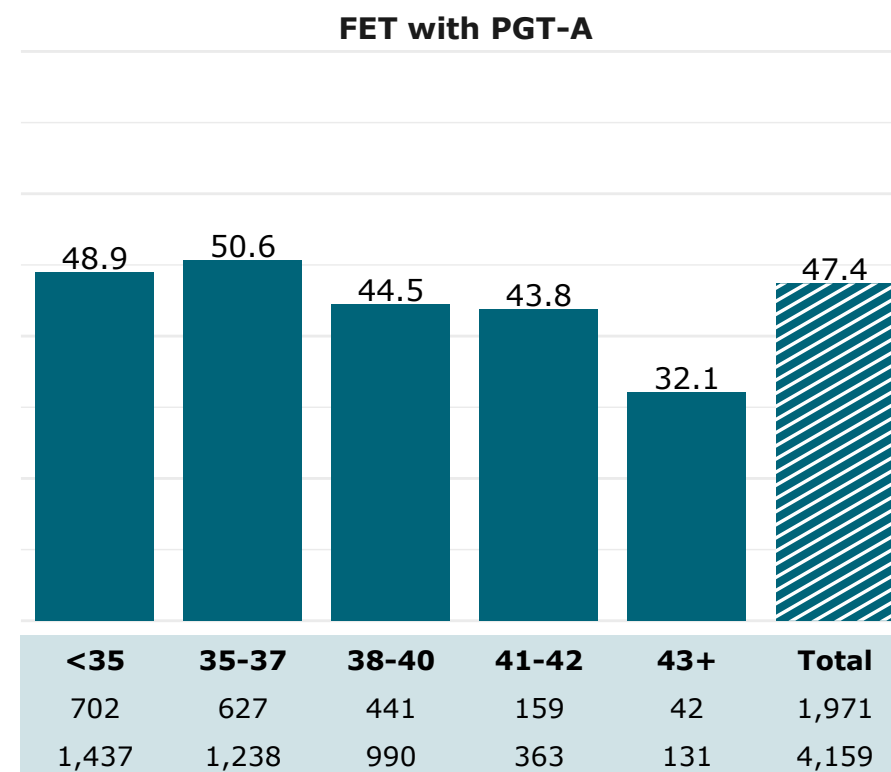
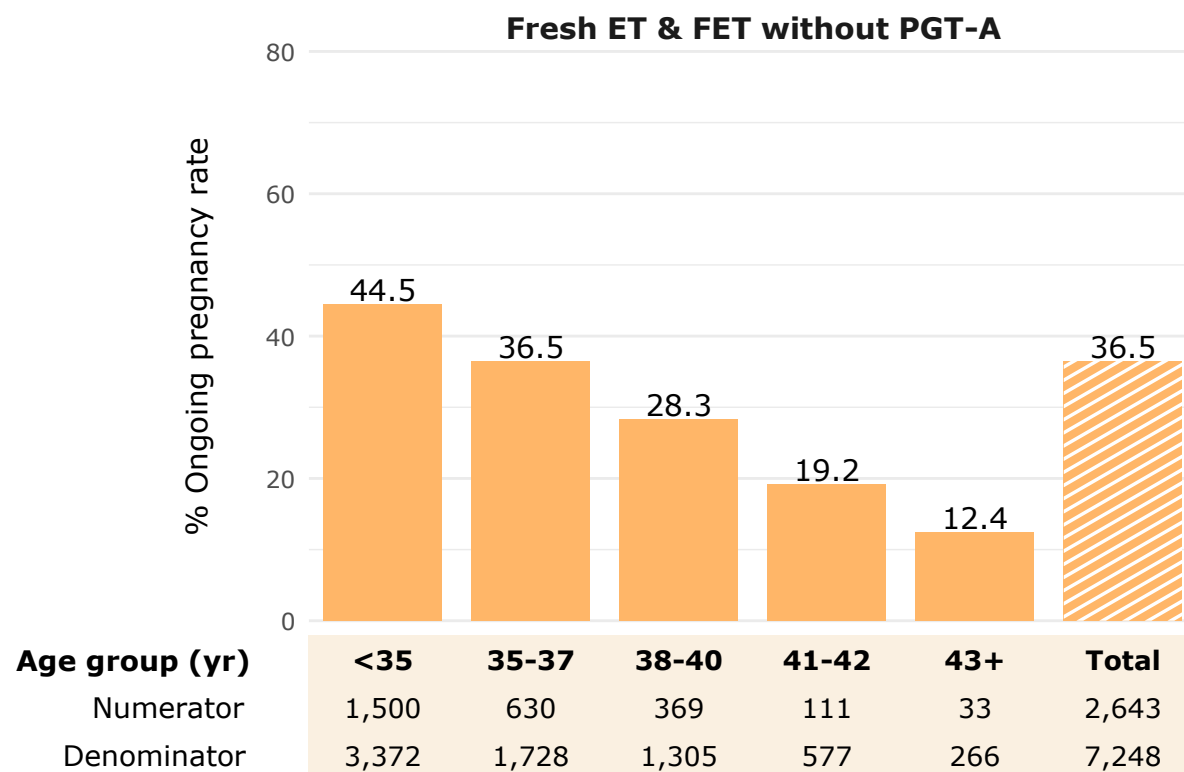
Numerator: Number of live births.

Denominator: Number of embryo transfers.

Age refers to the age of oocyte provider at the time of retrieval.

Ongoing Clinical Pregnancy Rate per Primary Transfer

Own oocytes, 2025



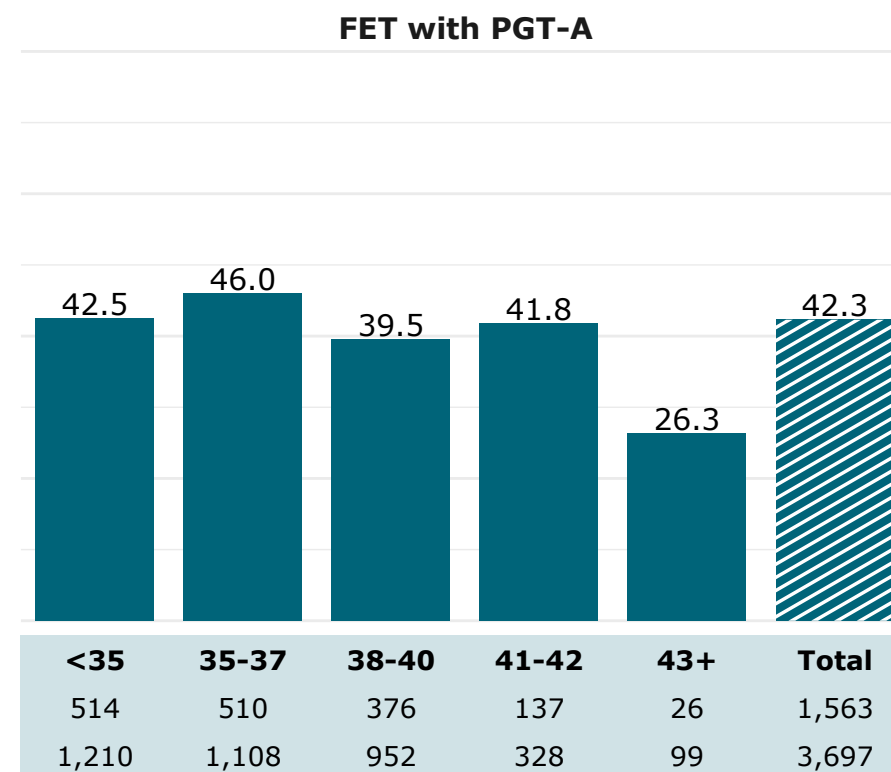
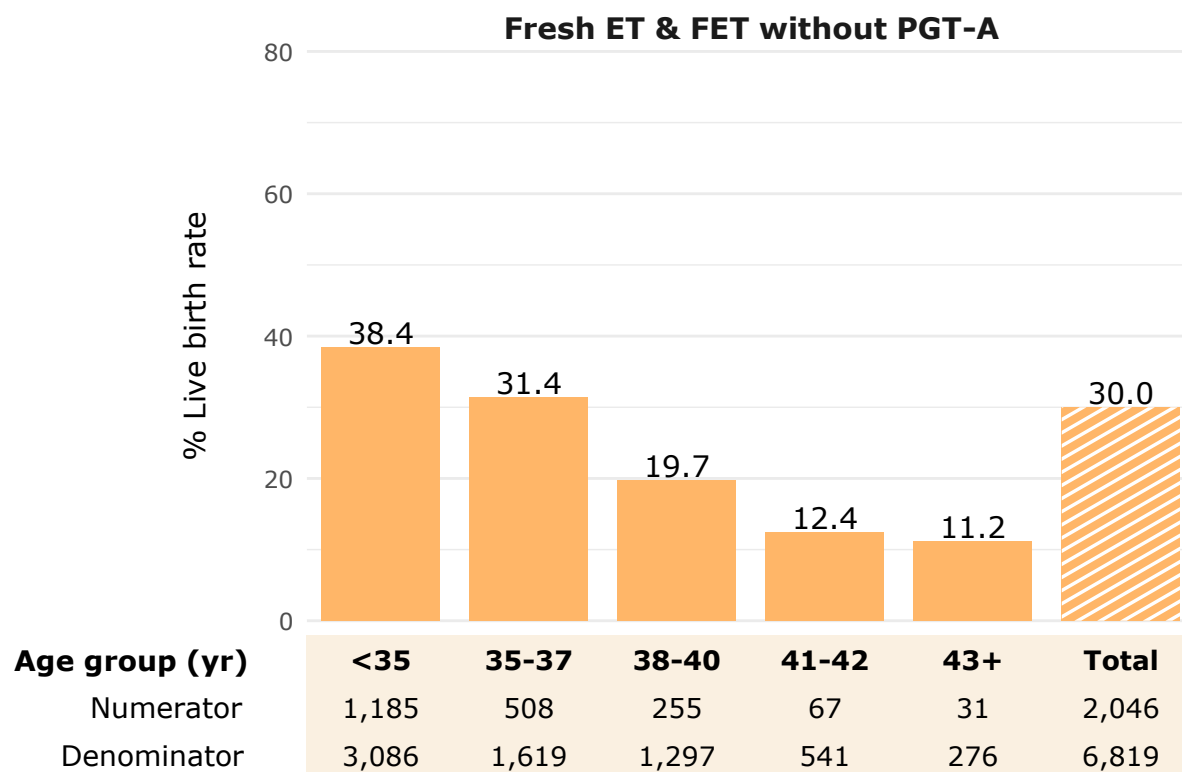
Numerator: Number of ongoing pregnancies.

Denominator: Number of primary transfer, whether fresh or frozen embryos.

Age refers to the age of oocyte provider at the time of retrieval.

Live Birth Rate per Primary Transfer

Own oocytes, 2024



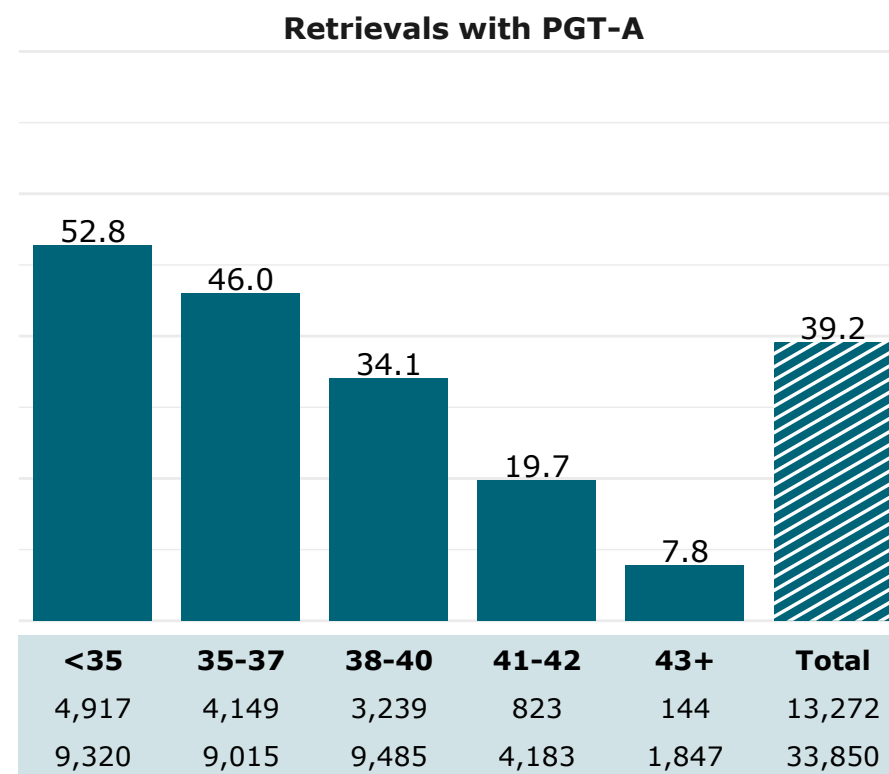
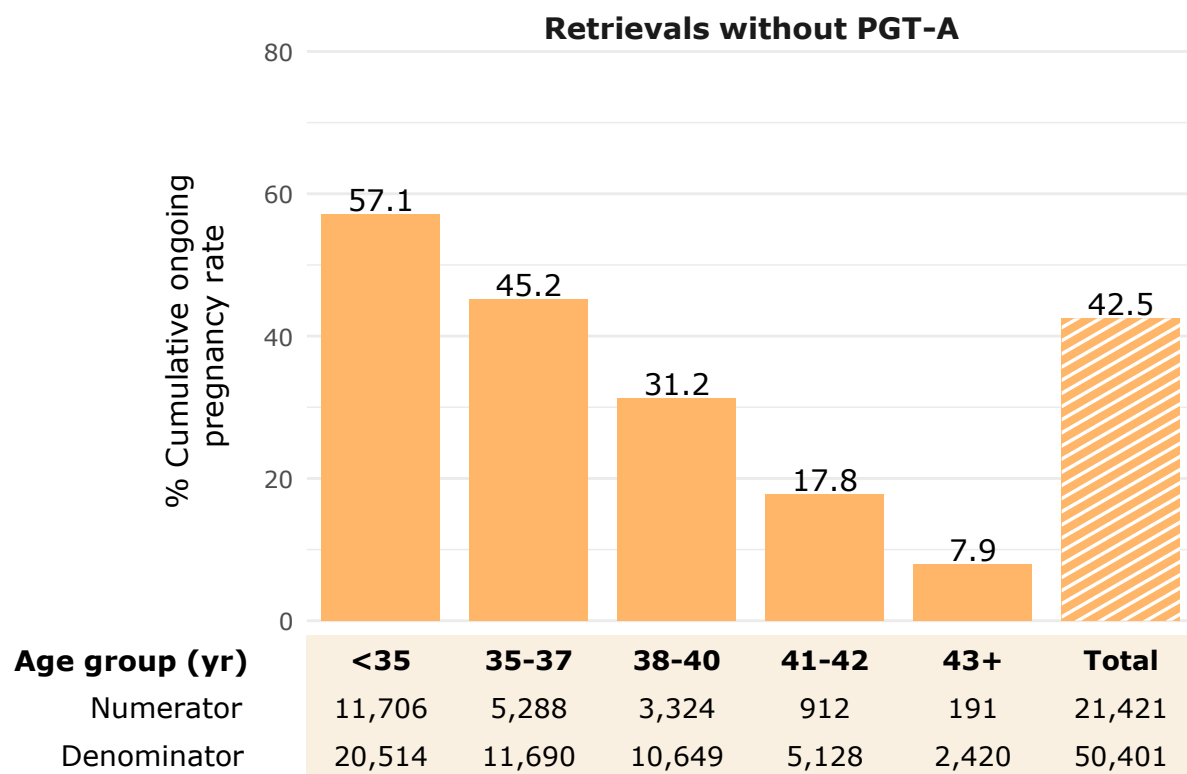
Numerator: Number of live births.

Denominator: Number of primary transfer, whether fresh or frozen embryos.

Age refers to the age of oocyte provider at the time of retrieval.

Cumulative Ongoing Pregnancy Rate per Retrieval

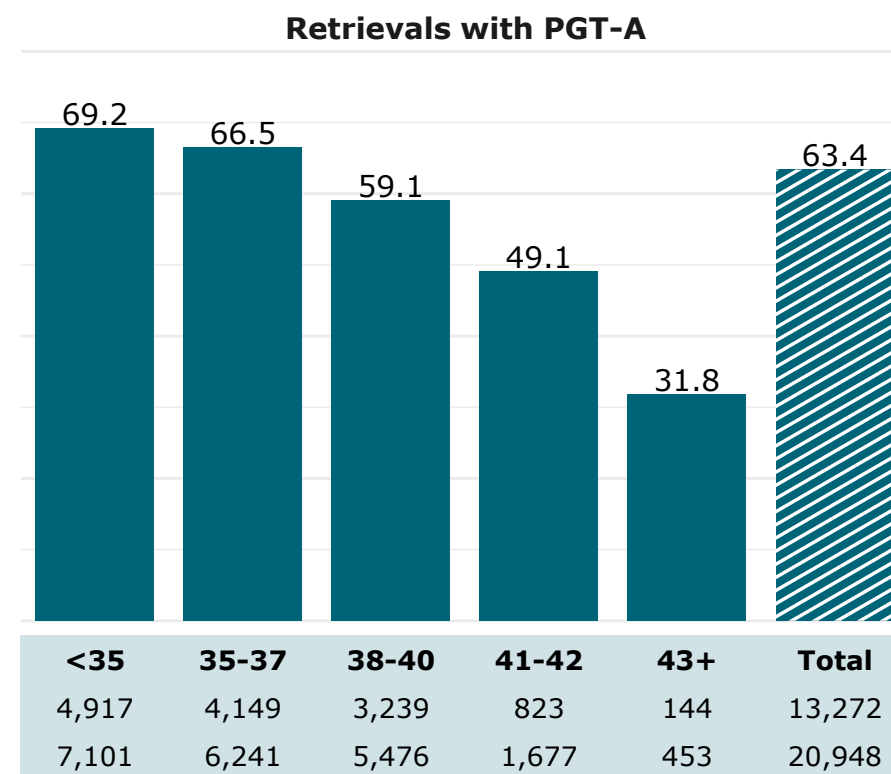
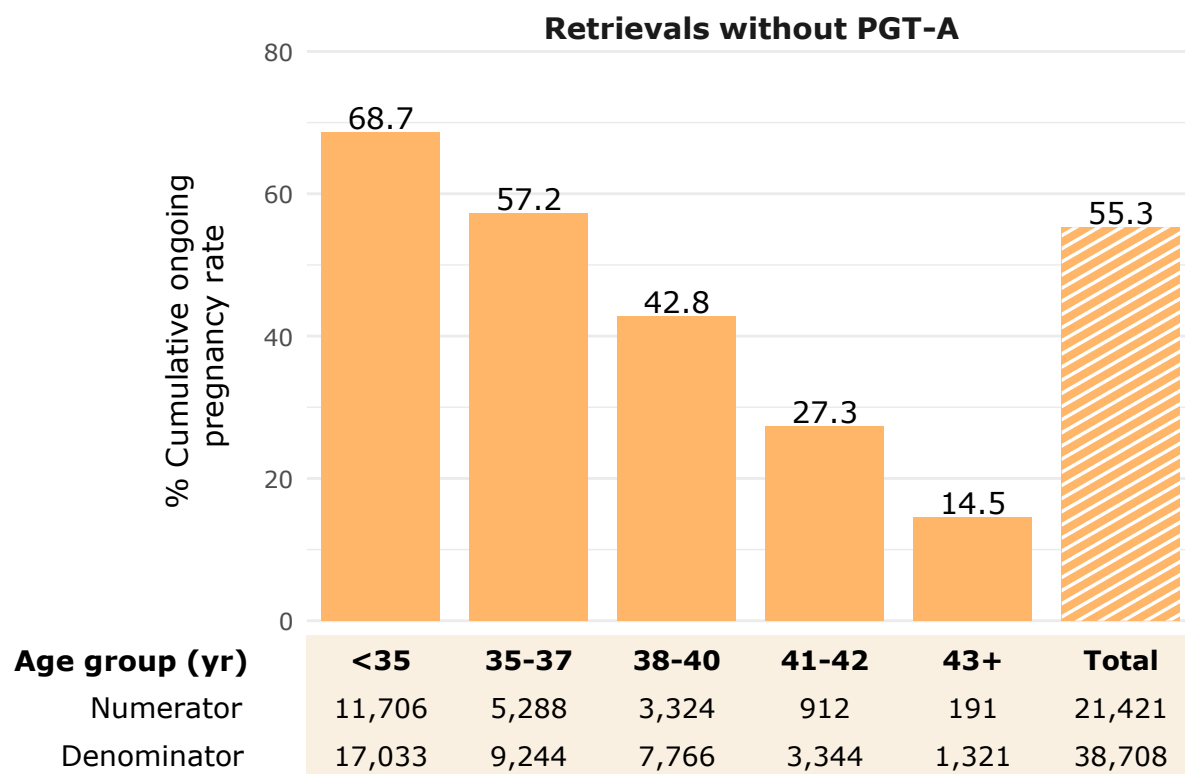
Retrievals with and without ET within 12 months of retrieval, own oocytes, 2020-2024



Cumulative ongoing pregnancy rate with or without ET – 12 months: Percentage of oocyte retrievals resulting in at least one ongoing pregnancy, with or without an embryo transfer, from treatment performed within 12 months of the oocyte retrieval. The cumulative ongoing pregnancy rates shown were calculated using data submitted by 42 participating clinics. Retrieval years from 2020-2024. Age refers to the age of oocyte provider at the time of retrieval.

Cumulative Ongoing Pregnancy Rate per Retrieval

Retrievals with ≥ 1 ET within 12 months, own oocytes, 2020-2024



Cumulative ongoing pregnancy rate with ET – 12 months: Percentage of oocyte retrievals resulting in at least one ongoing pregnancy from one or more embryo transfers performed within 12 months of the oocyte retrieval.

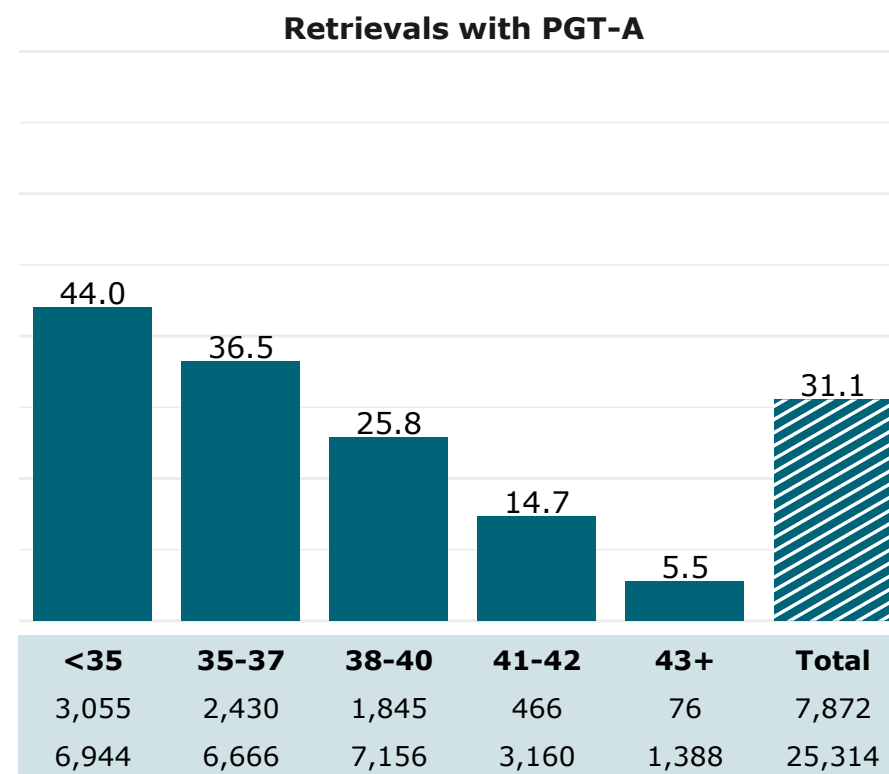
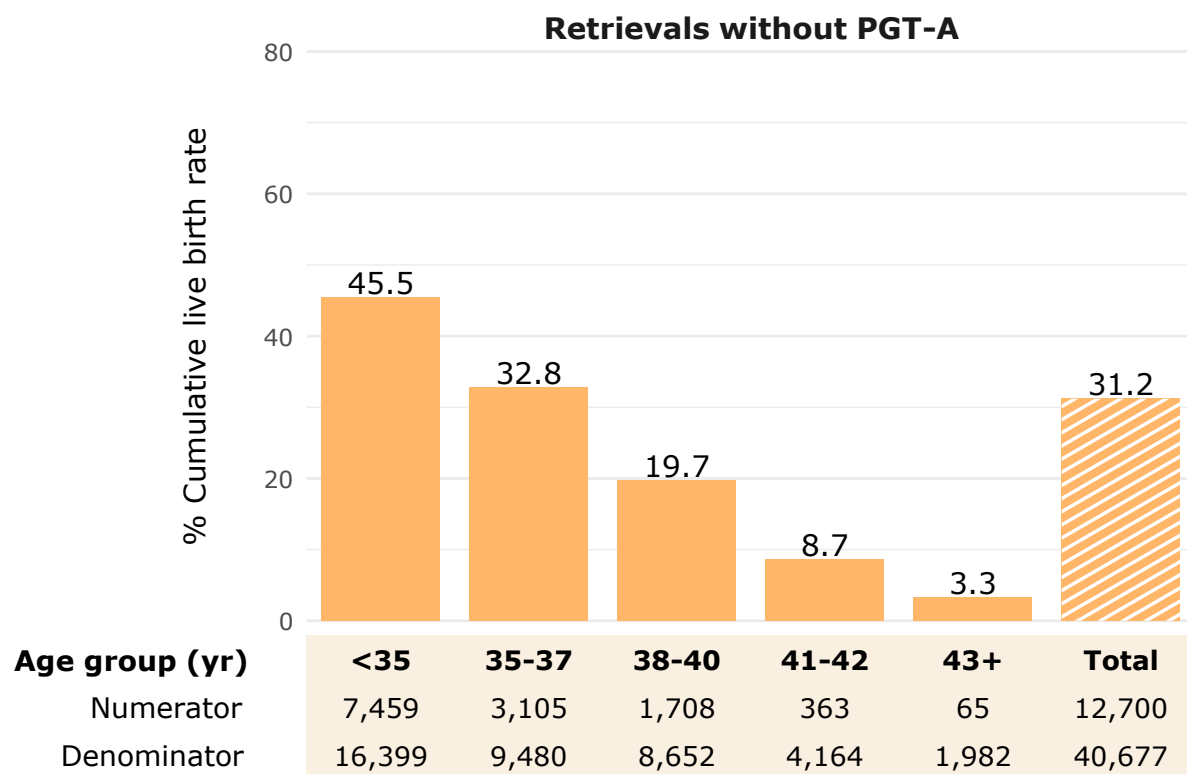
The cumulative ongoing pregnancy rates shown were calculated using data submitted by 42 participating clinics.

Retrieval years from 2020-2024.

Age refers to the age of oocyte provider at the time of retrieval.

Cumulative Live Birth Rate per Retrieval

Retrievals with and without ET within 12 months, own oocytes, 2020-2023



Cumulative live birth rate with or without ET – 12 month: Percentage of oocyte retrievals resulting in at least one live birth, with or without an embryo transfer performed within 12 months of the oocyte retrieval.

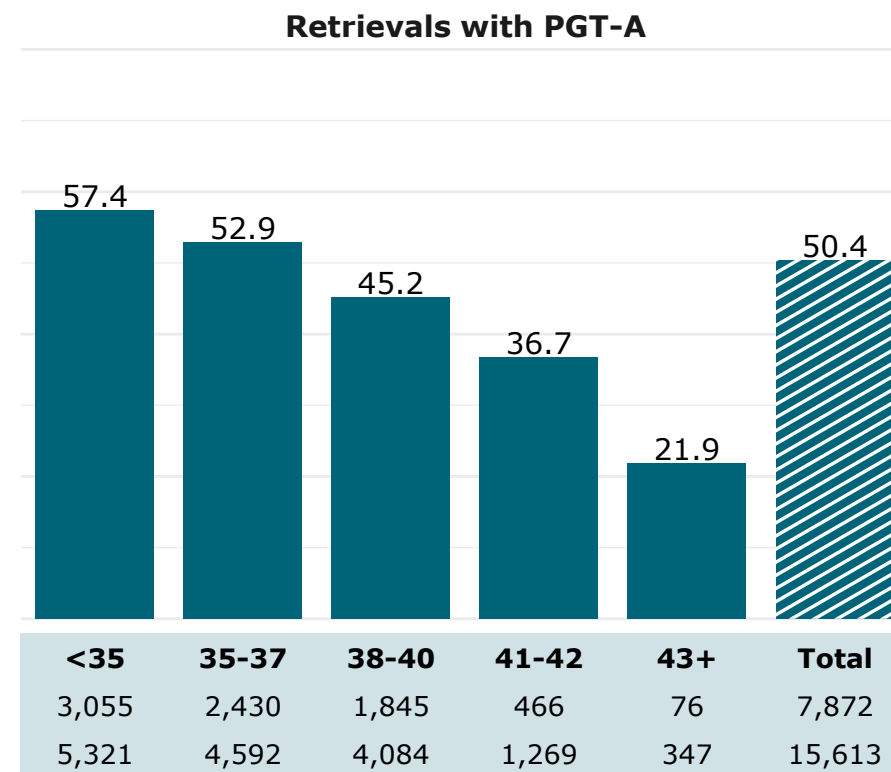
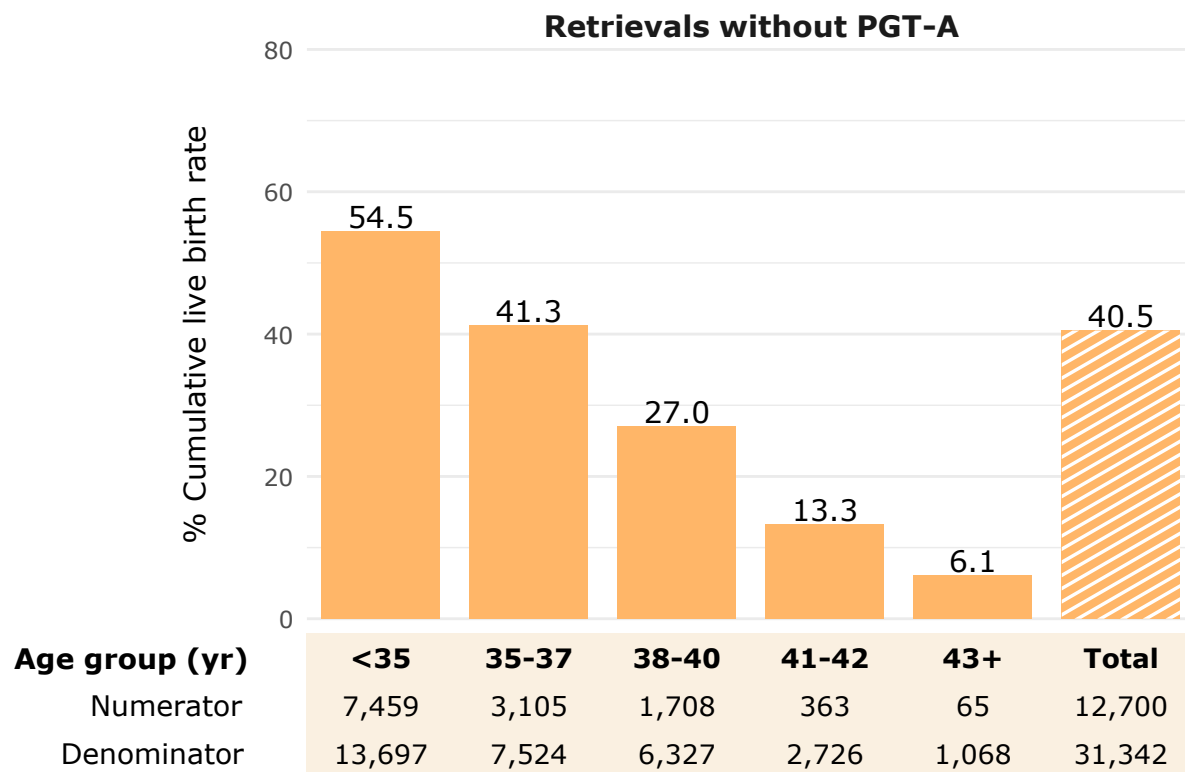
The cumulative live birth rates shown were calculated using data submitted by 40 participating clinics.

Retrieval years from 2020-2023.

Age refers to the age of oocyte provider at the time of retrieval.

Cumulative Live Birth Rate per Retrieval

Retrievals with ≥ 1 ET within 12 months, own oocytes, 2020-2023



Cumulative live birth rate with ET - 12 months: Percentage of oocyte retrievals resulting in at least one live birth from one or more embryo transfers performed within 12 months of the oocyte retrieval.

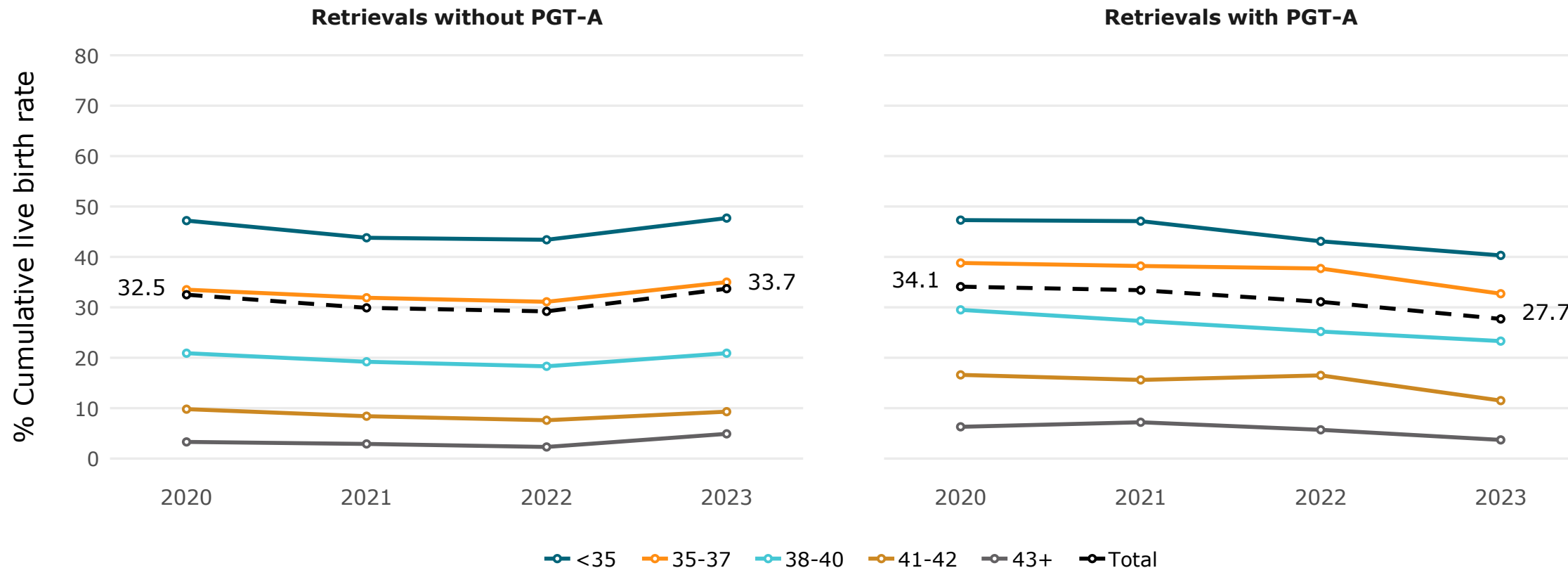
The cumulative live birth rates shown were calculated using data submitted by 40 participating clinics.

Retrieval years from 2020-2023.

Age refers to the age of oocyte provider at the time of retrieval.

Cumulative Live Birth Rate by Year

Retrievals with and without ET within 12 months, own oocytes, 2020-2023



Cumulative live birth rate with or without ET – 12 month: Percentage of oocyte retrievals resulting in at least one live birth, with or without an embryo transfer performed within 12 months of the oocyte retrieval.

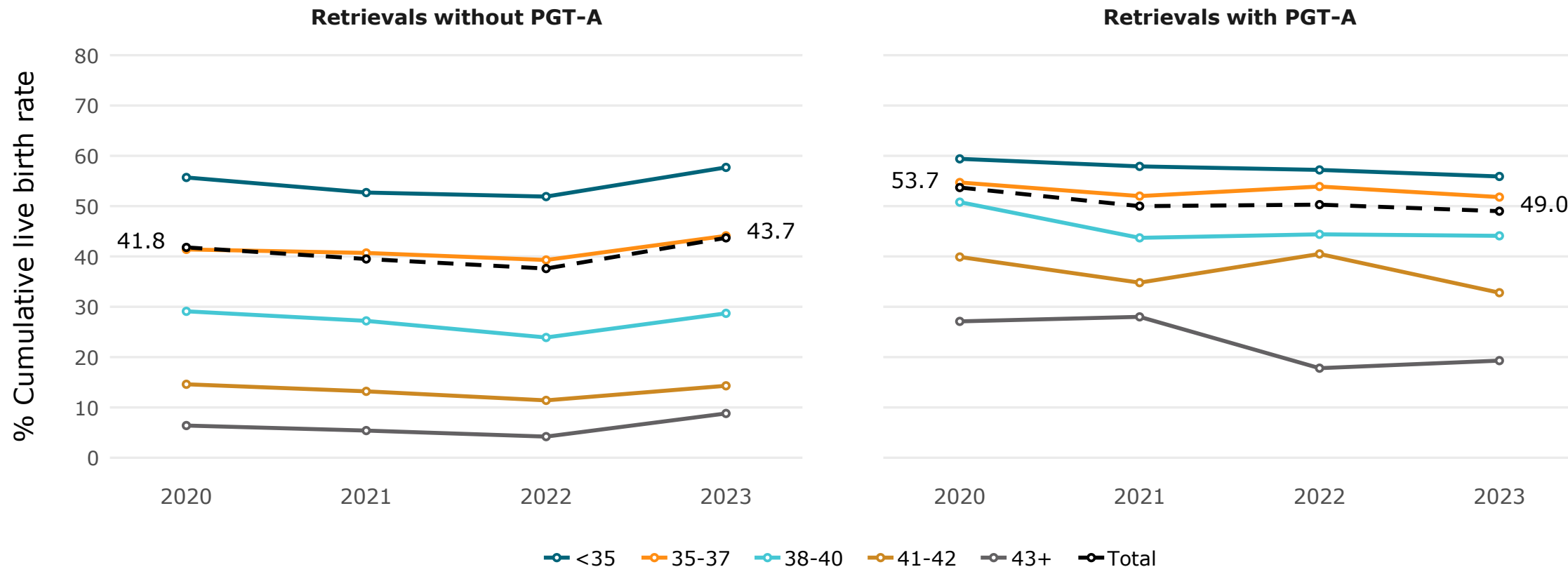
The cumulative live birth rates shown were calculated using data submitted by 40 participating clinics.

Retrieval years from 2020-2023.

Age refers to the age of oocyte provider at the time of retrieval.

Cumulative Live Birth Rate per Retrieval by Year

Retrievals with ≥ 1 ET within 12 months, own oocytes, 2020-2023



Cumulative live birth rate with ET - 12 months: Percentage of oocyte retrievals resulting in at least one live birth from one or more embryo transfers performed within 12 months of the oocyte retrieval.

The cumulative live birth rates shown were calculated using data submitted by 40 participating clinics.

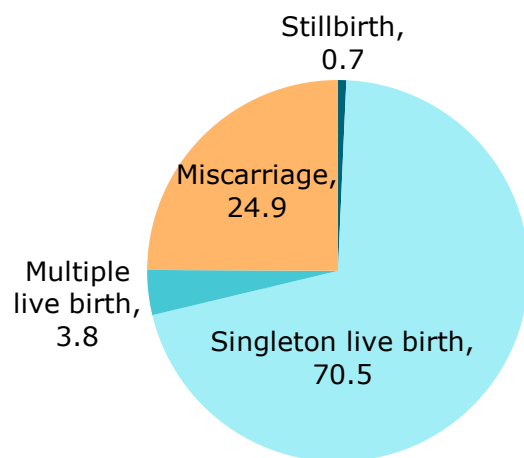
Retrieval years from 2020-2023.

Age refers to the age of oocyte provider at the time of retrieval.

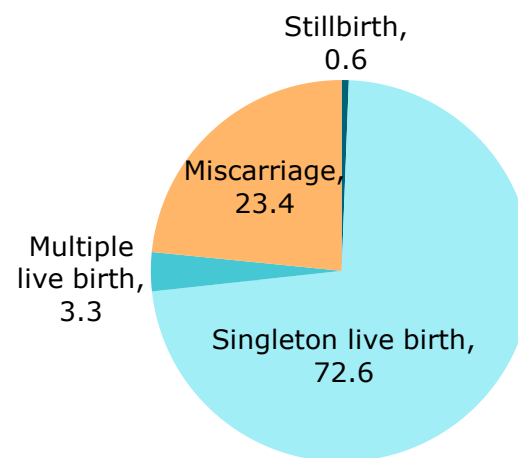
Birth Outcomes among Ongoing Pregnancies

Ongoing pregnancies, own and donor oocytes, 2024

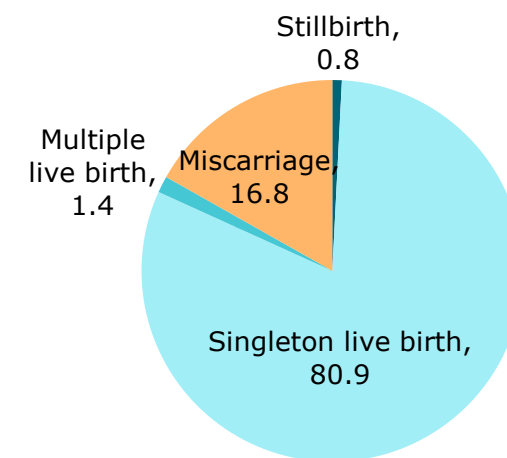
Fresh ET



FET without PGT-A



FET with PGT-A



Birth outcome

Numerator

Denominator

Birth outcome	Singleton live birth	Multiple live birth	Miscarriage	Stillbirth	Unknown
Numerator	679	37	240	7	153
Denominator	963	963	963	963	

Birth outcome	Singleton live birth	Multiple live birth	Miscarriage	Stillbirth	Unknown
Numerator	3,655	167	1,180	31	826
Denominator	5,033	5,033	5,033	5,033	

Birth outcome	Singleton live birth	Multiple live birth	Miscarriage	Stillbirth	Unknown
Numerator	2,900	51	602	30	364
Denominator	3,583	3,583	3,583	3,583	

Numerator: Number for the specified birth outcome.

Denominator: Total number of ongoing pregnancies for the specified embryo transfer type.

02

Choosing Wisely Guidelines

Choosing Wisely Canada



A national clinician-led initiative promoting evidence-based care and reducing low-value interventions in fertility and andrology.

The goal is to identify frequently overused tests and treatments that do not add value to patient care.

<https://choosingwiselycanada.org/recommendation/fertility-and-andrology/>



CARTR Plus has data on four recommendations.



Fertility and Andrology Seven Tests and Treatments to Question



1

Don't routinely perform preimplantation genetic testing for aneuploidy screening on patients undergoing IVF



2

Don't prescribe gonadotropins in doses of >450 units daily for controlled ovarian stimulation in IVF



3

Don't routinely perform assisted hatching on embryos prior to transfer

4

Don't routinely perform hysteroscopy prior to IVF in women with a normal transvaginal ultrasound



5

Don't perform endometrial receptivity testing



6

Don't do repetitive hormone tests and ultrasounds in the work up of infertility or to time intercourse in cycles without treatment



7

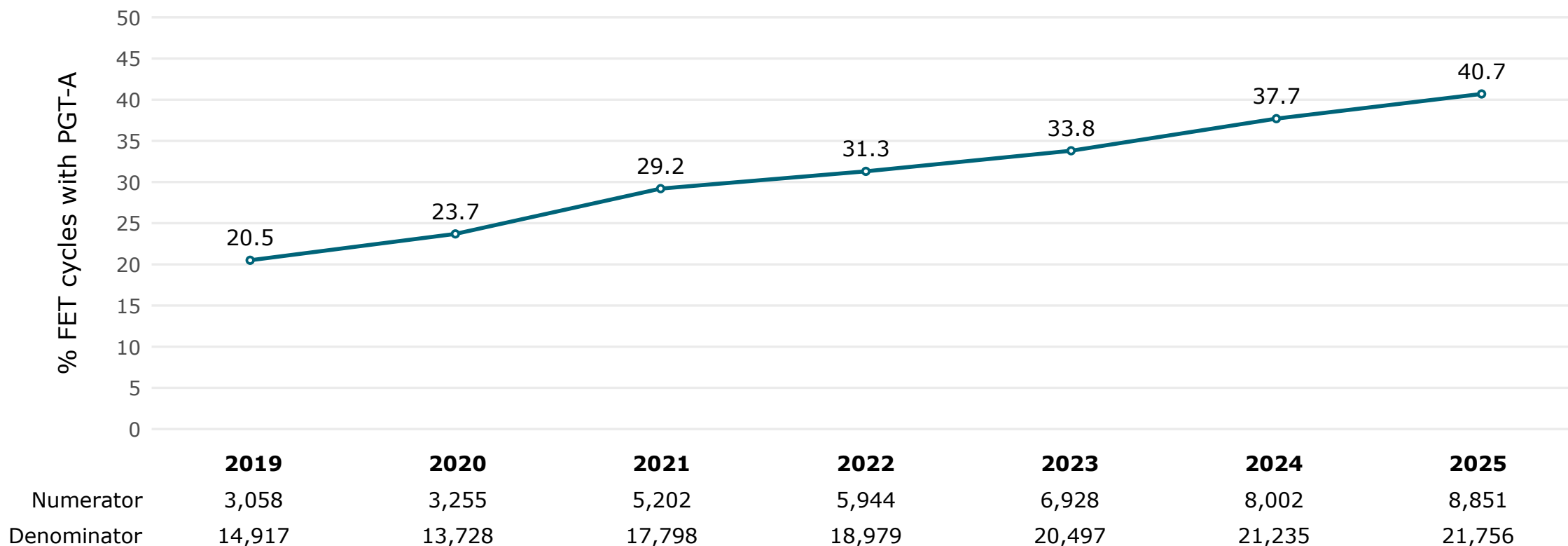
Don't conduct in-person visits if a virtual visit is feasible, clinically appropriate and preferred by the patient



Climate-Conscious Recommendations

FET cycles with PGT-A by Year

Own oocytes, 2019-2025



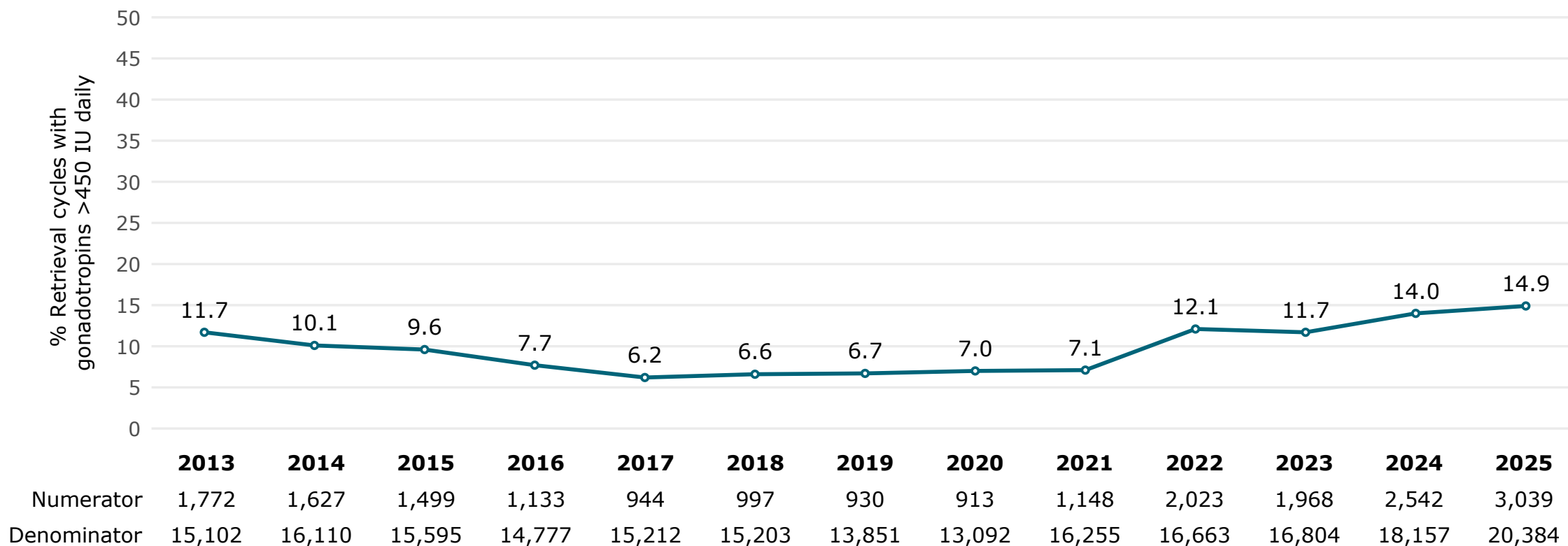
Numerator: Number of FET cycles in which embryos had undergone PGT-A testing prior to transfer.

Denominator: Number of FET cycles.

In 2026, historical counts were revised to include frozen embryos thawed and transferred within fresh IVF cycles; therefore, numerators and denominators differ from previously reported values.

Gonadotropins Greater Than 450 IU Daily by Year

Retrieval cycles, own oocytes, 2013-2025



Numerator: Number of retrieval cycles with documented gonadotropin dose greater than 450 IU Daily.

Denominator: Number of retrieval cycles with documented gonadotropin dose.

Gonadotropin calculation: Total dose of FSH (follicle stimulating hormone) measured in IU (12 mcg Rekovelle = 200 IU FSH).

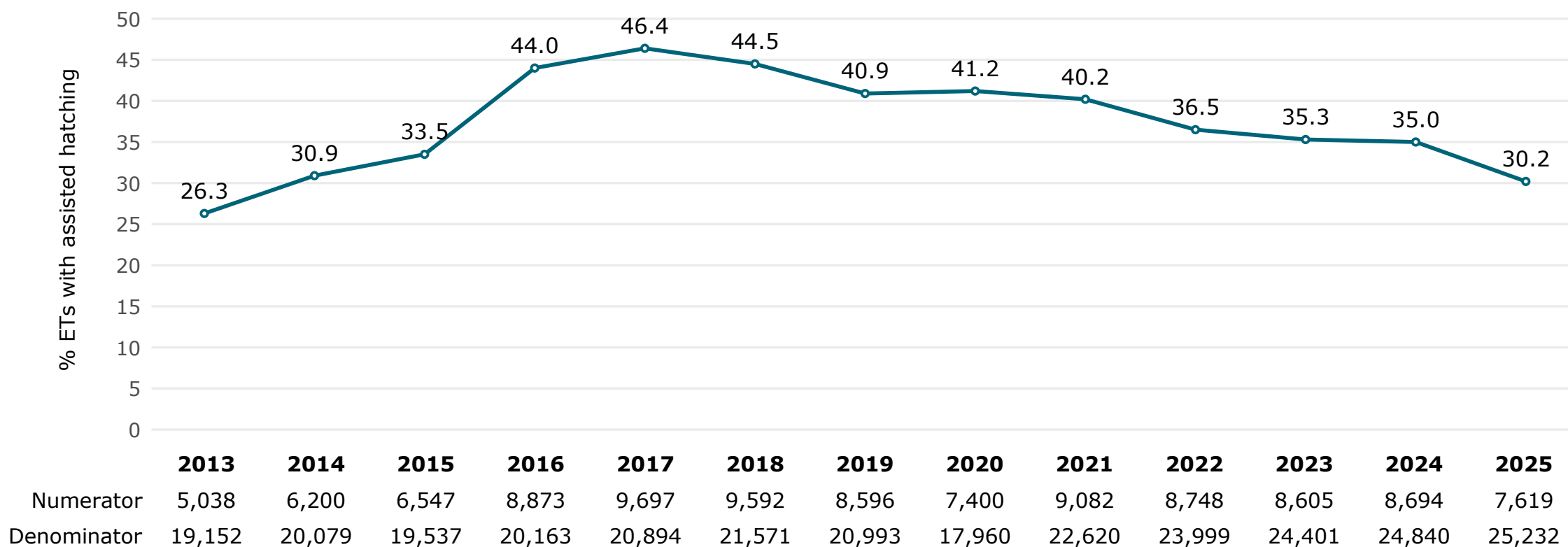
There were 4,984 retrieval cycles with missing or undocumented gonadotropin dose information.

Controlled ovarian stimulation medication fields were revised in January 2022 to improve data capture, which may partly explain the increase observed between 2021 and 2022.

Ongoing data quality improvement efforts have led to updates in the CARTR data. Therefore, the figure presented here differs from previously reported values and represents the most current available data.

Assisted Hatching on ETs by Year

Own oocytes, 2013-2025



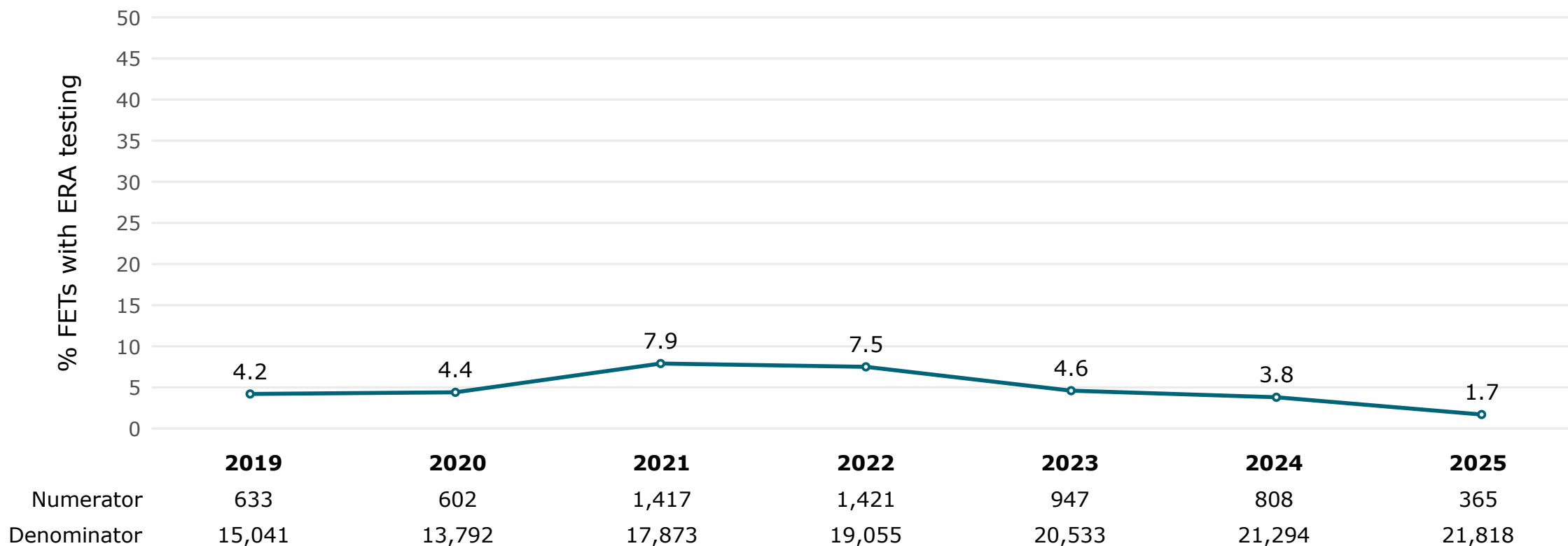
Numerator: Number of embryo transfers with assisted hatching.

Denominator: Number of embryo transfers.

Assisted hatching: Method used to thin or perforate the zona before transfer, for all or some embryos.

Endometrial Receptivity Assay (ERA) Testing by Year

FET, own oocytes, 2019-2025



Numerator: Number of frozen embryo transfers with endometrial receptivity assay (ERA) testing.

Denominator: Number of frozen embryo transfers.

Endometrial Receptivity Assay (ERA) is a diagnostic test that evaluates optimal timing for ETs by analyzing the endometrial tissues to determine receptivity for embryo implantation.

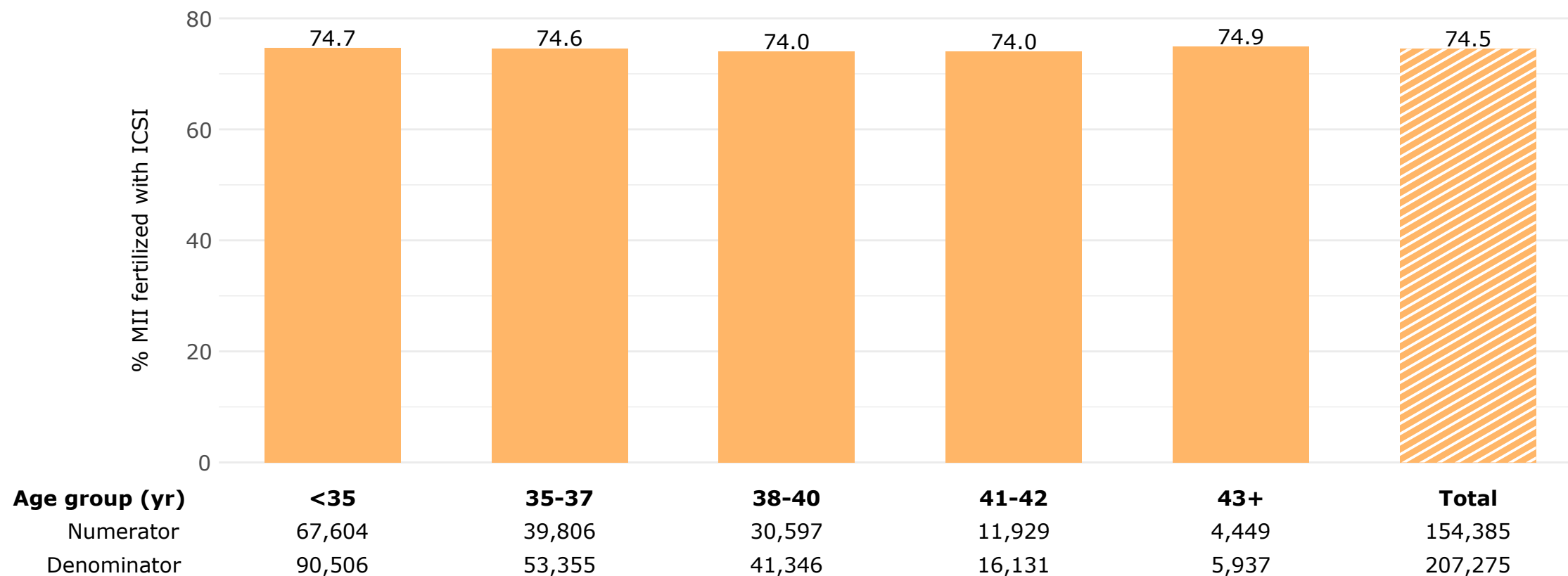
Ongoing data quality improvement efforts have led to updates in the CARTR data. Therefore, the figure presented here differs from previously reported values and represents the most current available data.

03

Retrieval Metrics & Lab KPIs

Maturity Rate

Own oocytes, ICSI, 2025



Numerator: Number of MII (mature oocyte that is in the Metaphase II stage of meiosis) among ICSI cycles.

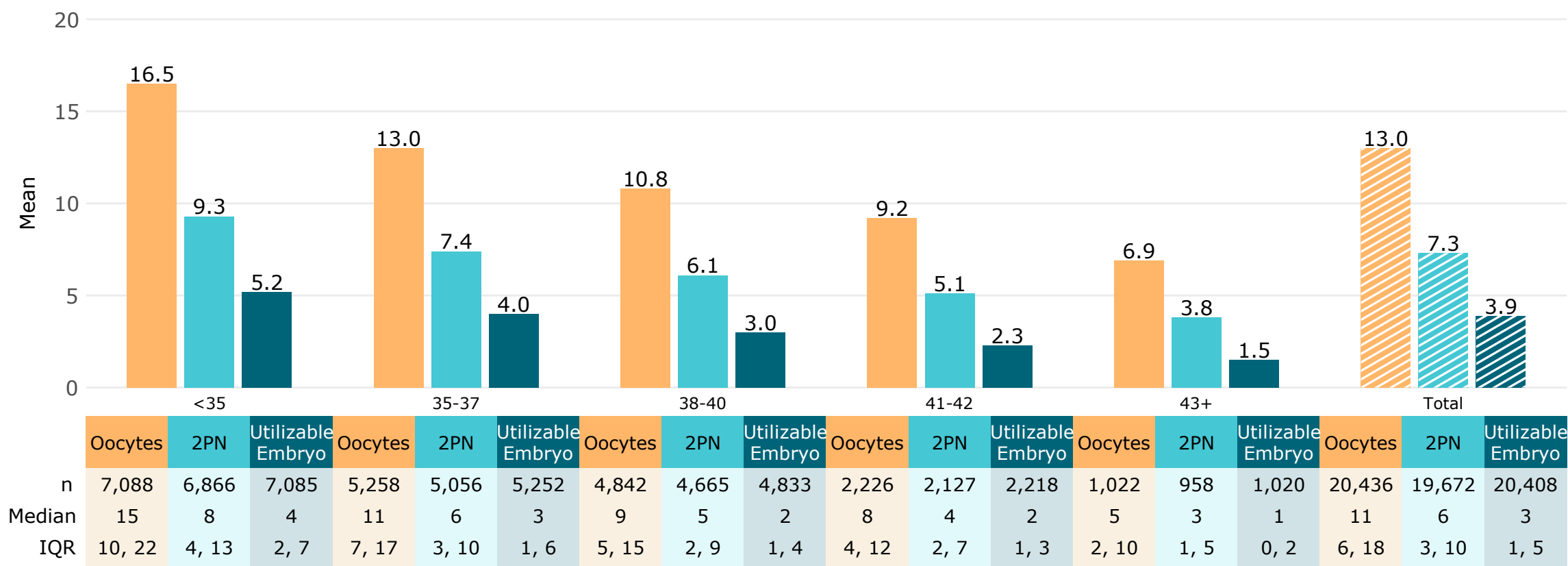
Denominator: Number of oocytes retrieved among ICSI cycles.

ICSI: Intracytoplasmic Sperm Injection (ICSI) where a single sperm is directly injected into the cytoplasm of a mature egg (MII oocyte) to achieve fertilization.

Age refers to the age of oocyte provider at the time of retrieval.

Oocytes, 2PN, Utilizable Embryo

Per retrieval, own oocytes, 2025



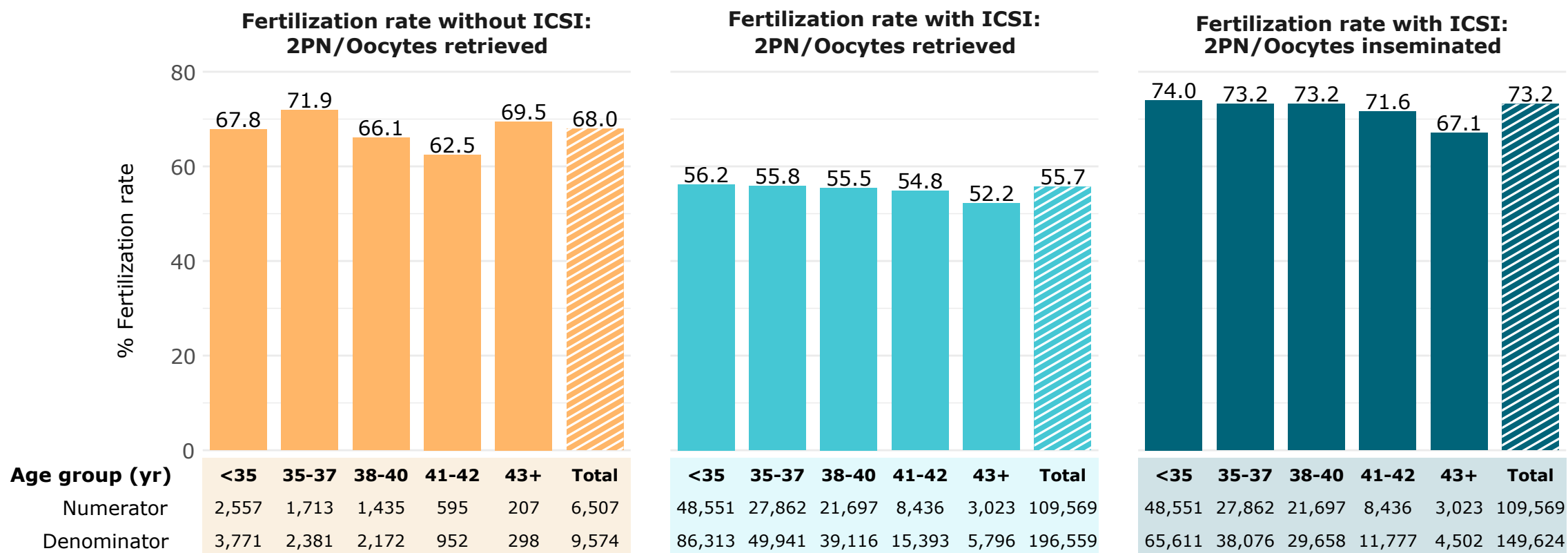
2PN: two-pronuclear (2PN) stage of embryo development.

Utilizable embryo: an embryo deemed viable enough to be transferred into the uterus, frozen for future use, or biopsied for genetic testing

Age refers to the age of oocyte provider at the time of retrieval.

Fertilization Rate

Own oocytes, 2025



2PN: two-pronuclear (2PN) stage of embryo development.

Fertilization rate: Number of 2PN/Number of oocytes retrieved; Number of 2PN/Number of oocytes inseminated.

ICSI: Intracytoplasmic Sperm Injection (ICSI) where a single sperm is directly injected into the cytoplasm of a mature egg (MII oocyte) to achieve fertilization.

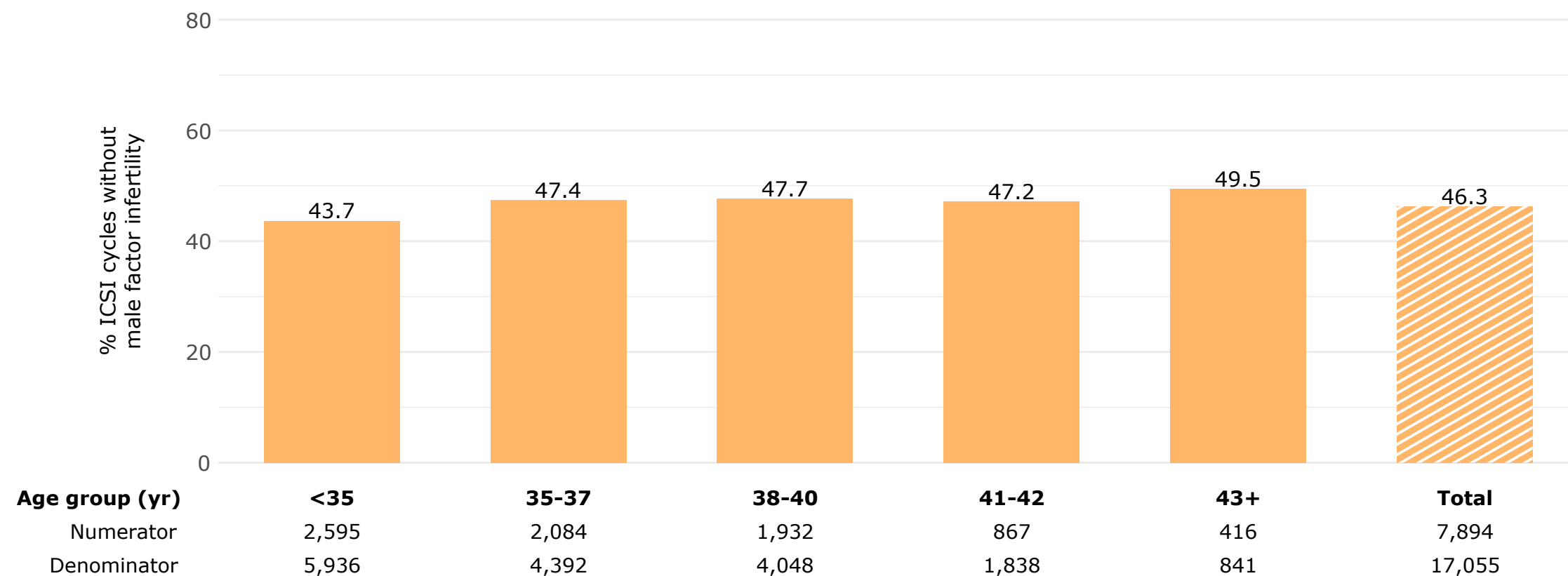
Age refers to the age of oocyte provider at the time of retrieval.

Limited to validated data, defined as the number of MIIs ≥ inseminated oocytes, and inseminated oocytes ≥ 2PN.

Cycles that used both ICSI and non-ICSI fertilization were excluded.

Use of ICSI Without Male Factor Infertility

ICSI cycles, own oocytes, 2025



Numerator: Number of ICSI cycles without male factor.

Denominator: Number of ICSI cycles.

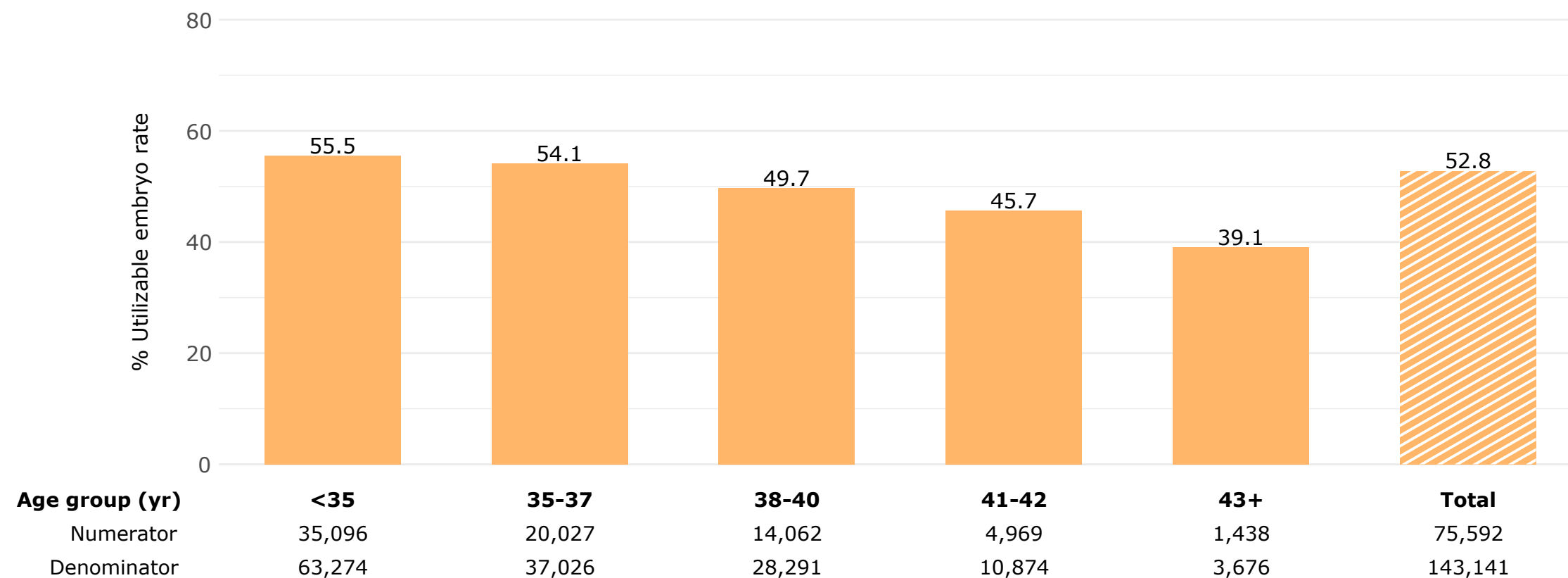
ICSI: Intracytoplasmic Sperm Injection (ICSI) where a single sperm is directly injected into the cytoplasm of a mature egg (MII oocyte) to achieve fertilization.

Age refers to the age of oocyte provider at the time of retrieval.

ICSI use in non-male-factor cases decreased from 65.7% in 2024 to 46.3% in 2025, largely reflecting improved data capture through the new "Male factor (inferred)" classification.

Utilizable Embryo Rate

Own oocytes, 2025



Numerator: Number of embryos cryopreserved or transferred.

Denominator: Number of 2PN.

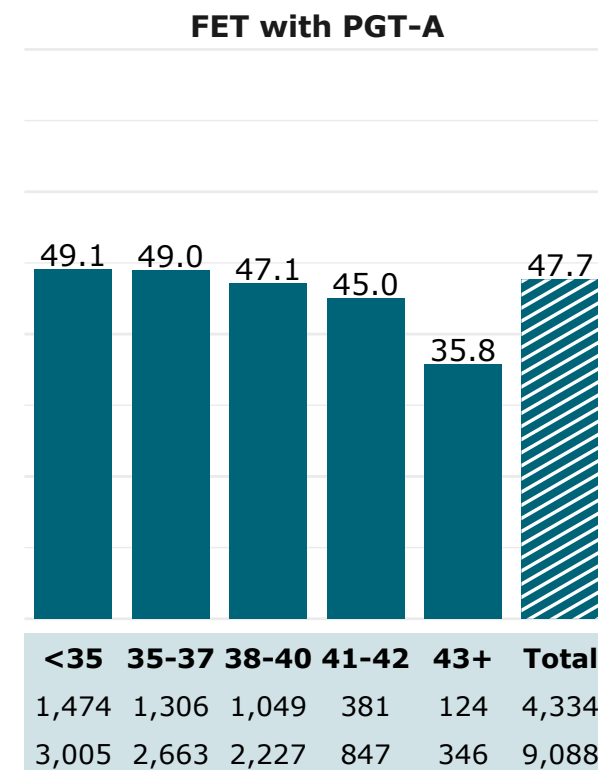
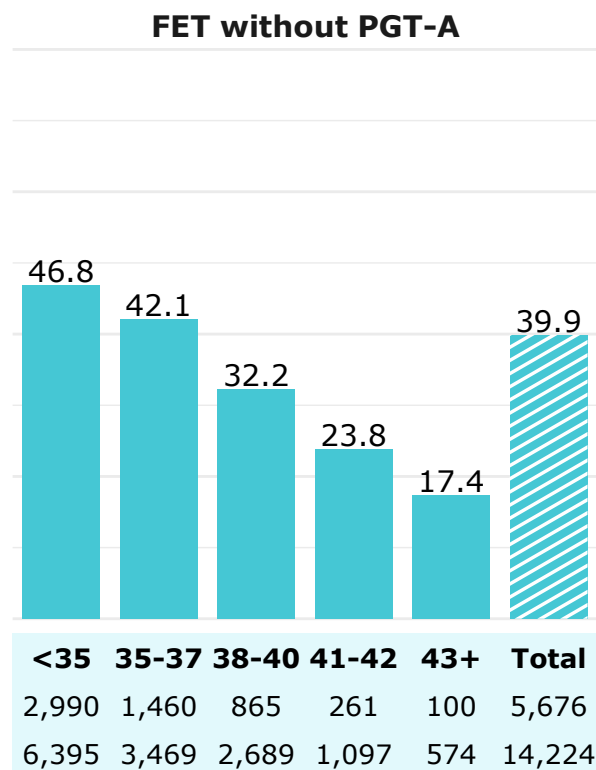
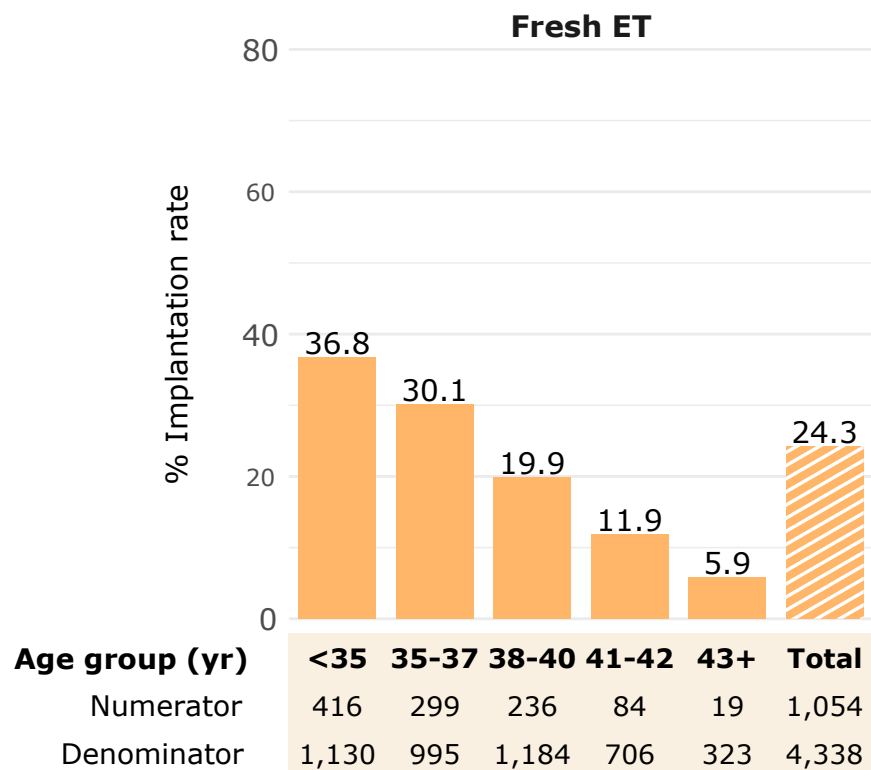
Utilizable embryo: an embryo deemed viable enough to be transferred into the uterus, frozen for future use, or biopsied for genetic testing

Age refers to the age of oocyte provider at the time of retrieval.

Limited to validated data, defined as the number of 2PN ≥ utilizable embryos.

Implantation Rate

Own oocytes, 2025



Numerator: Number of gestational sacs observed on ultrasound.

Denominator: Number of embryos transferred.

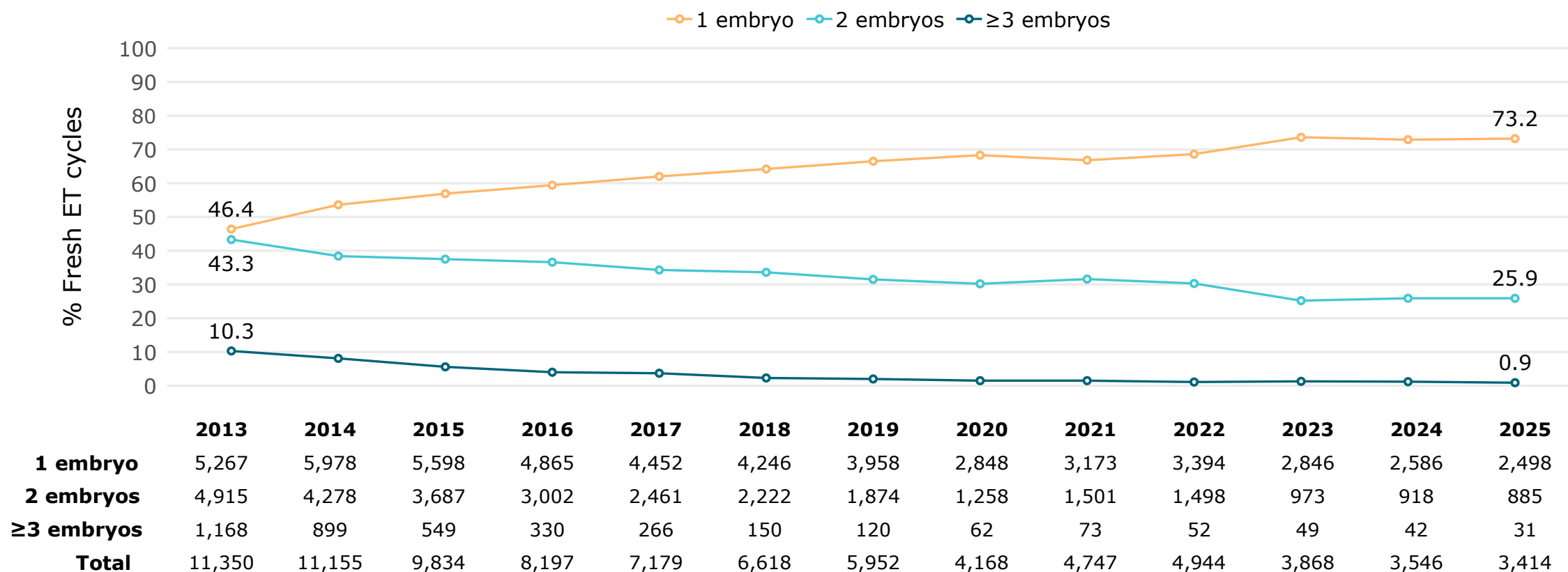
Age refers to the age of oocyte provider at the time of retrieval.

04

Embryo Transfer Metrics

Number of Embryos Transferred in Fresh ET Cycles

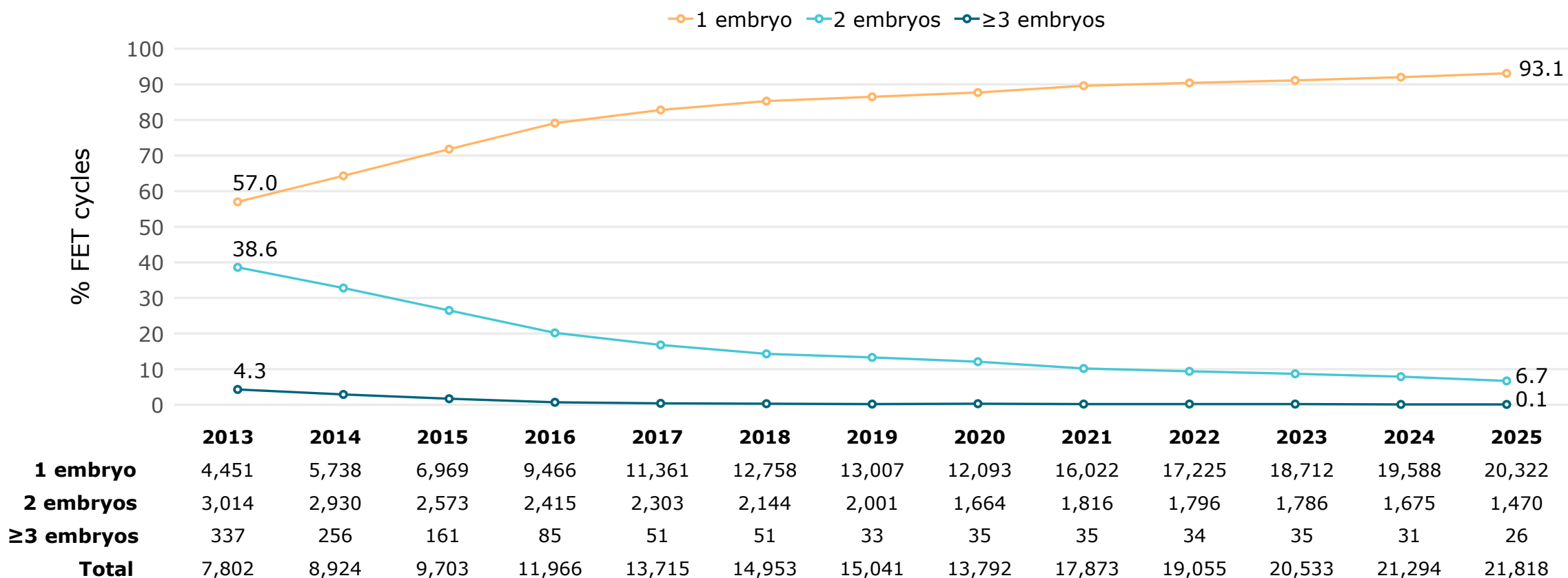
Fresh ET, own oocytes, 2013-2025



Ongoing data quality improvement efforts have led to updates in the CARTR data. Therefore, the figure presented here differs from previously reported values and represents the most current available data.

Number of Embryos Transferred in FET Cycles

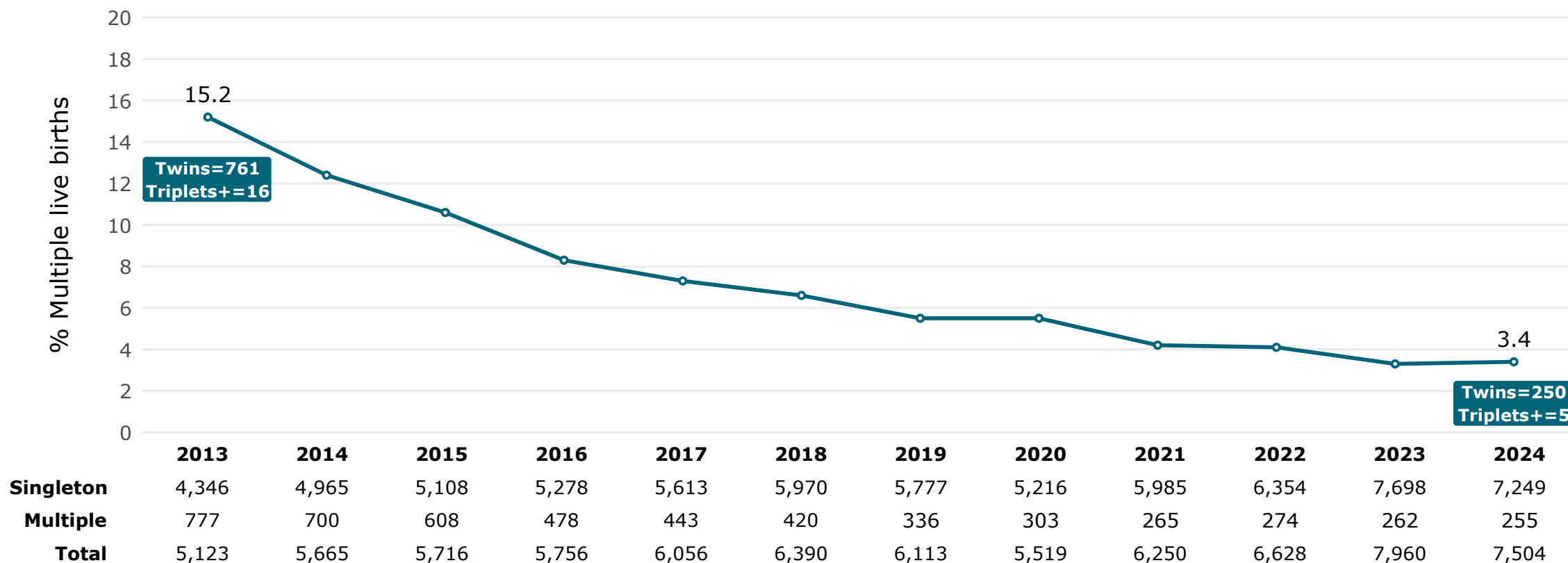
FET, own oocytes, 2013-2025



Ongoing data quality improvement efforts have led to updates in the CARTR data. Therefore, the figure presented here differs from previously reported values and represents the most current available data.

Proportion of Multiple Live Births

Live Births, own oocytes, 2013-2024



Numerator: Number of multiple live births.

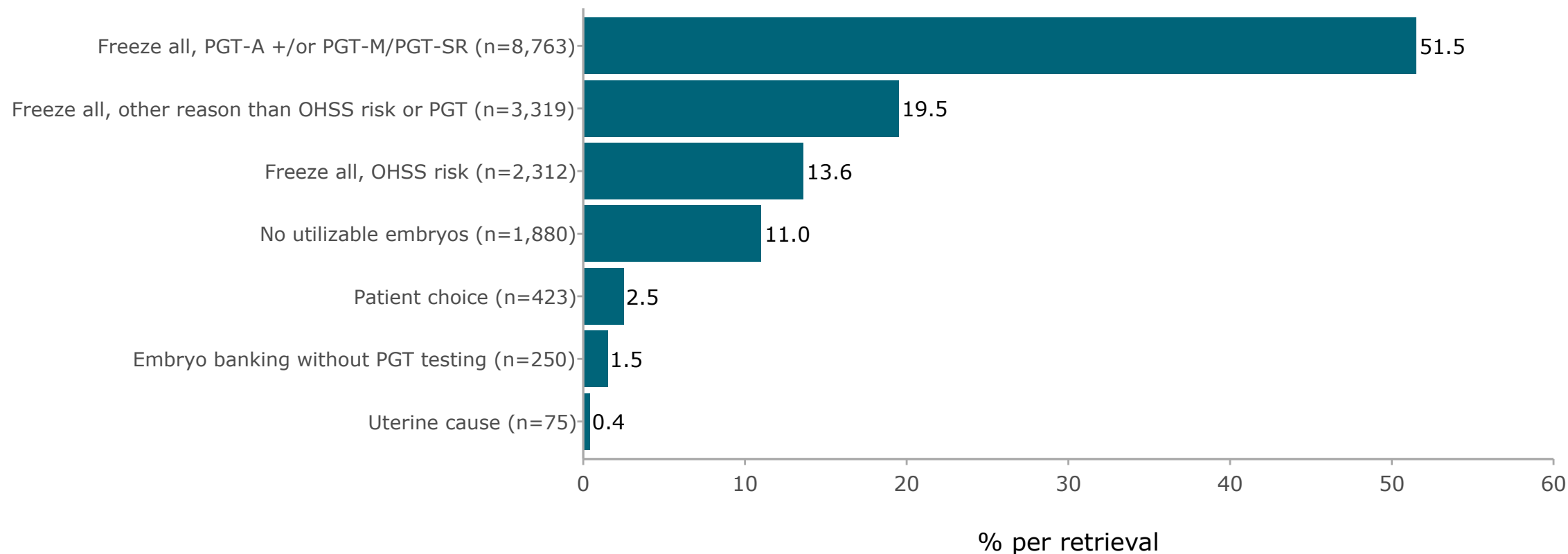
Denominator: Number of live births.

Triplets+: Refers to triplets and higher order multiples

Live births resulting from both fresh IVF and FET cycles were included.

Reason for No Fresh ET

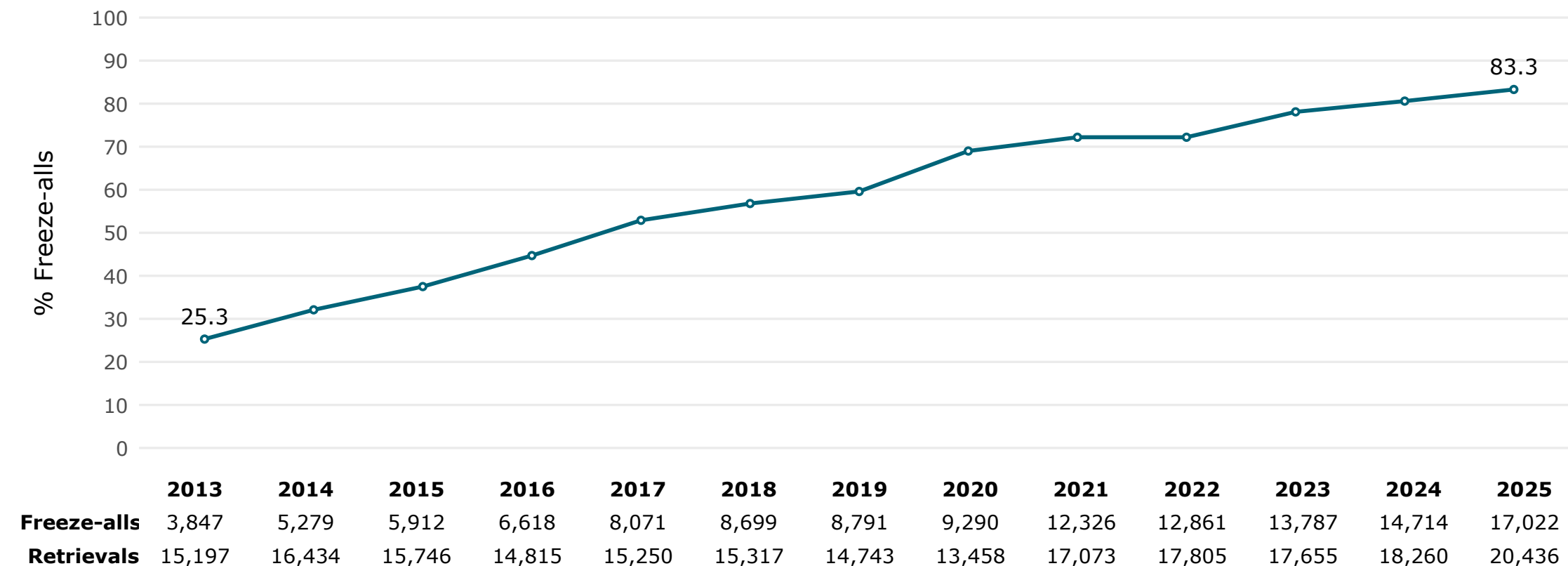
Retrieval cycles, own oocytes, 2025



Categories are mutually exclusive.

Freeze-Alls (All Embryos Frozen at Retrieval)

Retrieval cycles, own oocytes, 2013-2025



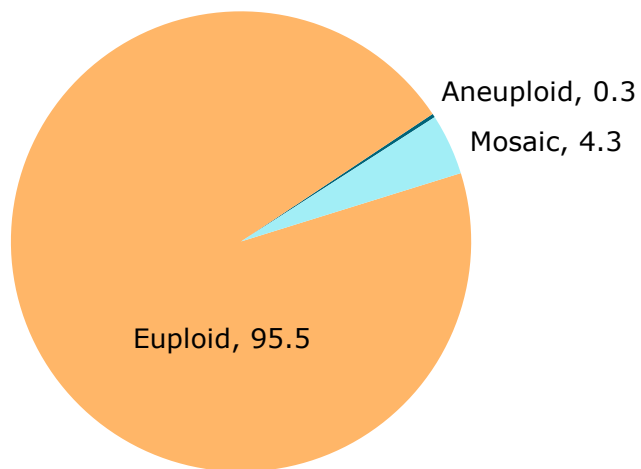
Numerator: Number of retrieval cycles with all embryos frozen.

Denominator: Number of retrieval cycles.

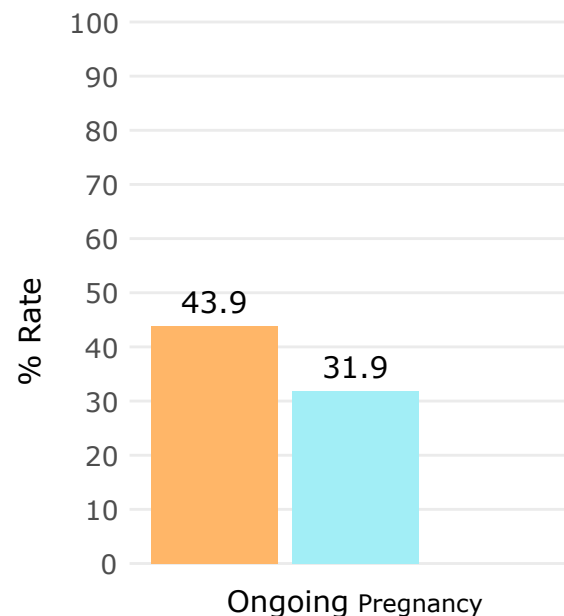
Ongoing data quality improvement efforts have led to updates in the CARTR data. Therefore, the figure presented here differs from previously reported values and represents the most current available data.

PGT-A Results for the Transferred Embryo

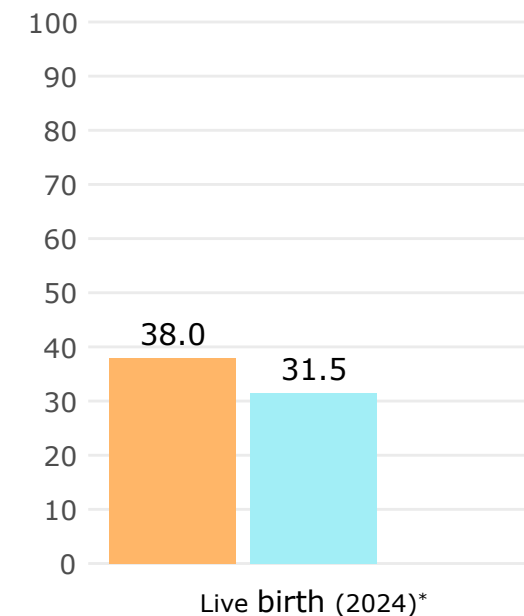
FET, own and donor oocytes, 2025



	Ploidy		
	Euploid	Mosaic	Aneuploid
Transferred embryos	9,089	408	25
Total FET with PGT-A testing	9,522	9,522	9,522



	Ploidy		
	Euploid	Mosaic	Aneuploid
Ongoing pregnancy	3,991	130	<6
FET with PGT-A testing	9,089	408	25

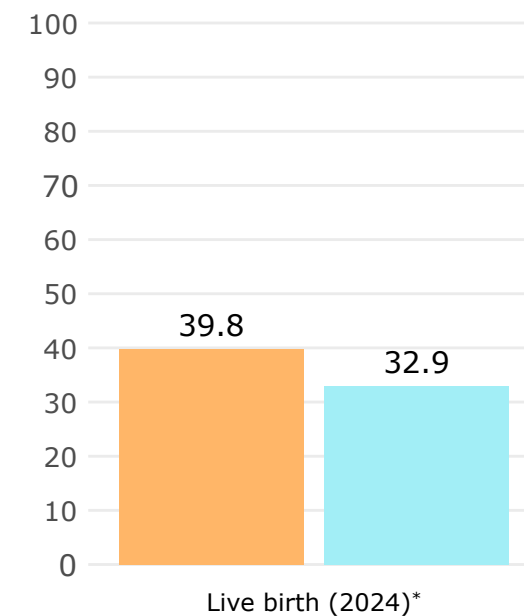
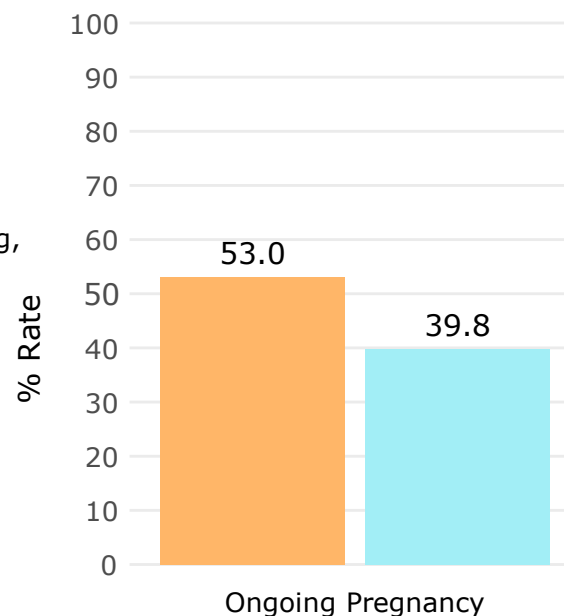
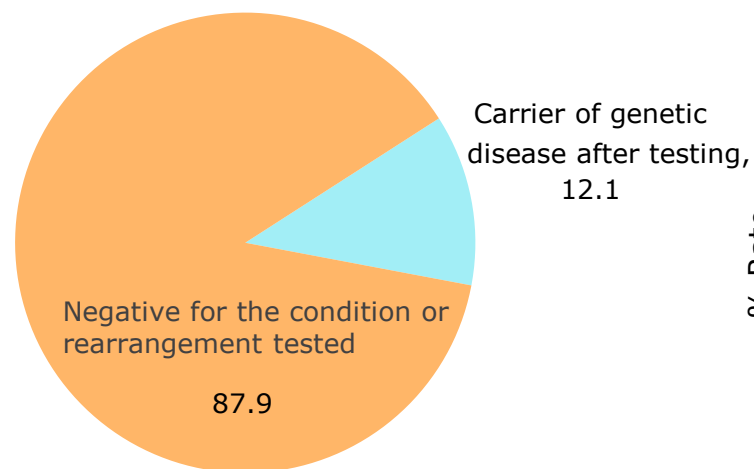


	Ploidy		
	Euploid	Mosaic	Aneuploid
Live birth	3,030	128	<6
FET with PGT-A testing	7,979	406	24

A total of 9,932 FET cycles were tested for PGT-A and/or PGT-M/SR. Of these cycles, 410 (4.1%) had an ambiguous result. *Birth outcome data are available for cycles initiated in 2024.

PGT-M/SR Genetic Status for the Transferred Embryo

FET, own and donor oocytes, 2020-2025



Genetic status	Negative for condition tested	Carrier of genetic disease after testing
Transferred embryos	788	108
Total FET with PGT-M/SR testing	896	896

Genetic status	Negative for condition tested	Carrier of genetic disease after testing
Ongoing pregnancy	418	43
FET with PGT-M/SR testing	788	108

Genetic status	Negative for condition tested	Carrier of genetic disease after testing
Live birth	231	25
FET with PGT-M/SR testing	581	76

A total of 43,700 FET cycles were tested for PGT-A and/or PGT-M/SR. Of these cycles, 2,074 (4.7%) had an ambiguous result.

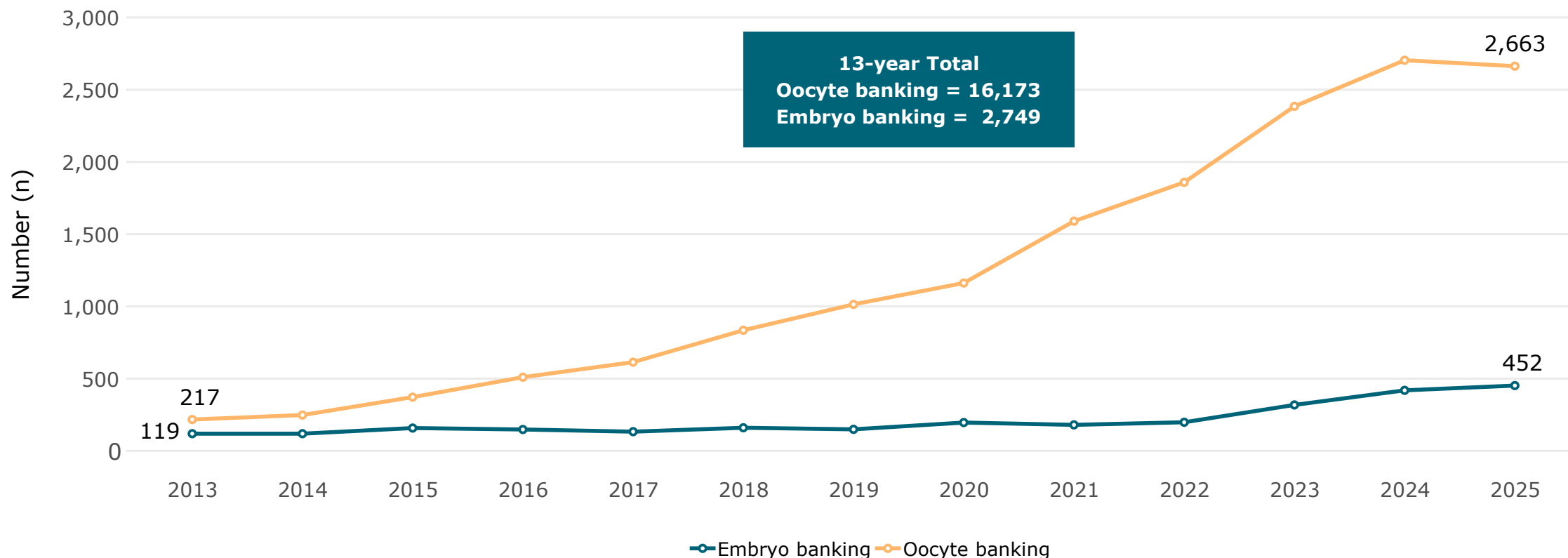
*Birth outcome data are available for cycles initiated between 2020 and 2024.

05

Fertility Preservation

Number of Retrieval Cycles with Banking, by Year

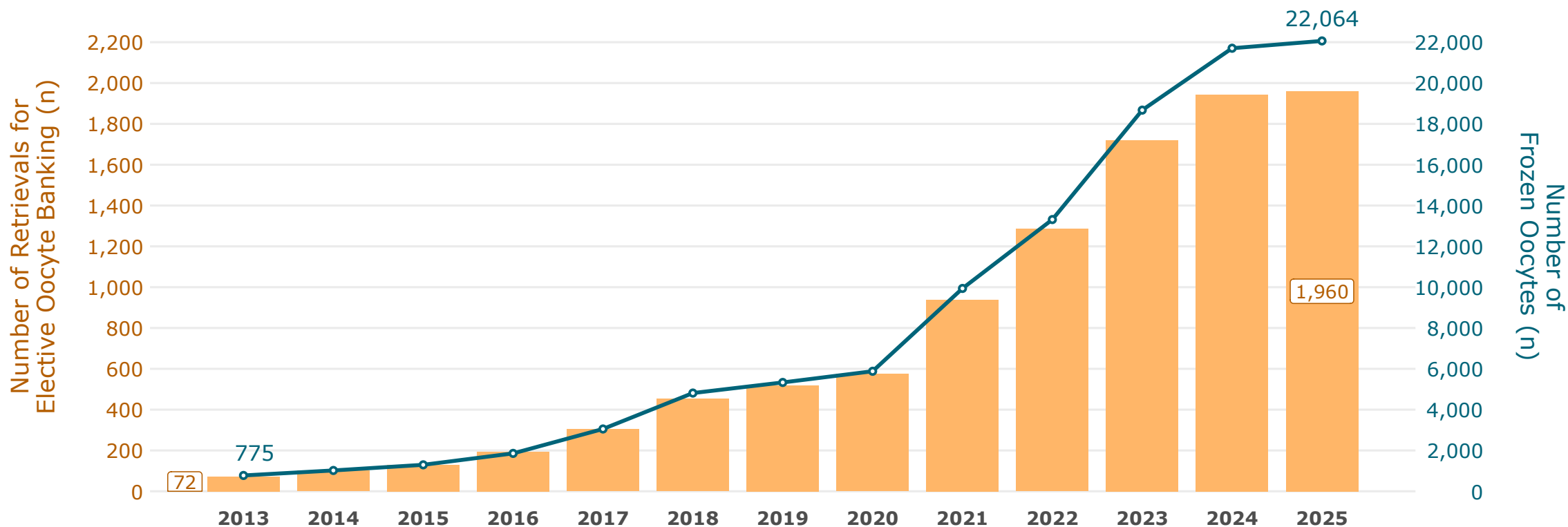
Retrievals for banking, own oocytes, 2013-2025



Ongoing data quality improvement efforts have led to updates in the CARTR data. Therefore, the figure presented here differs from previously reported values and represents the most current available data.

Elective Oocyte Banking, Retrievals and Frozen Oocytes

Own oocytes, 2013-2025



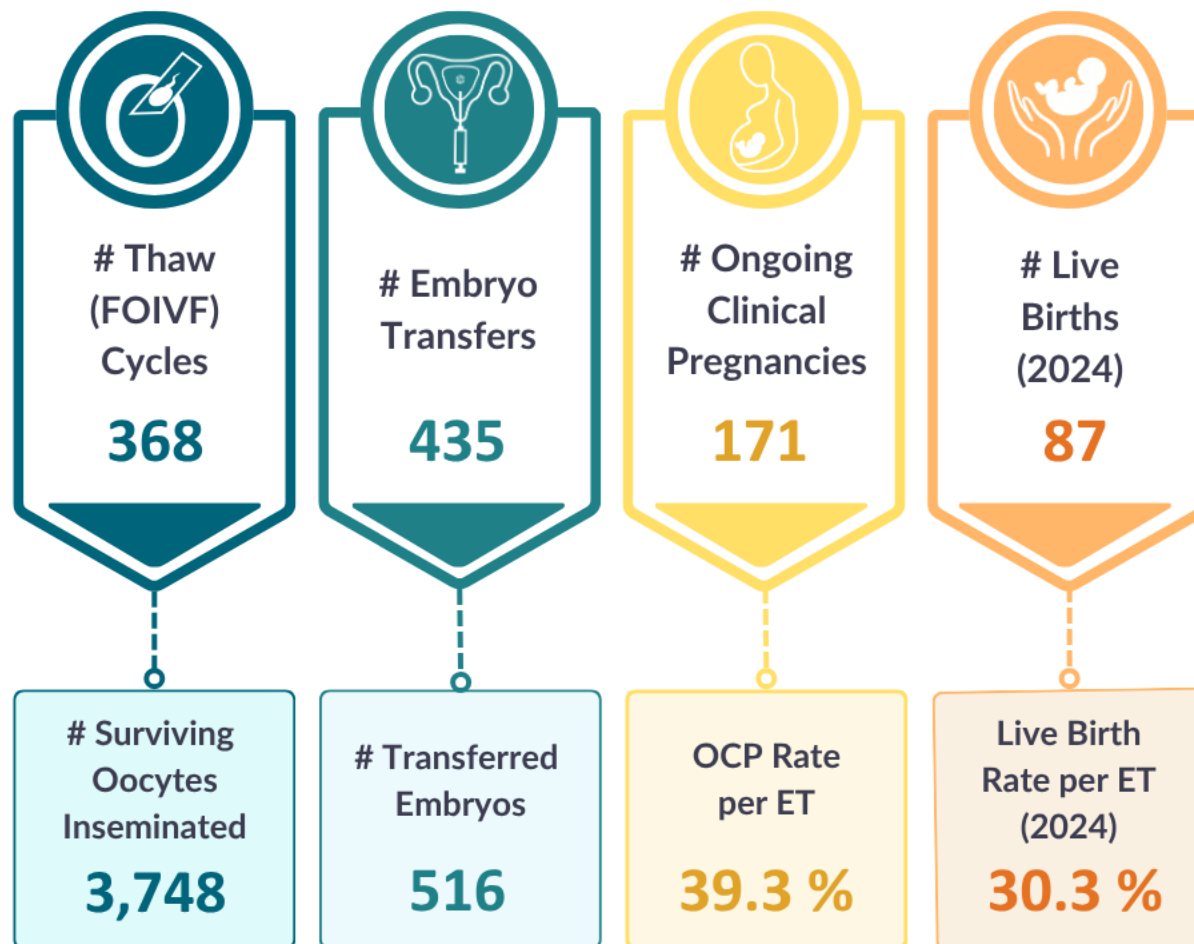
Current reporting requirements at CARTR Plus may not capture elective oocyte banking cycles consistently enough to support accurate tracking across clinics. Further work is needed to clarify and standardize how these cycles should be submitted and classified. The results presented in this report reflect submitted data and should be interpreted with caution.

Elective Oocyte Banking – Thaw Cycles

Own oocytes, 2013-2025



These thaw cycles represent a subset of the patients who returned to use their previously cryopreserved oocytes for fertility treatment.



Ongoing clinical pregnancy rate per ET: Number of ongoing clinical pregnancies/Number of embryo transfers

Live birth rate per ET: Number of live births/Number of embryo transfers

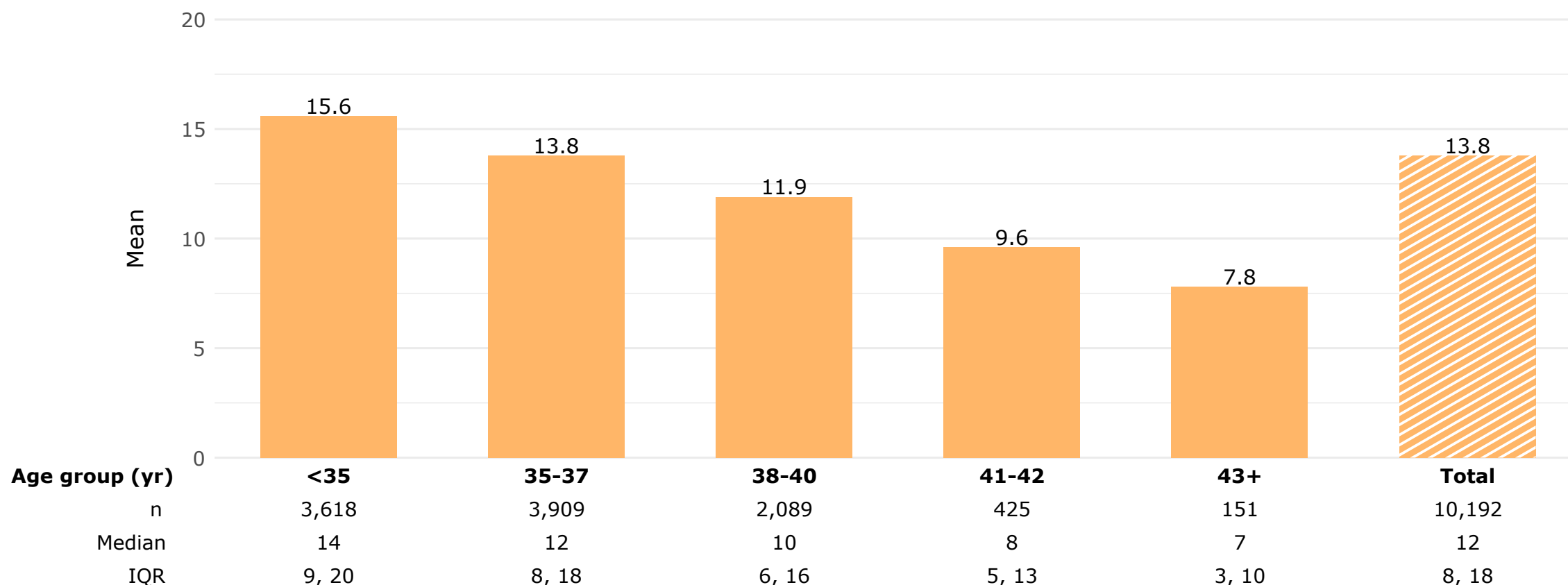
Birth outcome data are available for cycles initiated between 2013-2024.

Current reporting requirements at CARTR Plus may not capture elective oocyte banking cycles consistently enough to support accurate tracking across clinics.

Further work is needed to clarify and standardize how these cycles should be submitted and classified. The results presented in this report reflect submitted data and should be interpreted with caution.

Mean Number of Oocytes Retrieved

Elective oocyte banking, own oocytes, 2013-2025



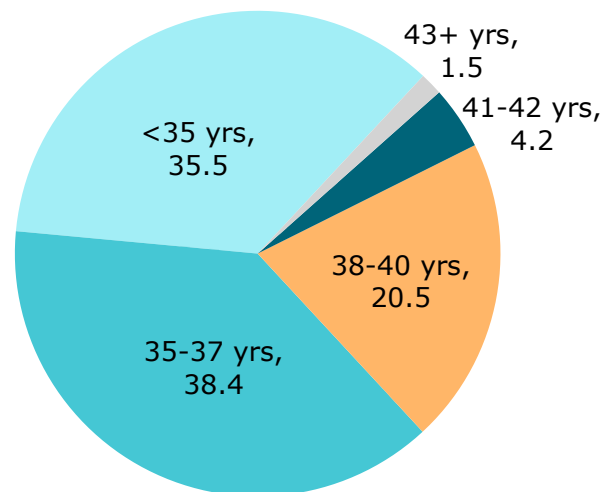
Age refers to the age of oocyte provider at the time of retrieval.

Current reporting requirements at CARTR Plus may not capture elective oocyte banking cycles consistently enough to support accurate tracking across clinics. Further work is needed to clarify and standardize how these cycles should be submitted and classified. The results presented in this report reflect submitted data and should be interpreted with caution.

Elective Oocyte Freezing: Age At Retrieval and Thaw

Own oocytes, 2013-2025

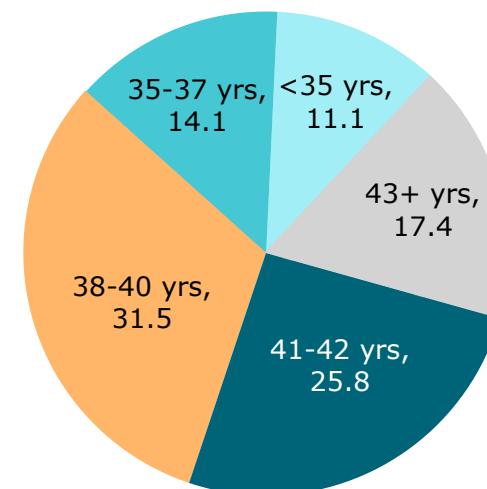
Age at Retrieval



Age group (yr)	<35	35-37	38-40	41-42	43+
Numerator	3,618	3,909	2,089	425	151
Denominator	10,192	10,192	10,192	10,192	10,192

Approximately 40% of retrievals occur among patients in the 35-37-year age cohort.

Age at Thaw



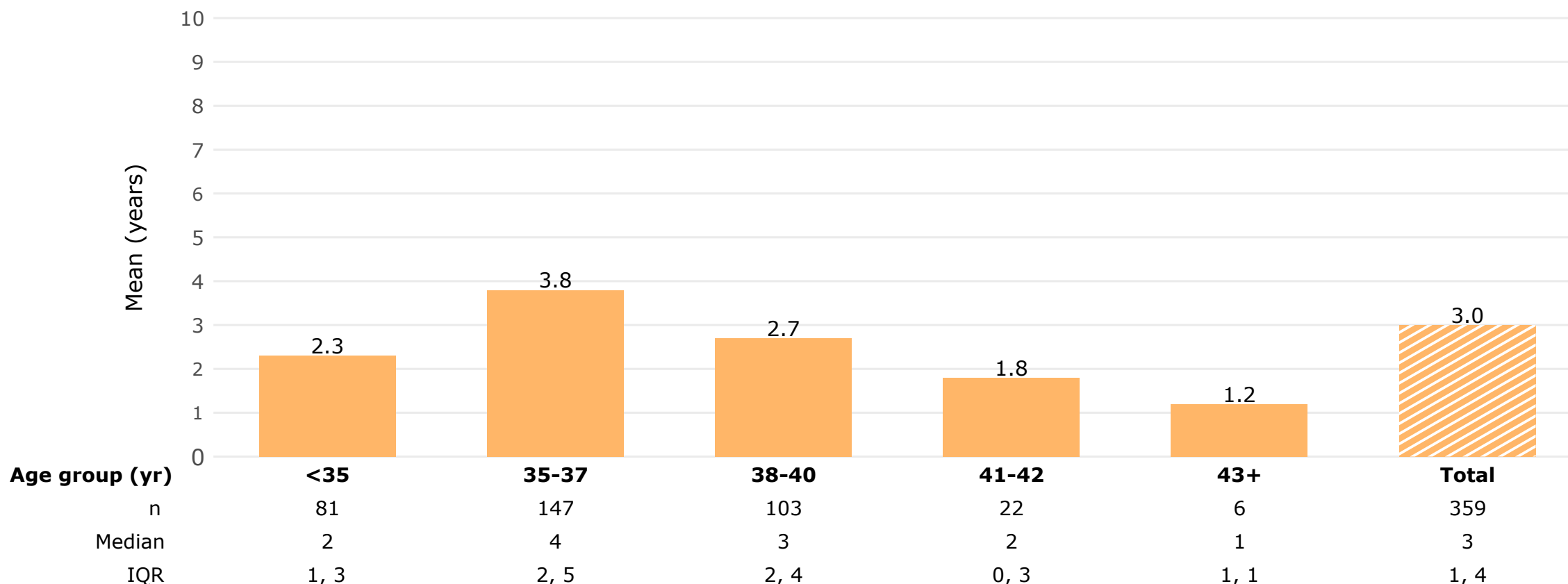
Age group (yr)	<35	35-37	38-40	41-42	43+
Numerator	41	52	116	95	64
Denominator	368	368	368	368	368

Approximately 34% of thaws occur among patients in the 38-40-year age cohort.

Current reporting requirements at CARTR Plus may not capture elective oocyte banking cycles consistently enough to support accurate tracking across clinics. Further work is needed to clarify and standardize how these cycles should be submitted and classified. The results presented in this report reflect submitted data and should be interpreted with caution.

Mean Number of Years Between Freeze and Thaw

Elective oocyte banking, own oocytes, 2013-2025



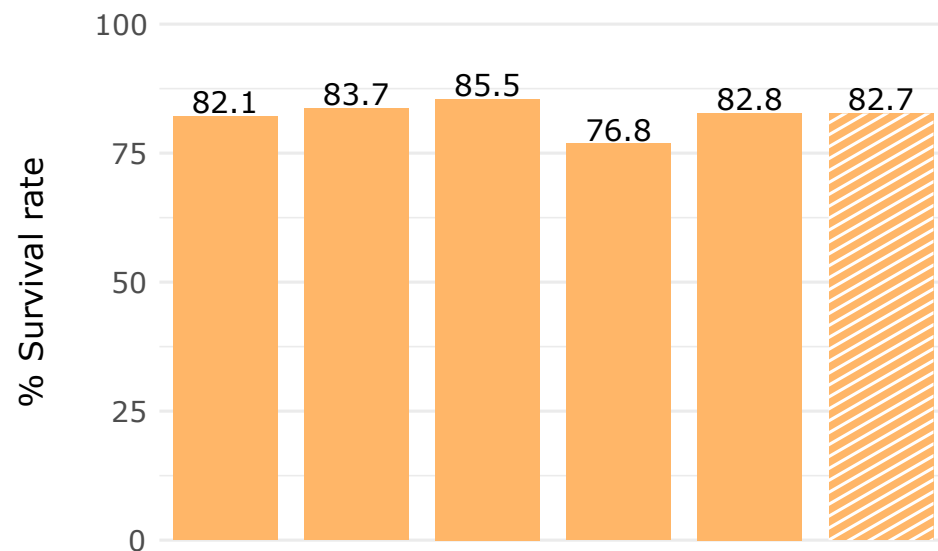
Age refers to the age of oocyte provider at the time of retrieval.

Current reporting requirements at CARTR Plus may not capture elective oocyte banking cycles consistently enough to support accurate tracking across clinics. Further work is needed to clarify and standardize how these cycles should be submitted and classified. The results presented in this report reflect submitted data and should be interpreted with caution.

Elective Oocyte Freezing: Survival and Fertilization Rate

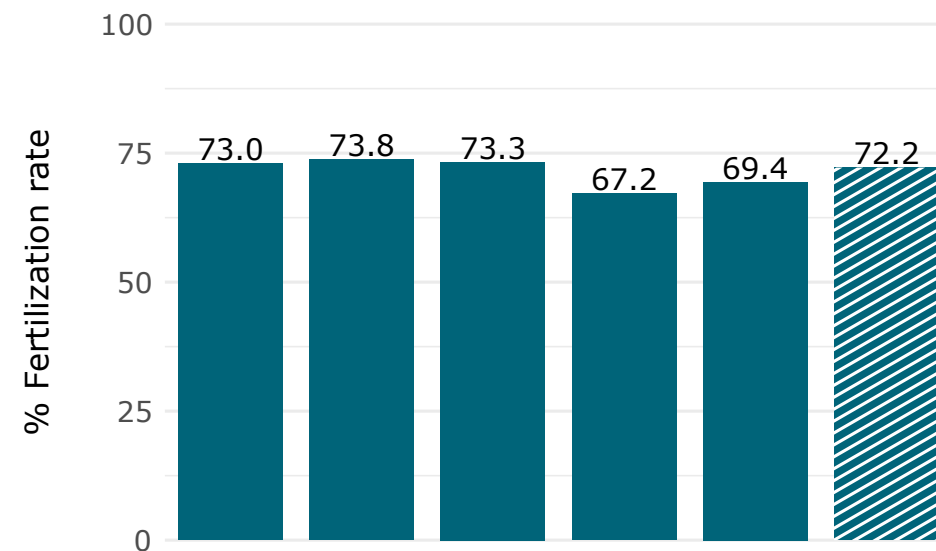
Own oocytes, 2013-2025

**Survival rate:
oocytes inseminated/oocytes thawed**



Age group (yr)	<35	35-37	38-40	41-42	43+	Total
Numerator	805	1,025	1,081	549	288	3,748
Denominator	981	1,224	1,264	715	348	4,532

**Fertilization rate:
2PN/oocytes inseminated**



Age group (yr)	<35	35-37	38-40	41-42	43+	Total
Numerator	588	756	792	369	200	2,705
Denominator	805	1,025	1,081	549	288	3,748

2PN: two-pronuclear (2PN) stage of embryo development.

Survival rate: Number of oocytes inseminated/Number of oocytes thawed.

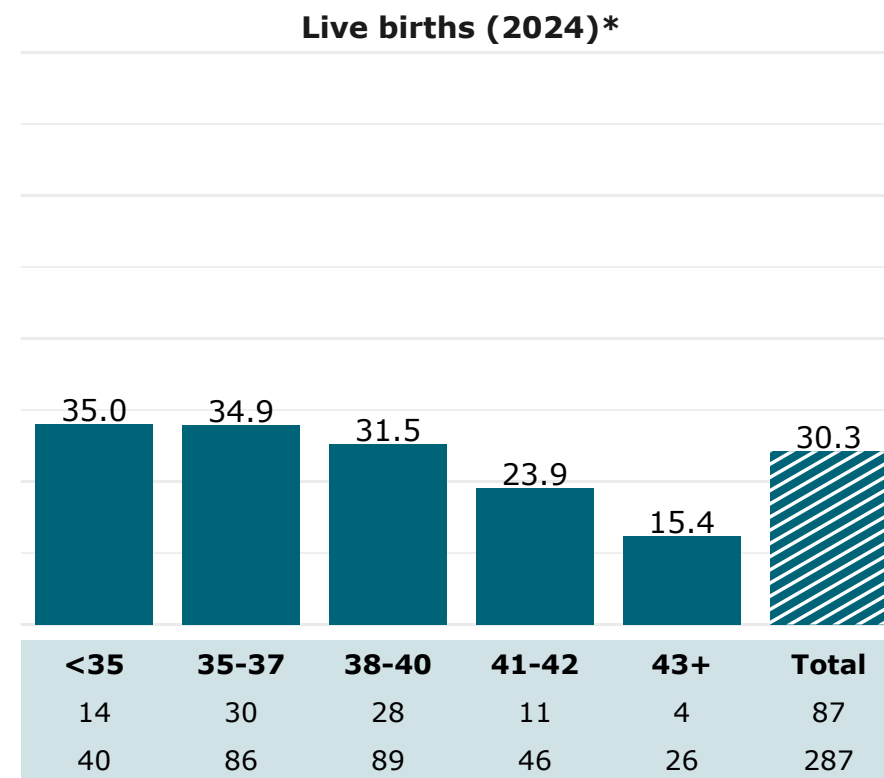
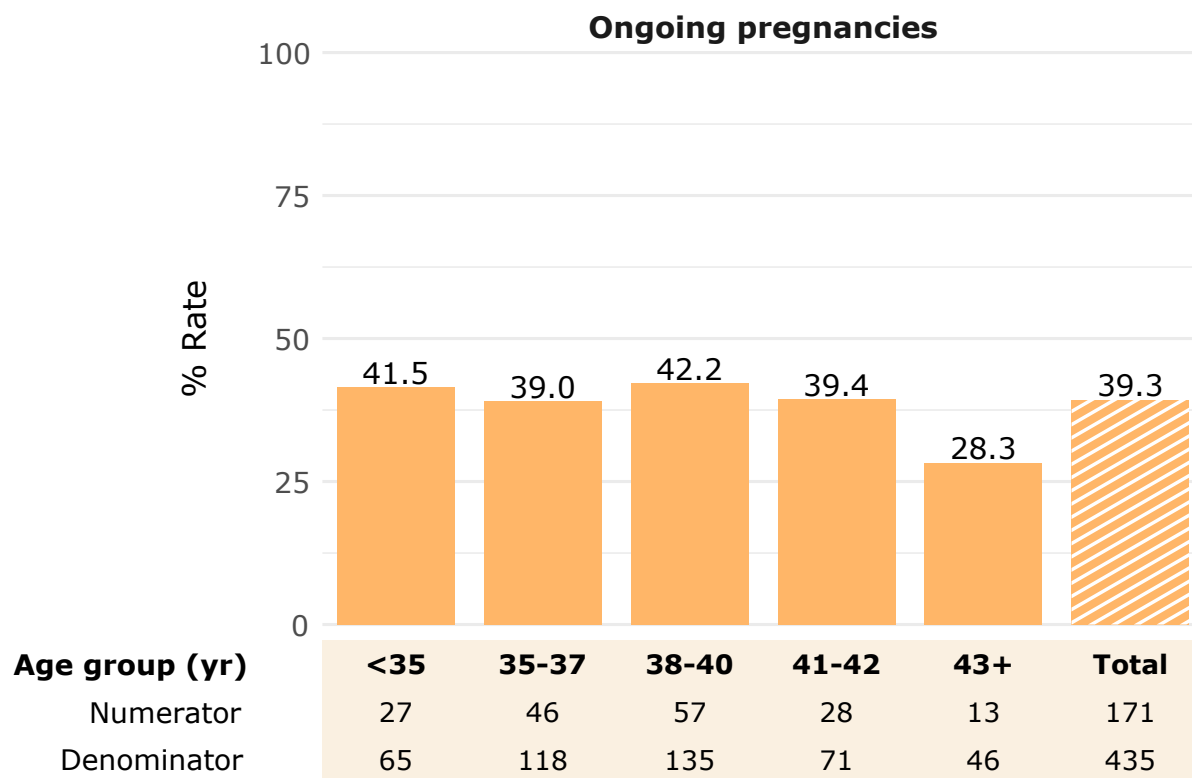
Fertilization rate: Number of 2PN/Number of oocytes inseminated.

Age refers to the age of oocyte provider at the time of retrieval.

Current reporting requirements at CARTR Plus may not capture elective oocyte banking cycles consistently enough to support accurate tracking across clinics. Further work is needed to clarify and standardize how these cycles should be submitted and classified. The results presented in this report reflect submitted data and should be interpreted with caution.

Elective Oocyte Freezing: Ongoing Pregnancy and Live Birth Rate per ET

Fresh ET and FET, own oocytes, 2013-2025



Numerator: Number of ongoing pregnancies; Number of live births.

Denominator: Number of embryo transfers.

Age refers to the age of oocyte provider at the time of retrieval.

*Birth outcome data are available for cycles initiated between 2013 and 2024.

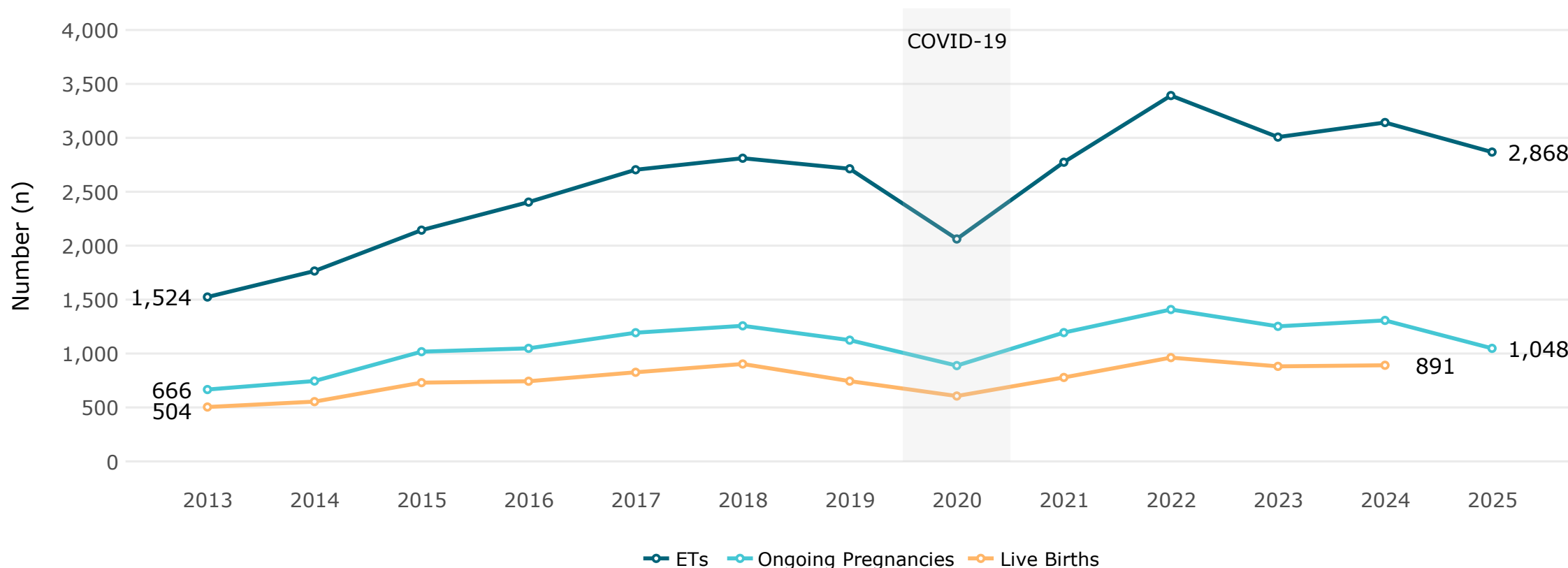
Current reporting requirements at CARTR Plus may not capture elective oocyte banking cycles consistently enough to support accurate tracking across clinics. Further work is needed to clarify and standardize how these cycles should be submitted and classified. The results presented in this report reflect submitted data and should be interpreted with caution.

06

Third Party Fertility

Embryo Transfers, Ongoing Pregnancies, and Live Births

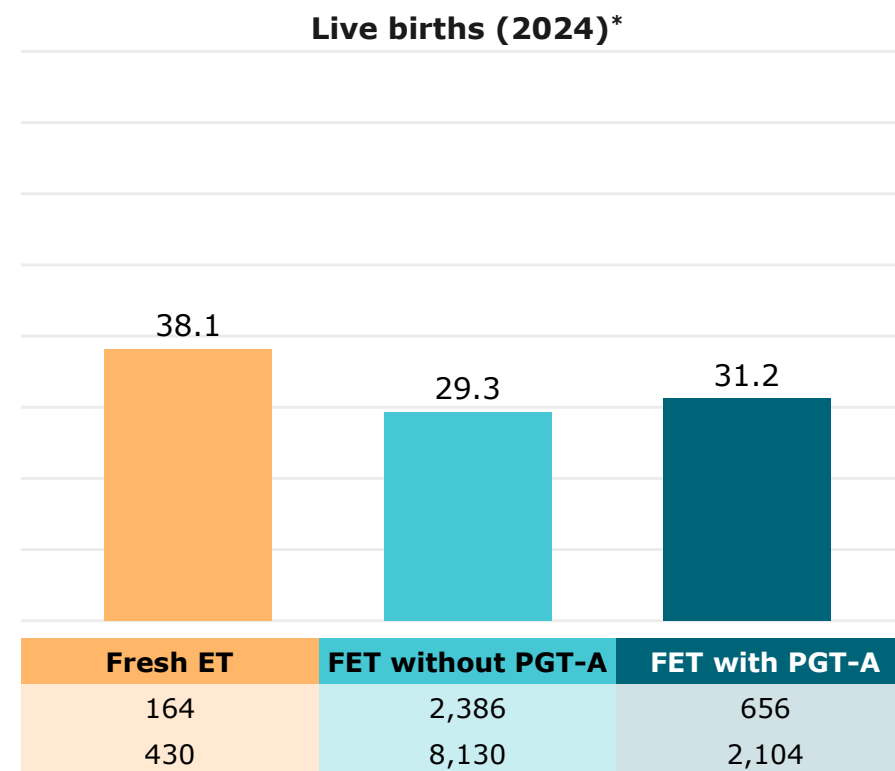
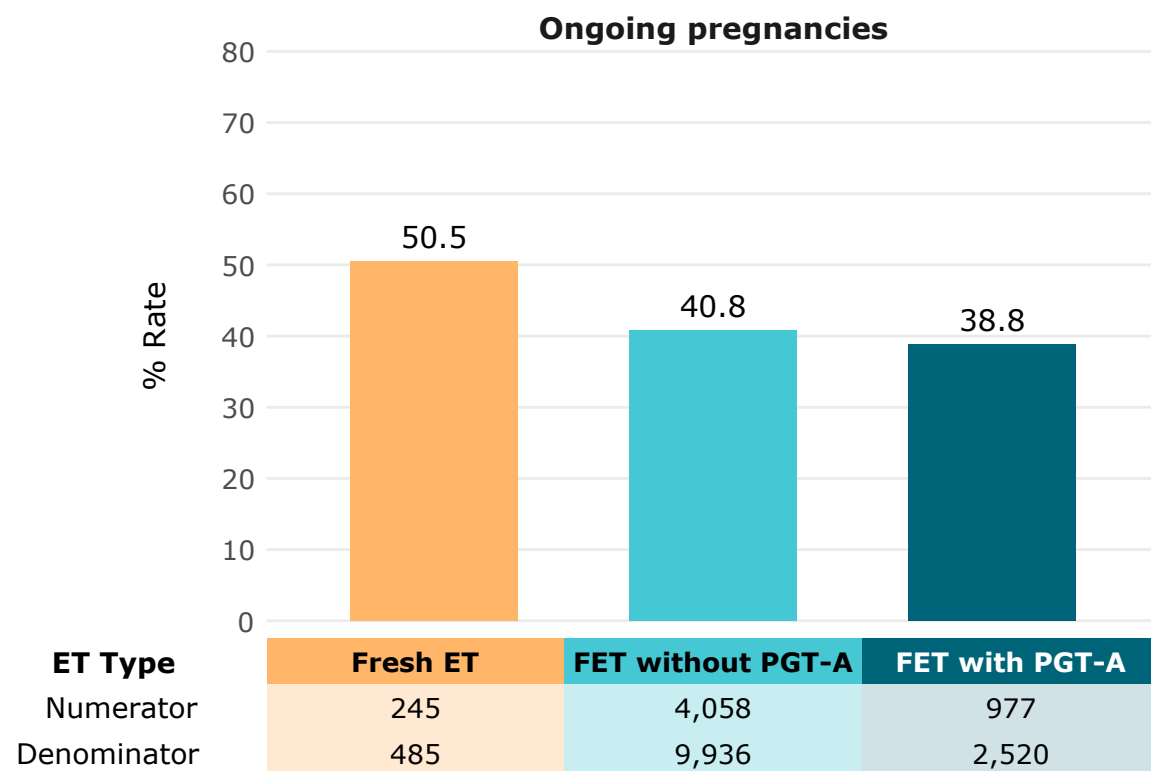
Fresh and frozen donor oocytes, 2013-2025



Ongoing data quality improvement efforts have led to updates in the CARTR data. Therefore, the figure presented here differs from previously reported values and represents the most current available data.

Ongoing Pregnancy and Live Birth Rate per ET

Fresh and frozen donor oocytes, 2019-2025



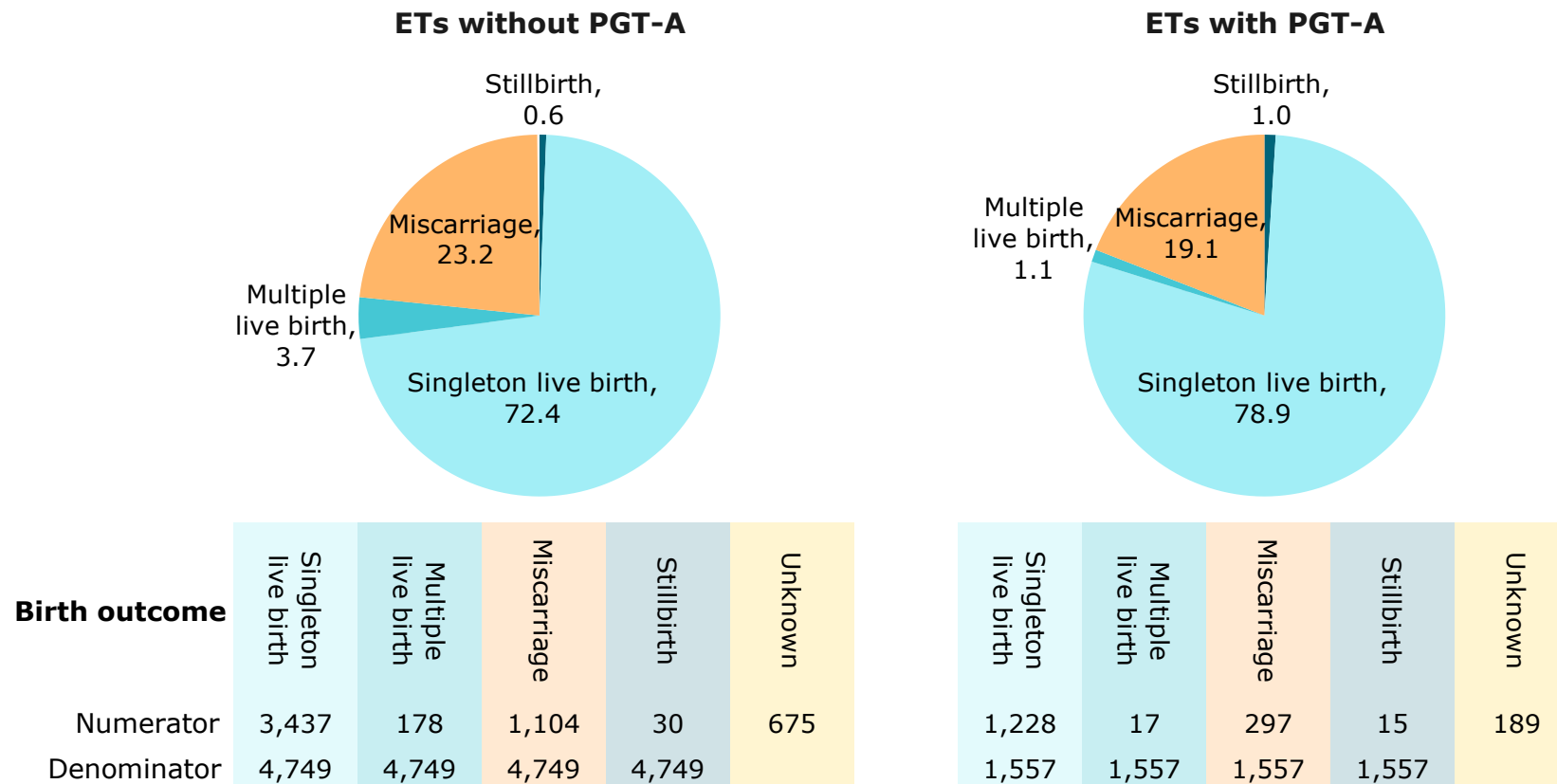
Numerator: Number of ongoing pregnancies; Number of live births.

Denominator: Number of embryo transfers for the specified embryo transfer type.

*Birth outcome data are available for cycles initiated between 2019 and 2024.

Birth Outcomes from Donor Oocytes

Ongoing pregnancies, 2019-2024

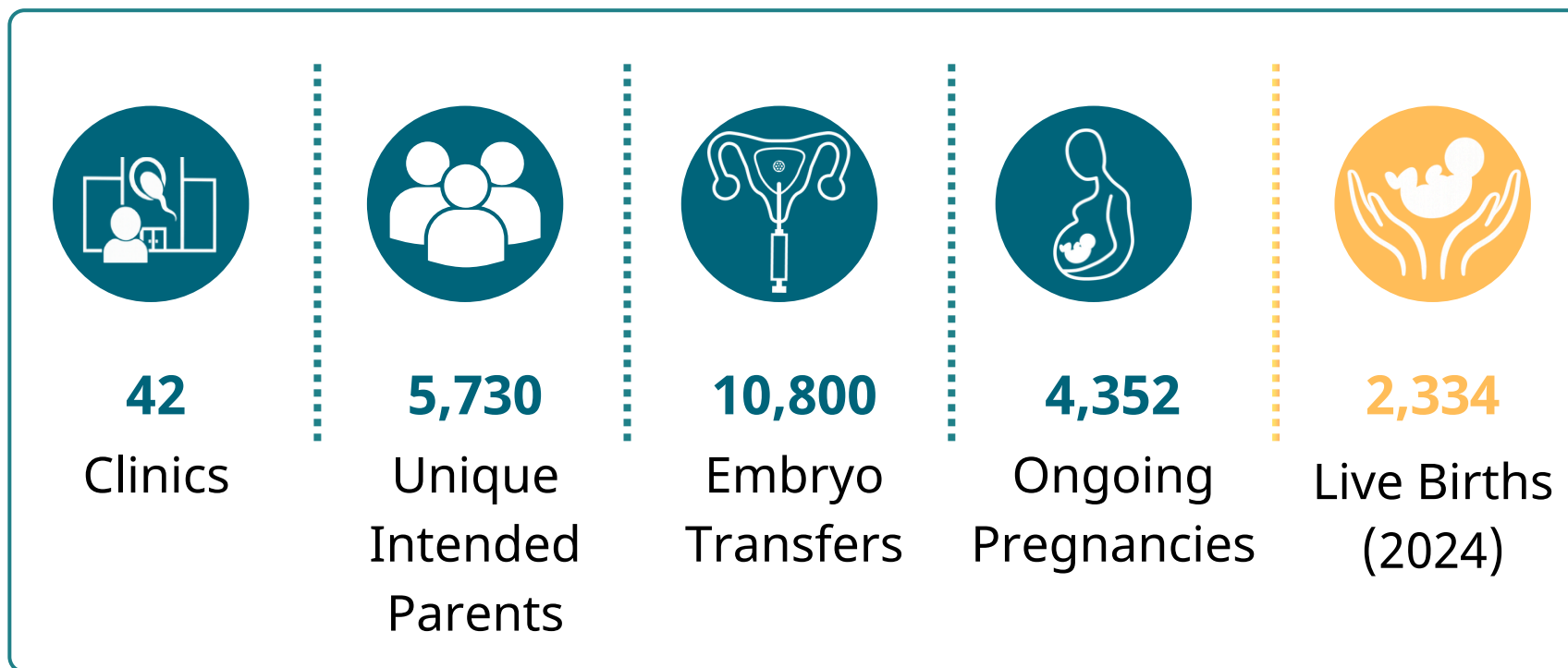


Numerator: Number for the specified birth outcome.

Denominator: Number of ongoing pregnancies for the specified embryo transfer type.

Gestational Carrier Cycles

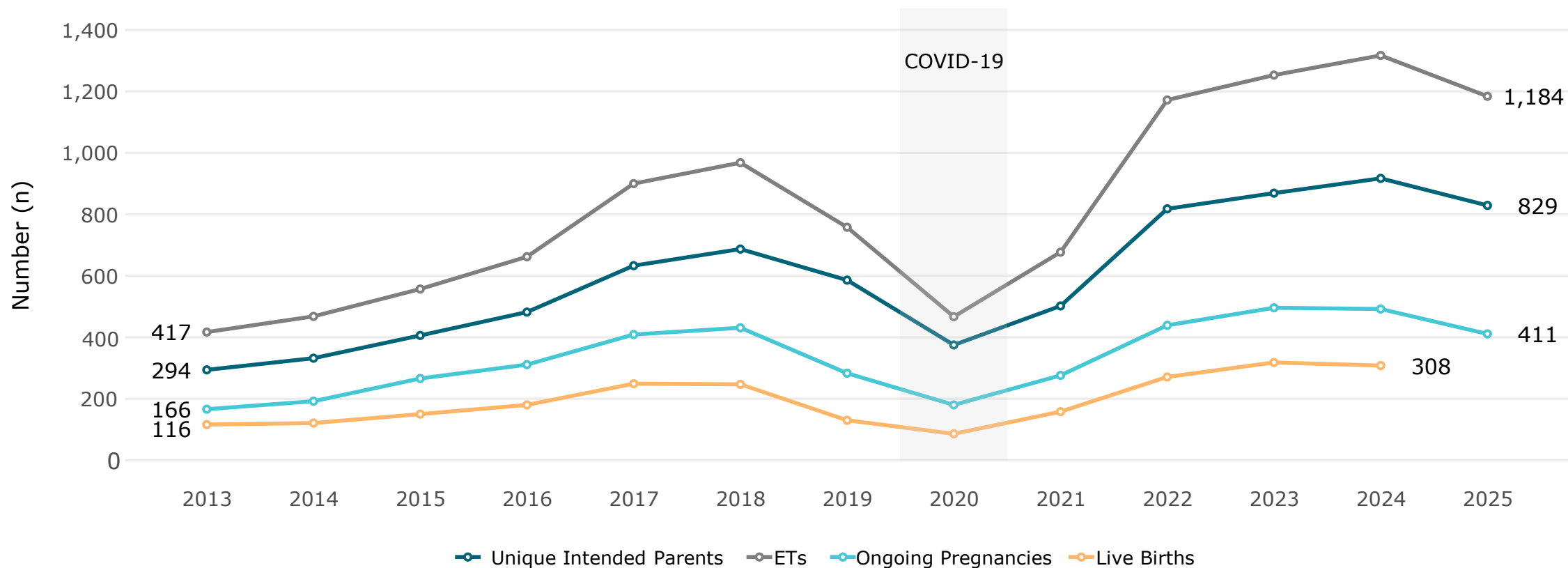
2013-2025



Birth outcome data are available for cycles initiated between 2013-2024.
The number of clinics contributing data has varied over time and up to 42 clinics have contributed data on gestational carrier cycles since 2013.

Gestational Carriers: Intended parents, ETs, Pregnancies, and Live Births by Year

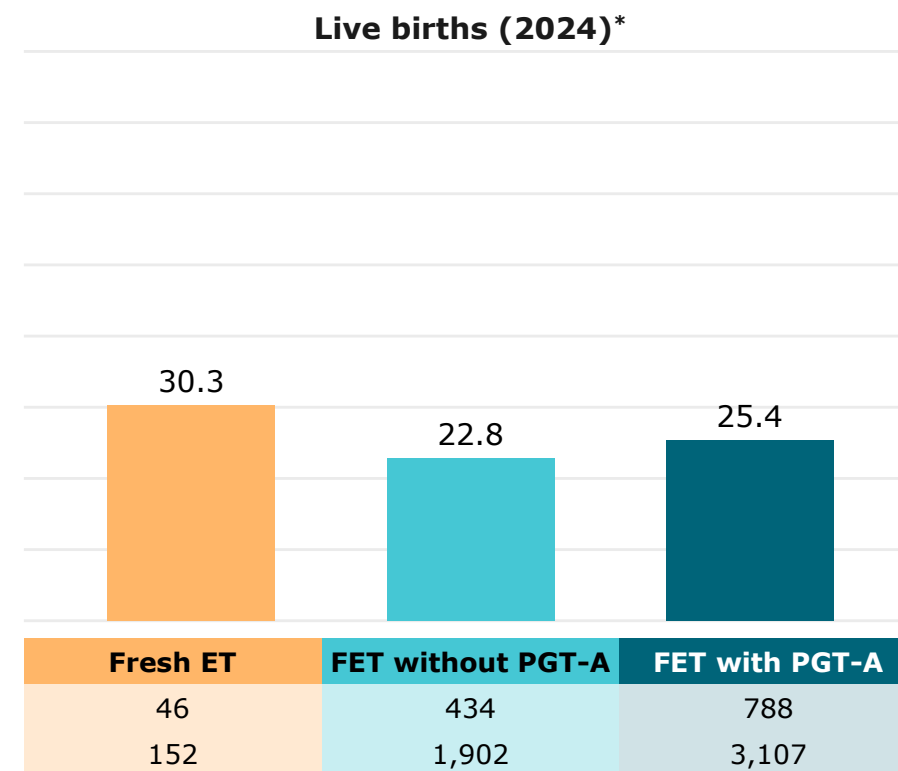
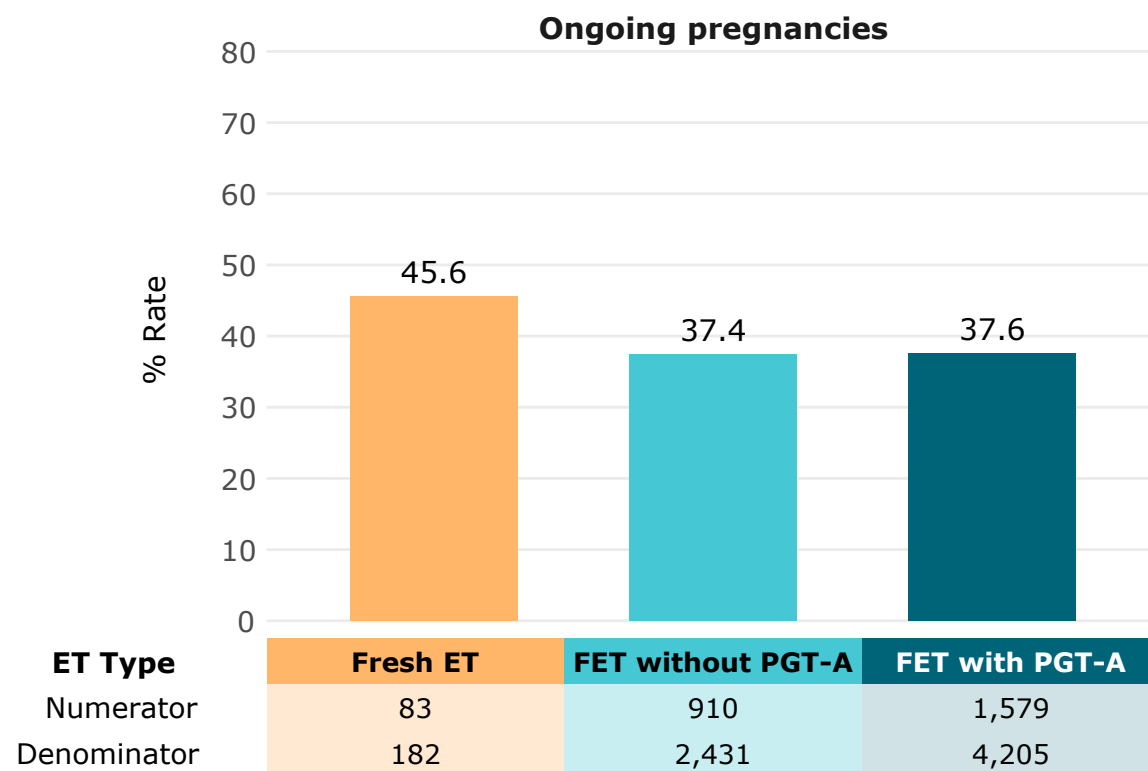
Own and donor oocytes, 2013-2025



Gestational carrier cycles are recorded under the intended parent who used a gestational carrier.

Ongoing Pregnancy and Live Birth Rate per ET

Gestational carrier cycles, 2019-2025



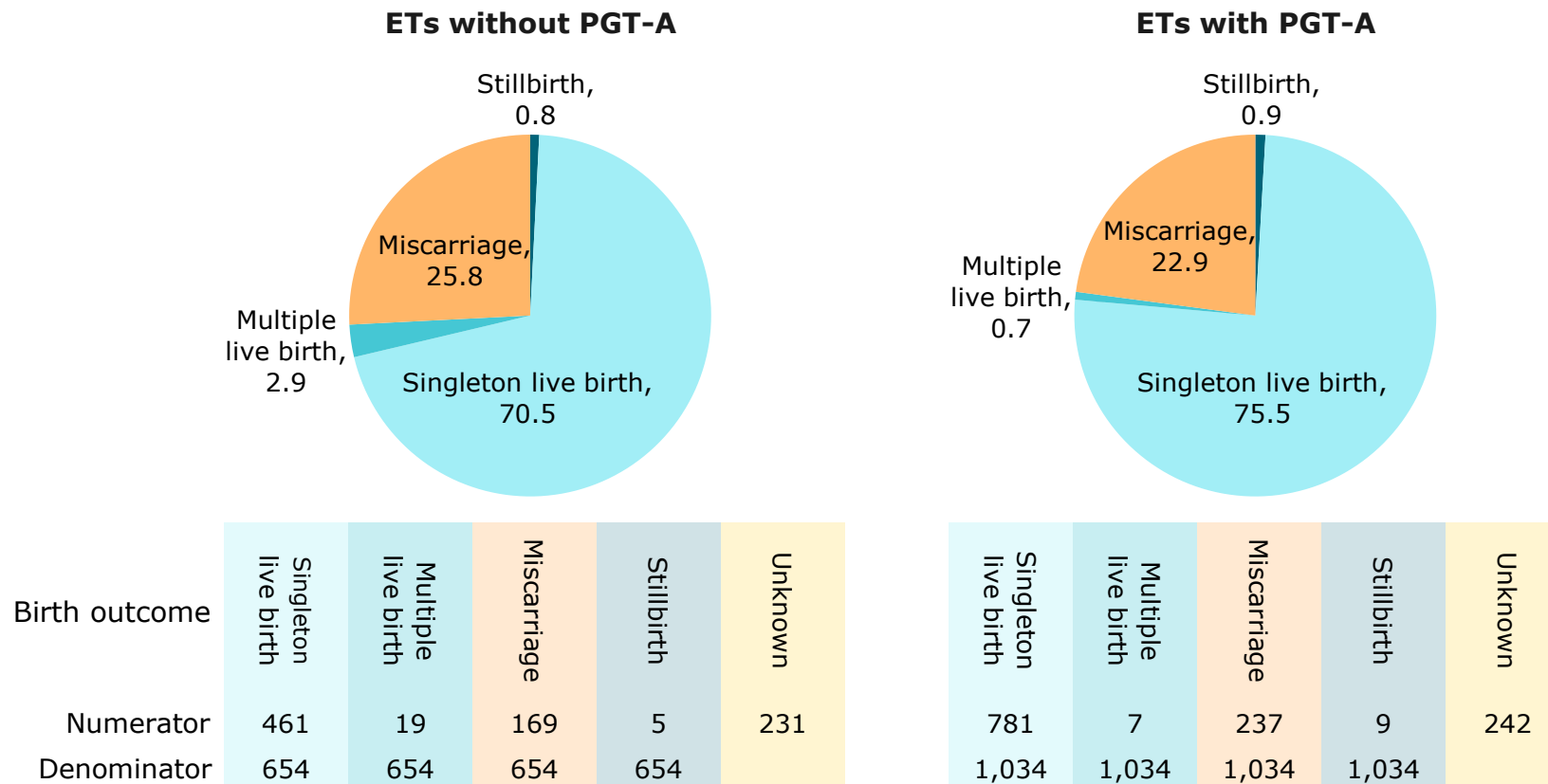
Numerator: Number of ongoing pregnancies; Number of live births.

Denominator: Number of embryo transfers for the specified embryo transfer type.

*Birth outcome data are available for cycles initiated between 2019 and 2024.

Birth Outcomes from Gestational Carrier Cycles

Ongoing pregnancies, 2019-2024



Numerator: Number for the specified birth outcome.

Denominator: Number of ongoing pregnancies for the specified embryo transfer type.

Ontario and Quebec reporting approaches

ONTARIO FERTILITY PROGRAM

Cycle-cohort reporting

Begins with cycles started in 2024 and follows the embryos and outcomes related to those cycles.



Related transfers and outcomes may occur after 2024.

One cycle cohort is followed forward to capture its complete funded treatment journey.

QUEBEC FERTILITY PROGRAM

Calendar-year activity reporting

Counts cycle starts, embryo transfers and outcomes according to when the treatment occurred.



Transfers may use embryos from retrievals performed prior to 2024.

The measures describe treatment during the calendar year, rather than the complete journey of one cycle cohort.

07

Ontario Fertility Program



OFP Fertility Treatment Pathway

Own and donor oocytes, 2024

All metrics shown are linked to oocyte retrieval cycles that started in 2024



20

Clinics



5,466

Unique
Patients



4,823

Funded
Retrievals



18,952

Utilizable
Embryos



3,783

Embryo
Transfers



1,596

Ongoing
Pregnancies

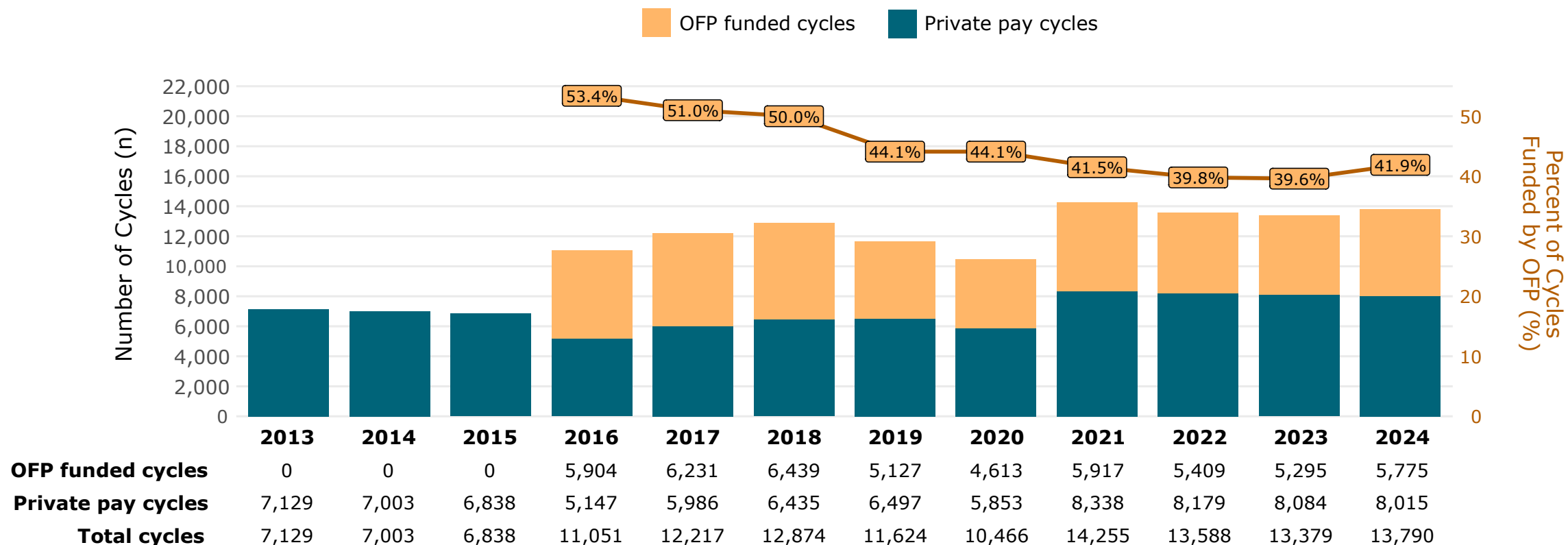


1,228

Live Births

Ontario OFP Funded vs Private Pay by Year

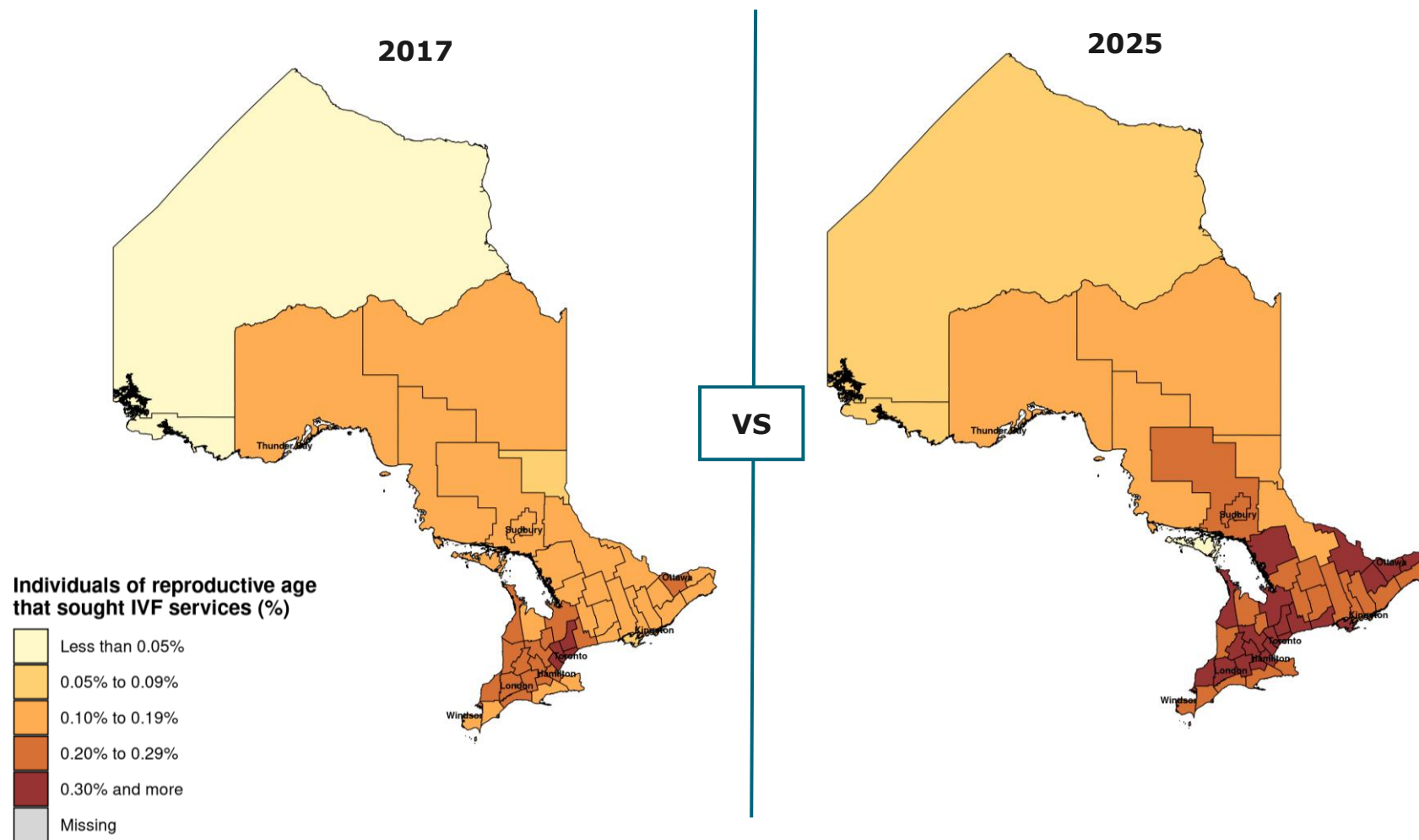
Cycle cohorts, own and donor oocytes, 2013-2024



Data are reported by cycle cohort, meaning all treatment outcomes associated with a single egg retrieval. Each cohort includes the egg retrieval and all embryo transfers using embryos created from that retrieval.

Percent of individuals of reproductive age that sought IVF services in Ontario, stratified by patient residence census division

Own and donor oocytes, 2017 and 2025



IVF uptake increased across nearly all Ontario census divisions between 2017 and 2025, with most regions shifting into higher uptake categories.



In 2025, the highest percentages were observed in:

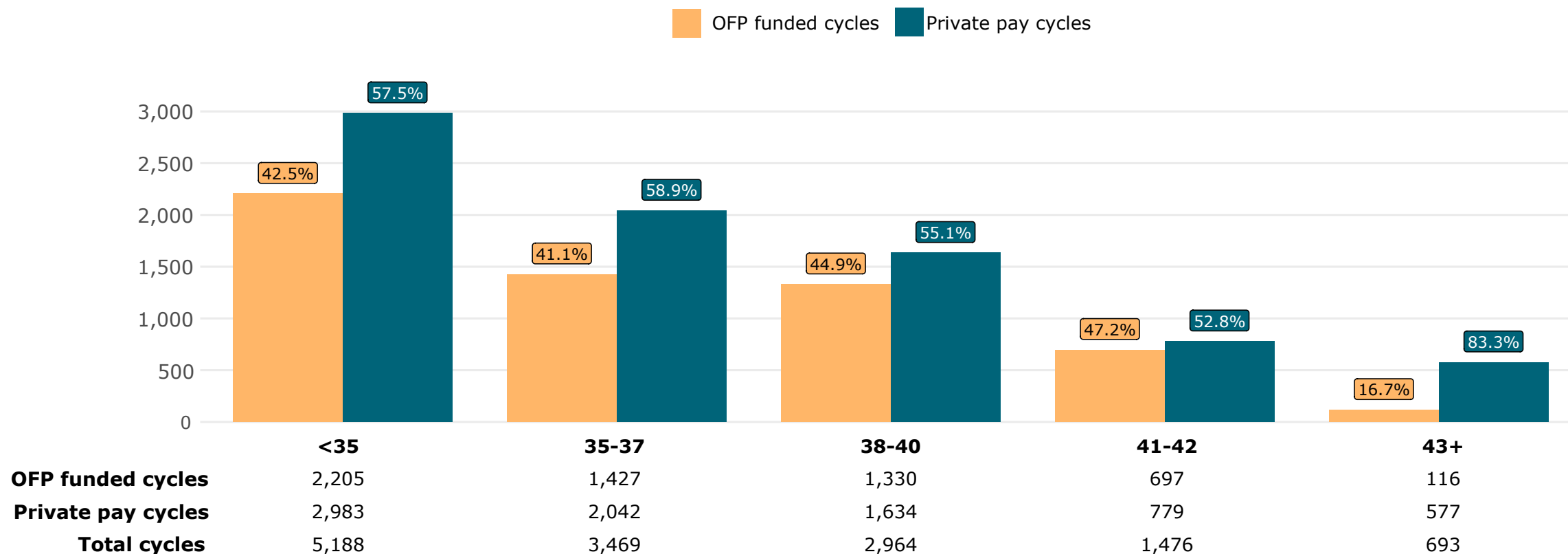
- Toronto (0.64%)
- Durham (0.55%)
- York (0.52%)
- Halton (0.50%)



Geographic variation remained, with generally lower uptake in parts of Northern Ontario.

Ontario OFP Funded vs Private Pay by Age

Cycle cohorts, own and donor oocytes, 2024

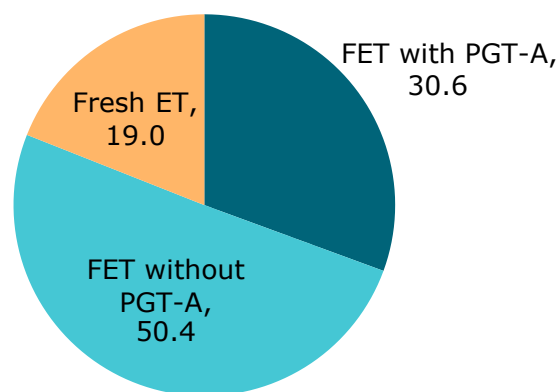


Data are reported by cycle cohort, meaning all treatment outcomes associated with a single egg retrieval. Each cohort includes the egg retrieval and all embryo transfers using embryos created from that retrieval.. Age refers to the age of oocyte provider at the time of retrieval.

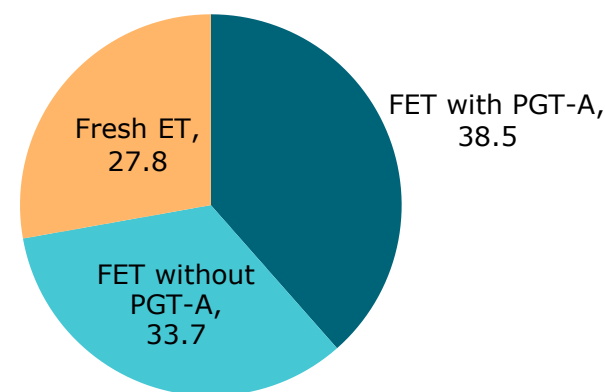
OFP Funded vs Private Pay by Embryo Transfer Type

Own oocytes, 2024

OFP funded



Private pay



ET Type	Fresh ET	FET without PGT-A	FET with PGT-A
Numerator	699	1,850	1,122
Denominator	3,671	3,671	3,671

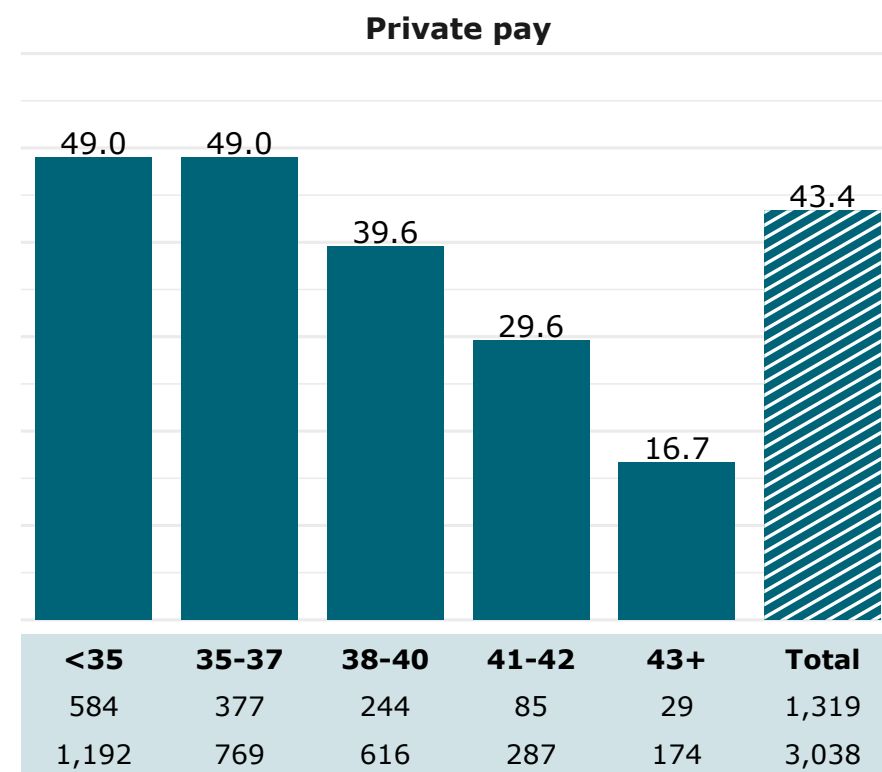
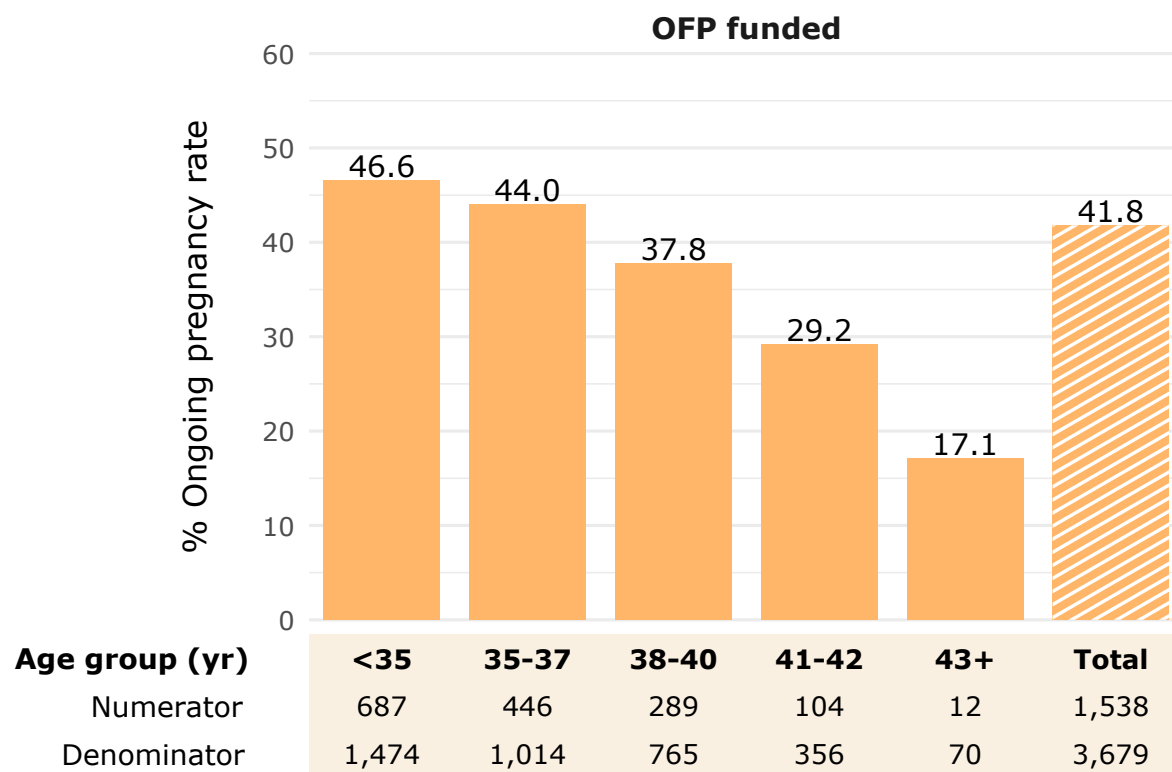
ET Type	Fresh ET	FET without PGT-A	FET with PGT-A
Numerator	843	1,023	1,167
Denominator	3,033	3,033	3,033

Numerator: Number of cycles by embryo transfer type.

Denominator: Total number of cycles for the specified funding type.

Ontario Pregnancy Rate per ET, OFP Funded vs Private Pay

Own oocytes, 2024



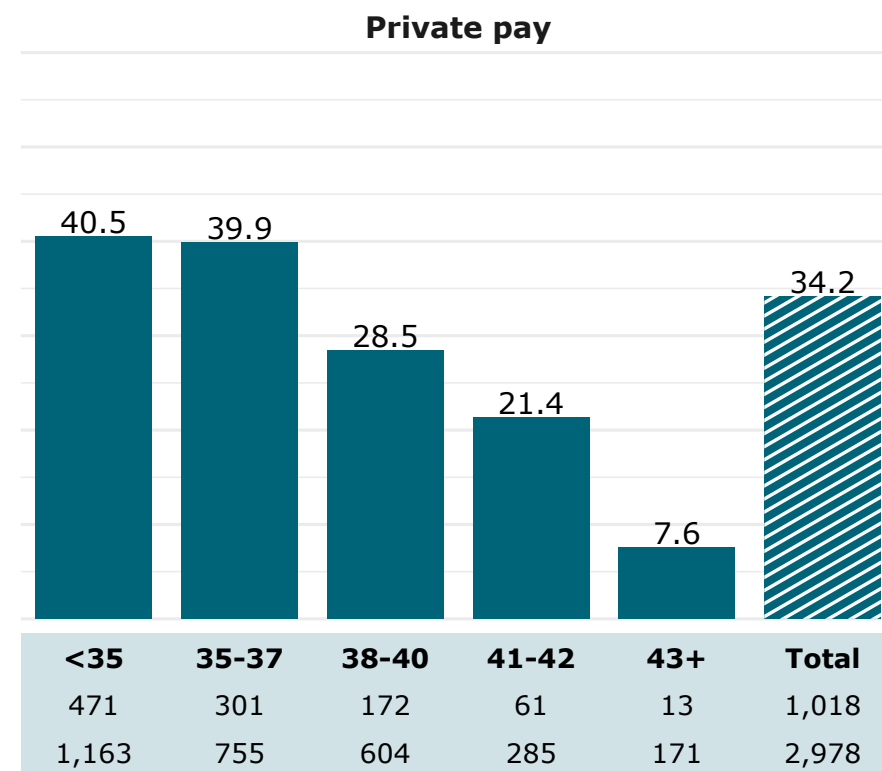
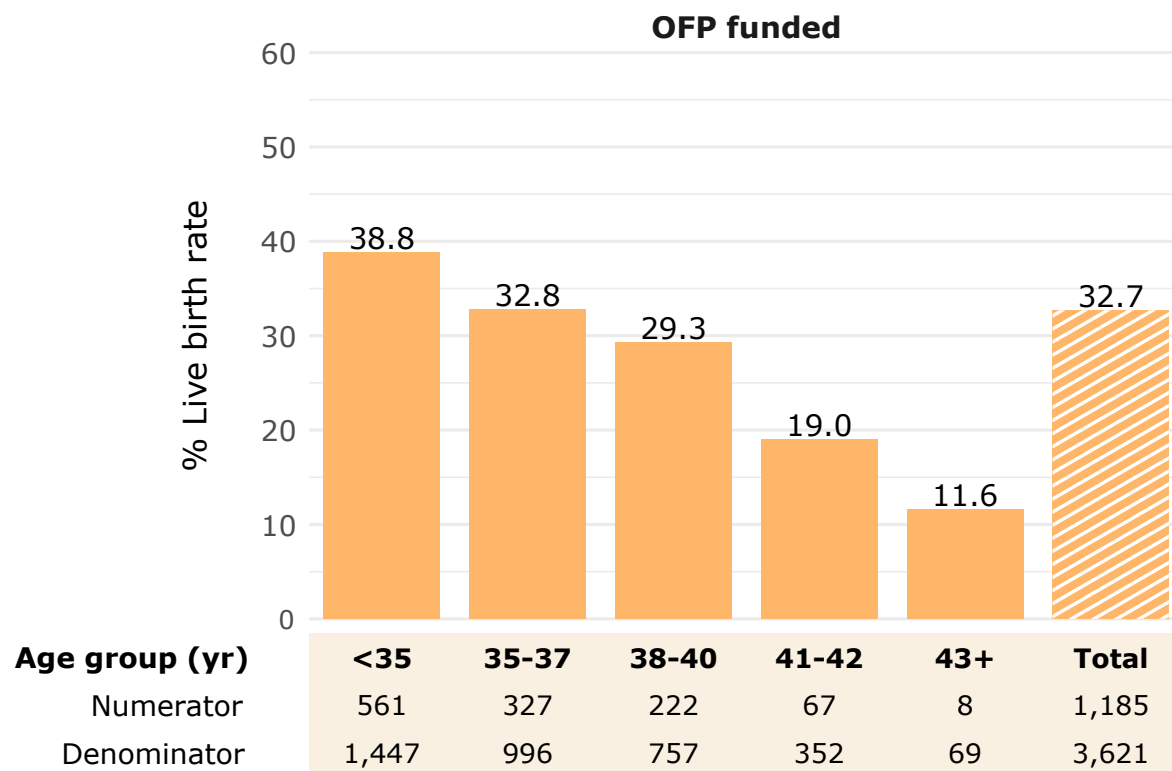
Numerator: Number of ongoing pregnancies.

Denominator: Number of embryo transfers.

Age refers to the age of oocyte provider at the time of retrieval.

Ontario Live Birth Rate per ET, OFP Funded vs Private Pay

Own oocytes, 2024



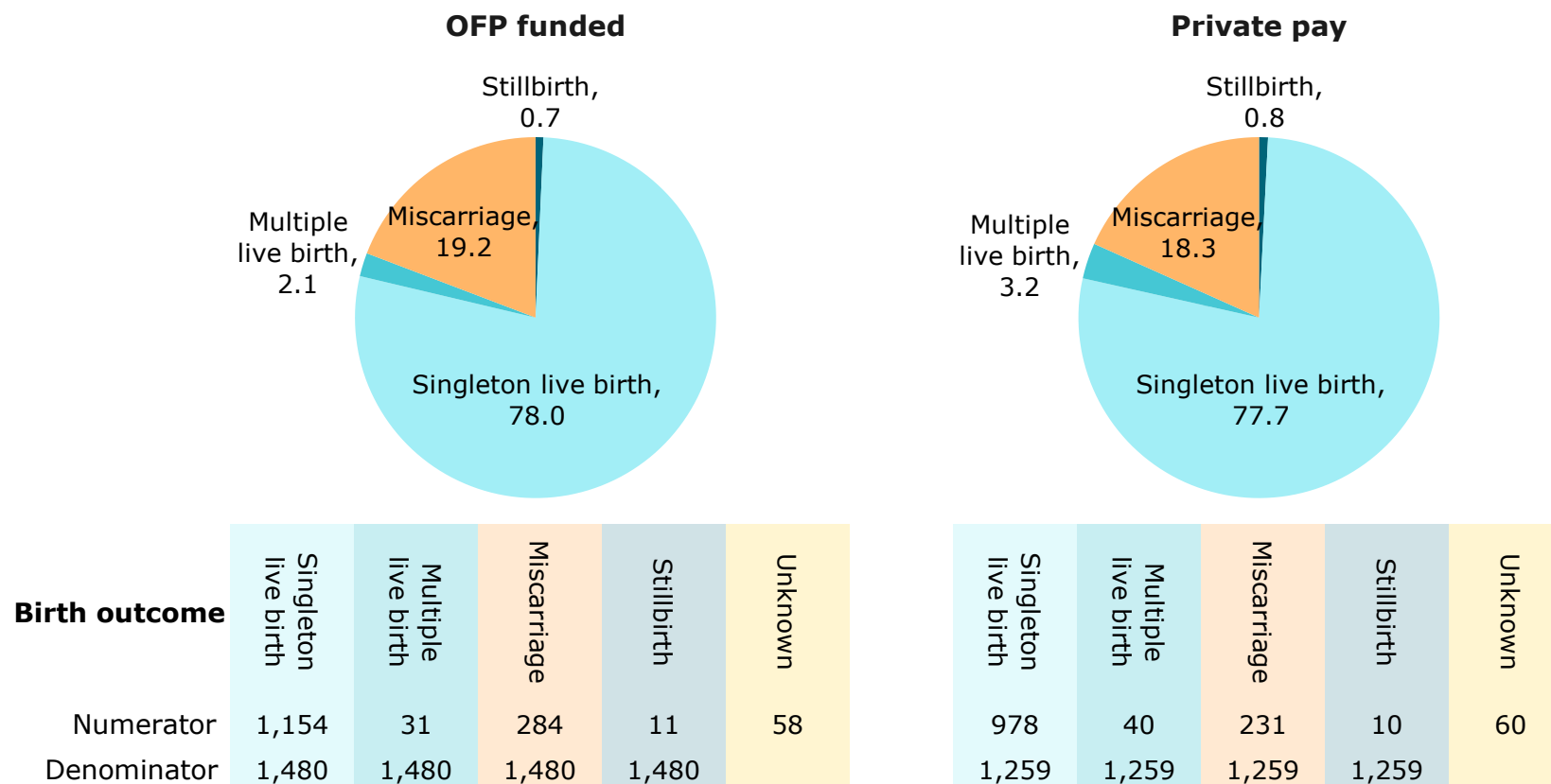
Numerator: Number of live births.

Denominator: Number of embryo transfers.

Age refers to the age of oocyte provider at the time of retrieval.

Birth Outcomes, OFP Funded vs Private Pay

Ongoing pregnancies, own oocytes, 2024



Numerator: Number for the specified birth outcome.

Denominator: Total number of ongoing pregnancies for the specified funding type.

08

Québec Fertility Program



Québec Funded Fertility Treatment Pathway

Own and donor oocytes, 2024

All cycles (retrievals, oocyte banking, frozen/thaw and frozen embryo transfers) started in 2024*



5

Clinics



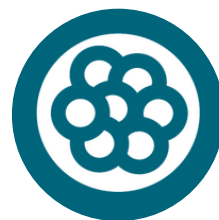
3,606

Unique
Patients



2,372**

Funded
Retrievals



9,288**

Utilizable
Embryos



3,304

Embryo
Transfers



1,550

Ongoing
Pregnancies



754***

Live Births
(Birth outcomes
were missing for 567
pregnancies)

Ongoing clinical pregnancy rate per ET: Number of ongoing clinical pregnancies/Number of embryo transfers

Live birth rate per ET: Number of live births/Number of embryo transfers

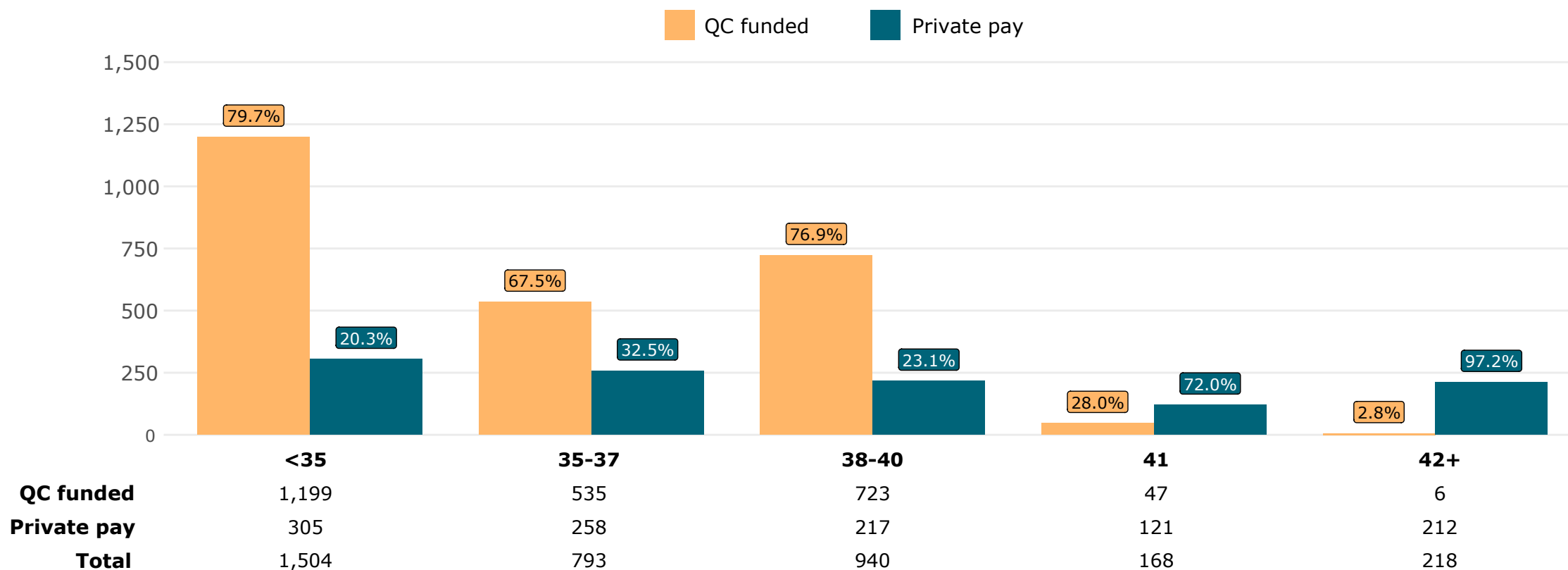
*Some cycles are linked to retrievals performed prior to 2024.

**Funded retrievals are based on cycles initiated in 2024. The number of utilizable embryos is derived from these funded retrievals.

***Among 1,550 ongoing pregnancies, birth outcomes were missing for 567 pregnancies (36.6%) at the time of reporting.

Québec Funded vs Private Pay by Age

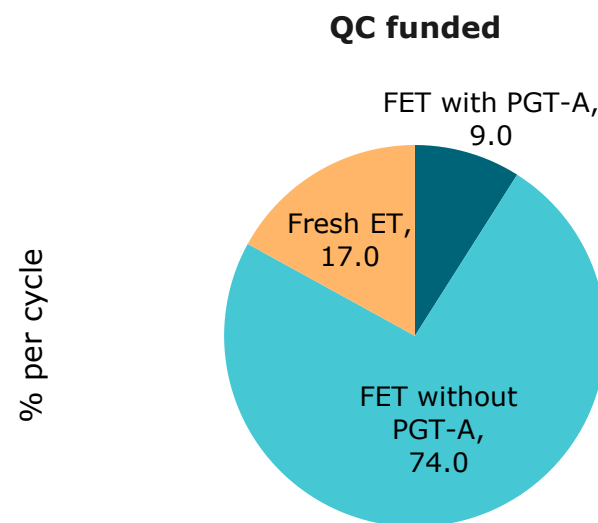
Retrievals, own and donor oocytes, 2024



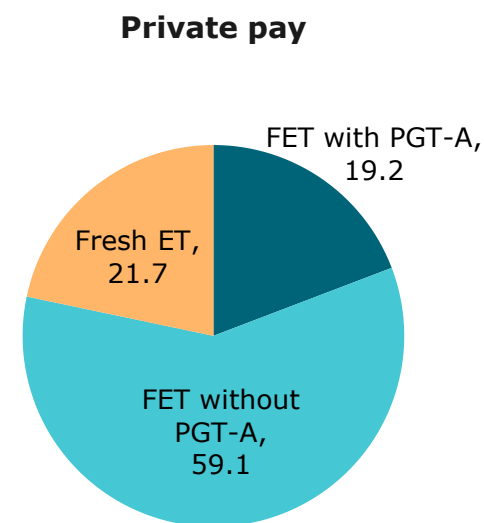
Age refers to the age of oocyte provider at the time of retrieval.

Québec Funded vs Private Pay by Embryo Transfer Type

Own oocytes, 2024



ET Type	Fresh ET	FET without PGT-A	FET with PGT-A
Numerator	544	2,370	287
Denominator	3,201	3,201	3,201



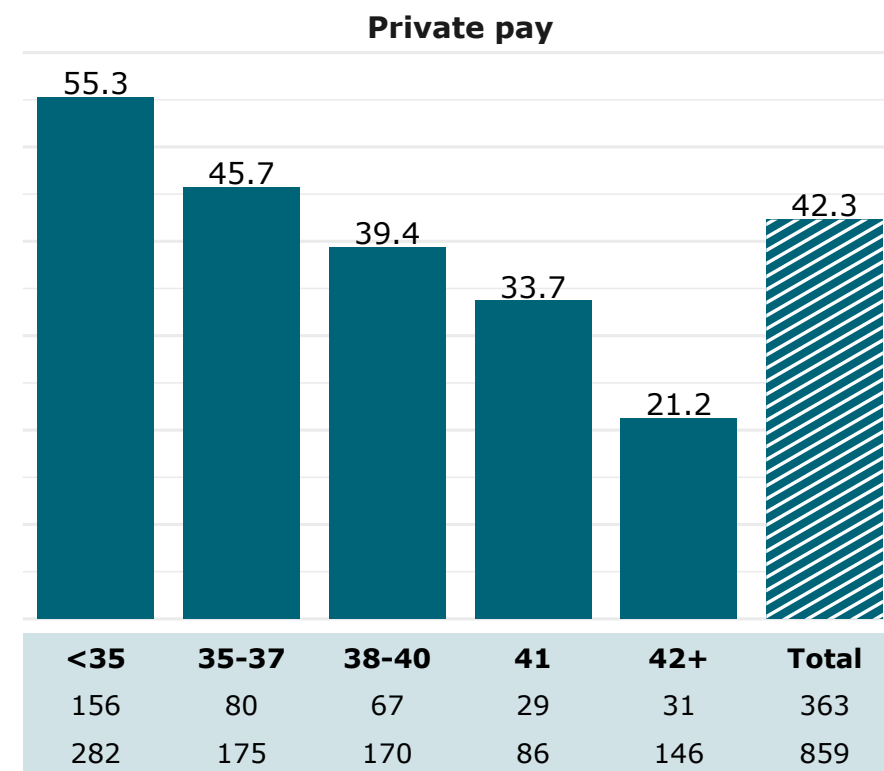
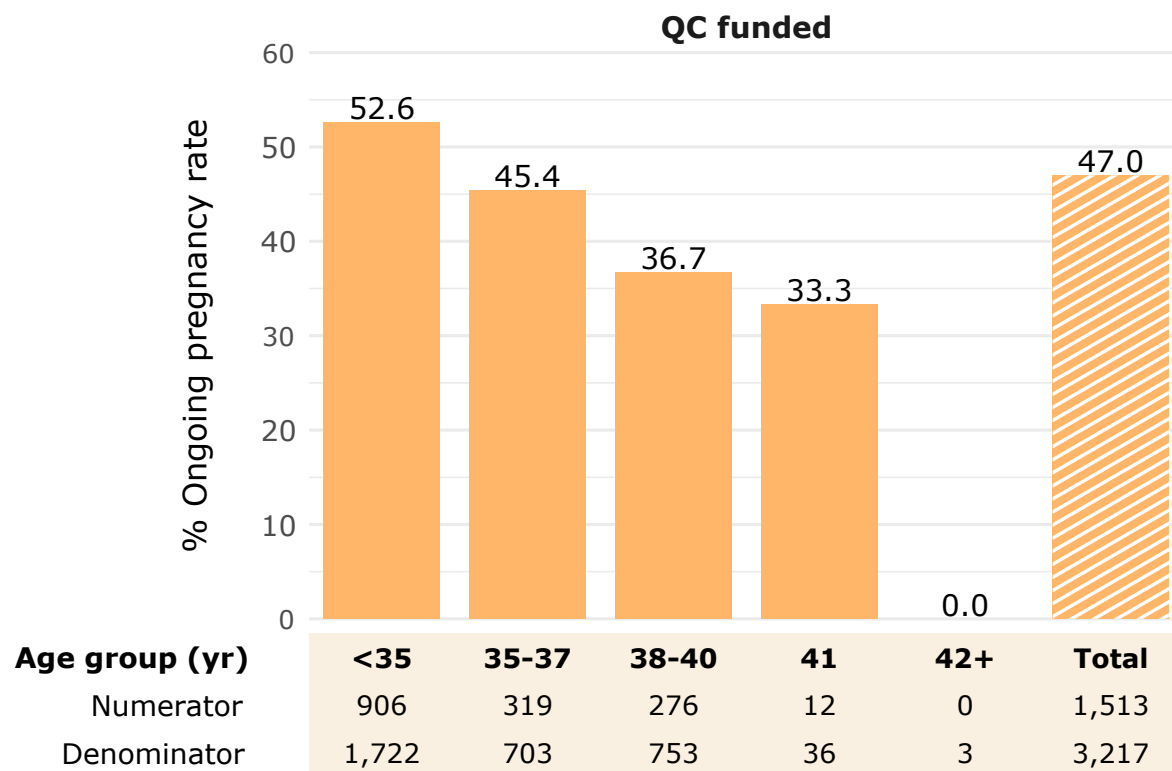
ET Type	Fresh ET	FET without PGT-A	FET with PGT-A
Numerator	185	503	163
Denominator	851	851	851

Numerator: Number of embryo transfers.

Denominator: Total number of cycles for the specified funding type.

Québec Ongoing Pregnancy Rate per ET, Funded vs Private Pay

Own oocytes, 2024



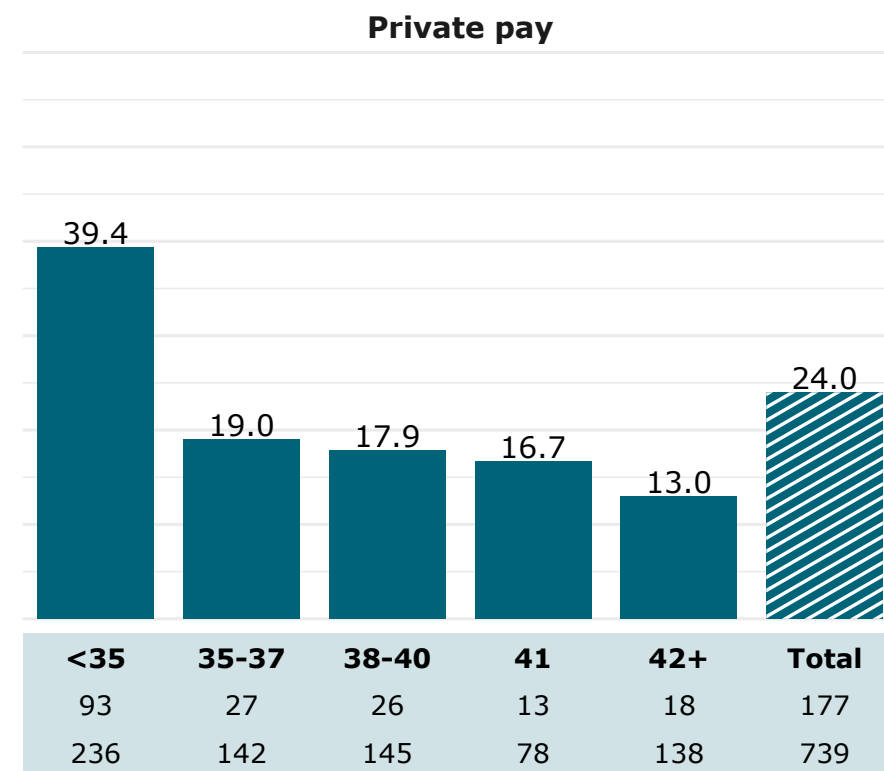
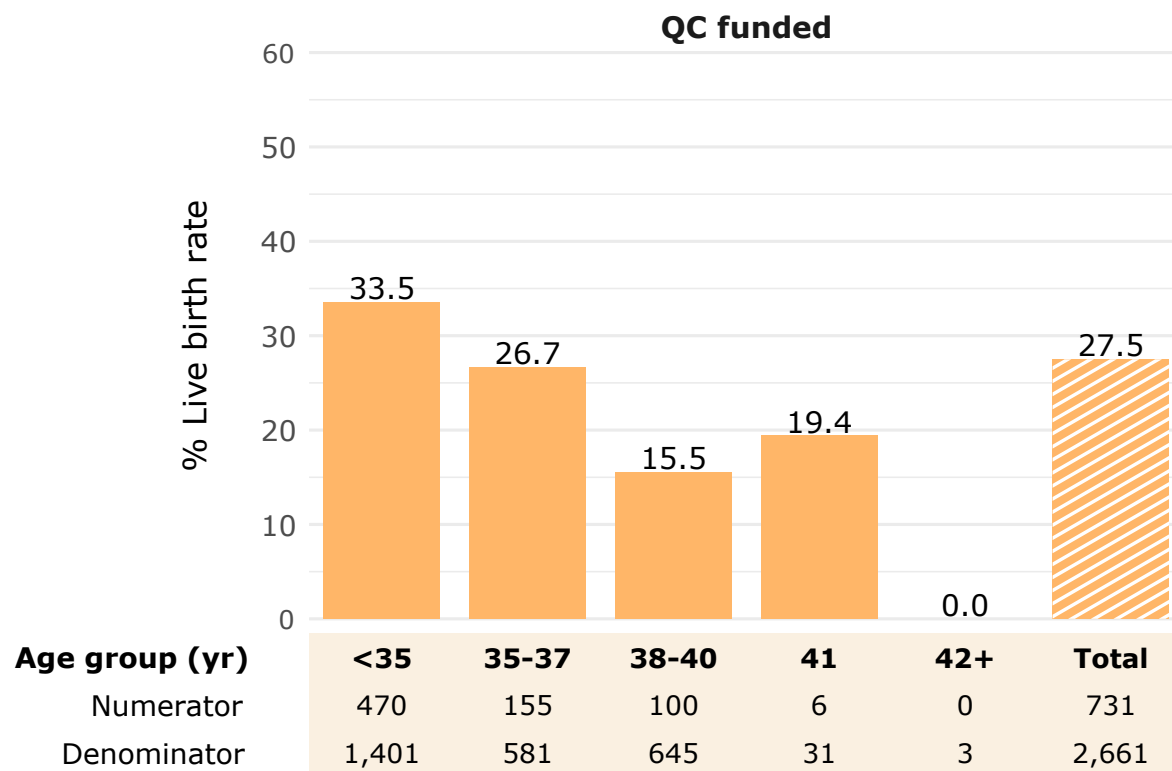
Numerator: Number of ongoing pregnancies.

Denominator: Number of embryo transfers.

Age refers to the age of oocyte provider at the time of retrieval.

Québec Live Birth Rate per ET, Funded vs Private Pay

Own oocytes, 2024



Numerator: Number of live births.

Denominator: Number of embryo transfers.

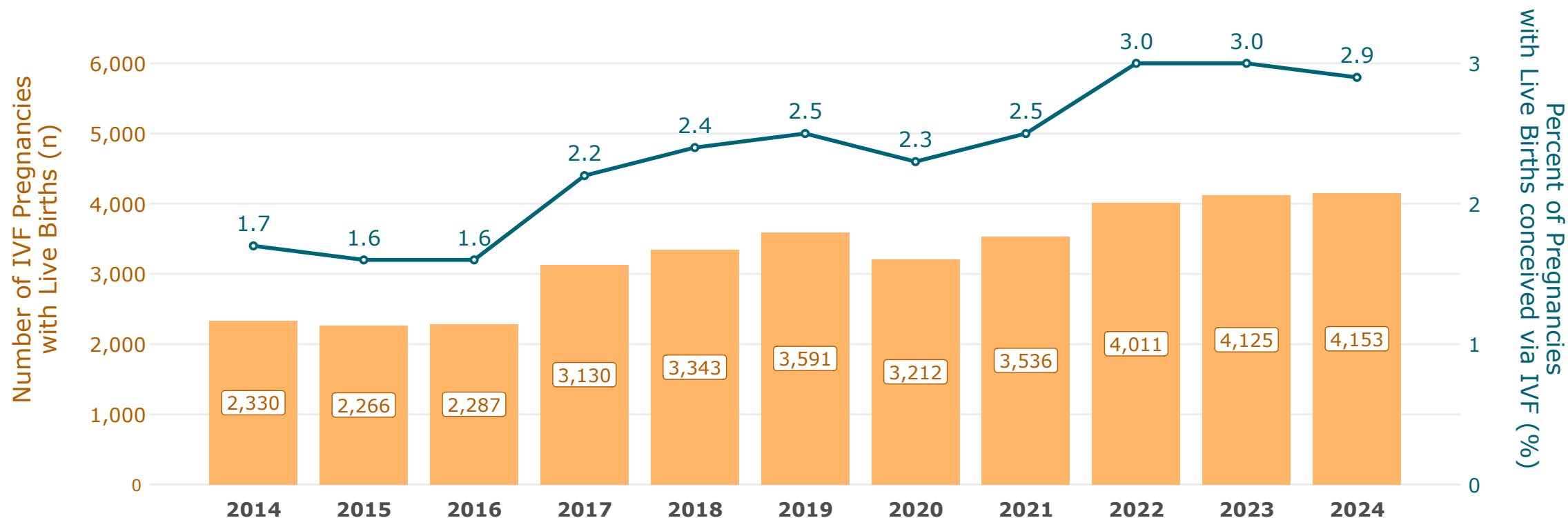
Age refers to the age of oocyte provider at the time of retrieval.

09

Ontario Perinatal and Neonatal Outcomes

Proportion of Pregnancies with Live Births conceived via IVF in Ontario

Own and donor oocytes, 2013-2024



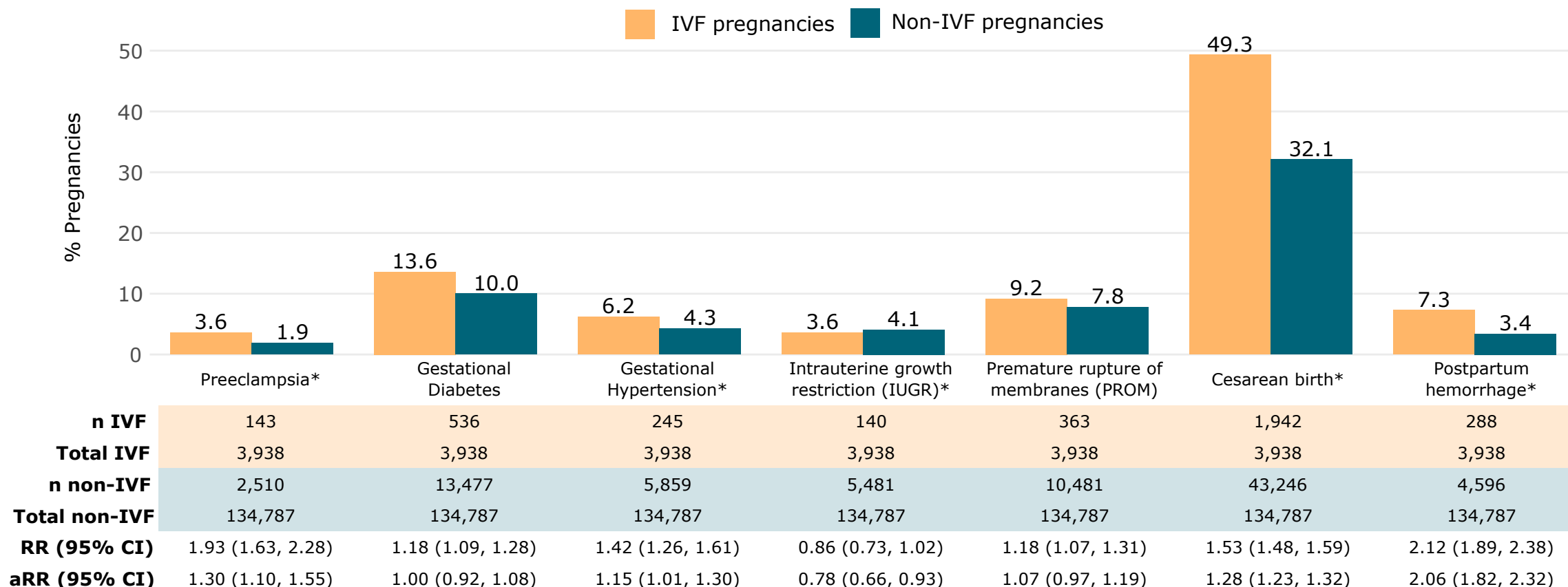
Numerator: Number of IVF pregnancies with live births.

Denominator: Number pregnancies with live births.

Ongoing data quality improvement efforts have led to updates in the CARTR data. Therefore, the figure presented here differs from previously reported values and represents the most current available data.

Adverse Perinatal Outcomes, IVF vs Non-IVF

Ontario pregnancies resulting in a singleton birth, own and donor oocytes, 2024



Live and still births included. Cases with missing perinatal outcome data were excluded.

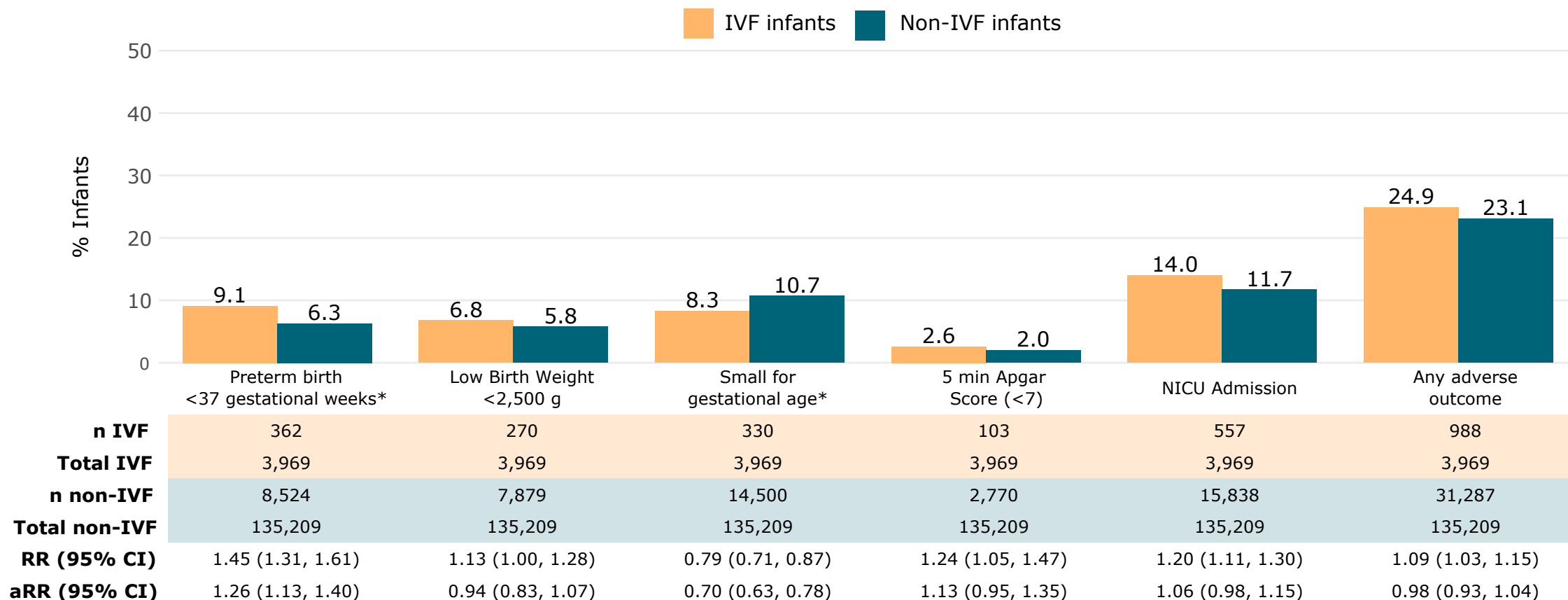
Risk Ratios (RR) and 95% Confidence Intervals (CI) were estimated using modified Poisson regression models and Generalized Estimating Equations. Adjusted Risk Ratios (ARR) adjust for potential confounder. Pre-eclampsia, IUGR, PROM and cesarean birth were adjusted for patient age, parity, pre-existing hypertension, pre-existing diabetes, and pre-existing pulmonary conditions. Gestational diabetes was adjusted for patient age, parity, pre-existing hypertension and pre-existing pulmonary conditions only. Gestational hypertension was adjusted for patient age, parity, pre-existing diabetes, and pre-existing pulmonary conditions only.

All regression analyses used a complete-case approach. Cases with missing perinatal outcome data or missing values for any covariates included in the adjusted models were excluded from the corresponding analysis.

Asterisk (*) denote statistical significance.

Adverse Neonatal Outcomes, IVF vs Non-IVF

Ontario singleton infants, own and donor oocytes, 2024



Live births only. Cases with missing neonatal outcome data were excluded.

Small for gestational age: Birth weight below the 10th percentile for gestational age, determined using standardized growth charts specific to singleton births from the Canadian Perinatal Surveillance System.

Risk Ratios (RR) and 95% Confidence Intervals (CI) were estimated using modified Poisson regression models and Generalized Estimating Equations. Adjusted Risk Ratios (ARR) adjust for potential confounders including patient age, parity, pre-existing hypertension, gestational hypertension, pre-existing diabetes, gestational diabetes, and pulmonary conditions.

All regression analyses used a complete-case approach. Cases with missing perinatal outcome data or missing values for any covariates included in the adjusted models were excluded from the corresponding analysis. Asterisk (*) denote statistical significance.

10

Key Highlights

Key Highlights



Fertility treatment activity continued to increase across Canada, with more than 50,000 treatment cycles involving over 32,000 patients reported in 2025, reflecting growing demand for fertility services.



Diminished ovarian reserve (26.7%) is the most frequently reported indications for treatment, indicating that many patients seek fertility care when reproductive potential may already be reduced.



Ongoing pregnancy and live birth outcomes continued to vary by age, with higher success rates observed in younger age groups and lower rates among older patients, highlighting the ongoing impact of reproductive aging on treatment outcomes.



Clinical practice continues to evolve, including increased use of PGT-A, freeze-all strategies, and single embryo transfer, while the use of ERA testing and assisted hatching declined in line with clinical practice recommendations.



Multiple live birth rates continued to decrease, and most births following ART were singleton births, reflecting ongoing efforts to support safer pregnancy outcomes.



Fertility preservation activity continued to expand, particularly elective oocyte banking, reflecting growing interest in reproductive planning and future family-building options.



Provincial funding programs continued to support access to fertility services, contributing to treatment utilization and live births in participating jurisdictions.

Acknowledgments

This annual report would not be possible without the dedication and hard work of our entire team.

BORN CARTR PLUS TEAM

- **Sheryll Dimanlig-Cruz, MSc**, Epidemiologist
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- **Dr Jim Meriano, PhD**, Lab Director
- **Dr. Simon Phillips PhD FRSB**, OVO Fertility / TFP Faculty of Medicine, University of Montreal



Participating Clinics

Alberta

Alberta Reproductive Centre
Oasis Fertility Centre
Pacific Centre for Reproductive Medicine (Edmonton)
Regional Fertility Programme

British Columbia

Grace Fertility Centre
Olive Fertility Centre
Olive Fertility Centre - Victoria
Pacific Centre for Reproductive Medicine (BC)

Manitoba

Heartland Fertility Clinic

New Brunswick

Conceptia Clinic

Nova Scotia

Atlantic Assisted Reproductive Therapies

Québec

McGill Reproductive Centre
Montreal Fertility Centre
OriginElle Fertility Clinic & Women's Health Centre
OVO Fertility
Procrea (Québec)
Ste Justine Hospital

Ontario

Anova Fertility and Reproductive Health
ASTRA Fertility Centre
CReATe IVF Programme
Generation Fertility Toronto West
Generation Fertility Vaughan
Generation Fertility Waterloo
Hannam Fertility Centre
Harmony Fertility Centre
IVF Canada & LIFE Programme
IVF Canada Markham
Markham Fertility Centre
Mount Sinai Fertility
Nahal Fertility Programme
NewLife Fertility Centre
Omega Fertility Center
ONE Fertility (Burlington)
ONE Fertility (KW)
Ottawa Fertility Centre
Pollin Fertility Toronto
Reproductive Care Centre
TRIO Fertility
Twig Fertility
Victory Reproductive Care

Saskatchewan

Aurora Reproductive Care