

# Human Assisted Reproduction 2013 Live Birth Rates for Canada



## Media Release

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### **Fertility Society lauds clinics for dramatic reduction in multiple pregnancies in 2012**

Victoria, B.C. – Canadian fertility clinics have decreased the number of multiple pregnancies arising from in vitro fertilization (IVF) from 32% in 2009 to 18.4% in 2012. These data, along with the treatment outcomes, were presented in the Canadian Assisted Reproductive Technologies Register (CARTR) report at the 59th annual meeting of the Canadian Fertility and Andrology Society (CFAS) today.

Under the leadership of the IVF Medical Directors of Canada all IVF clinics in Canada voluntarily submit their IVF outcome data to CARTR.

"We are enormously proud of this significant drop in the number of multiples," said Dr. François Bissonnette, Co-Chair, IVF Directors Group.

"The parallel piece of good news from this report is that we saw four times as many single embryo transfers over three years ago," he said.

The data also revealed that clinical pregnancy and live birth rates are still being maintained. The complication rate remains low.

#### **Figures:**

Live birth rates were reported for a combined total of 14,866 IVF treatment cycles (including intracytoplasmic sperm injection [ICSI]) undertaken in 31 of 32 IVF centres in Canada in 2011.

There were 3533 IVF/ICSI treatment cycles performed in 8 centres in Western Canada, 5306 cycles in 15 centres in Ontario, 5657 cycles in 6 centres in Quebec, and 370 cycles in 2 centres in Atlantic Canada.

The overall live birth rate was 24% per cycle started, 26% per egg retrieval procedure, and 29% per embryo transfer procedure.

80% of births were singletons, 20% were twins, and 0.5% were triplets or more. This represents a decrease in multiple birth rate of 3 percentage points, compared with 2010, when 76% of births were singletons, 23% were twins, and 0.8% were triplets or more. Not all multiple pregnancies result in a multiple birth: in 2011, at about 6 weeks' gestation, 21% of viable pregnancies were twins and 1.3% were triplets or more, compared with 20% twins and 0.5% triplets or more at birth.

The live birth rates per cycle started, by age of the mother, were:

33% for women under 35 years old

24% for women aged 35-39 years

10% for women 40 years old and over.

The proportion of babies with congenital anomalies was not different from that in the population of women conceiving

naturally.

The miscarriage rate of 17% per clinical intrauterine pregnancy is in keeping with that for natural conceptions.

Preliminary results were reported for a combined total of 14,953 IVF/ICSI treatment cycles undertaken in 30 of 33 IVF centres in Canada in 2012:

The overall clinical pregnancy rate was 32% per cycle started, 34% per egg retrieval procedure, and 39% per embryo transfer procedure.

82% of viable pregnancies were singletons, 17% were twins, and 1.1% were triplets or more. This represents a decrease in multiple pregnancy rate of 4 percentage points compared with 2011 (when 78% of viable pregnancies were singletons, 21% were twins, and 1.3% were triplets or more), and 14 percentage points compared with 2009. A singleton pregnancy occurred following 24% of cycles started, 25% of cycles having egg retrieval, and 29% of cycles having embryo transfer.

The clinical pregnancy rates per cycle started, by age of the mother, were:

39% for women under 35 years old

32% for women aged 35-39 years

18% for women 40 years old and over.

The singleton pregnancy rates per cycle started, by age of the mother, were:

30% for women under 35 years old

23% for women aged 35-39 years

13% for women 40 years old and over.

Complications occurred in only 1% of treatment cycles.

The drive to reduce the number of multiple births through single embryo transfer began under Assisted Human Reproduction Canada (AHRC), the federal agency, closed in March 2013, which was set up to oversee assisted reproduction and fertility treatments in Canada.

"Accolades to AHRC for setting this process in motion," said Dr. Al Yuzpe, Co-Chair, IVF Directors Group.

The IVF Medical Directors of Canada make these data available for reference and education and recommend they be reviewed together with an appropriate healthcare professional. Results vary by centre and specific information can be obtained from each centre. A list of the participating centres is available through CFAS.

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