

NHS help to try to have a baby

Proposed changes to access to fertility treatment for people living in north east London

Full list of policy changes

We want to make it so that wherever you live in north east London, you are able to have the same fertility treatment – this is not currently the case.

We have used the latest national [clinical guidelines](#) from National Institute for Health and Care Excellence (NICE), research and best practice to develop a new proposed fertility policy.

Our proposed new policy covers a number of assisted conception treatments and eligibility criteria, as well as fertility preservation.

Below is the full list of what the proposed changes are to the existing CCG fertility policies, to these in our new policy, and why.

We recommend you read our full engagement document which explains why we are proposing changes to fertility treatment, who was involved in creating the new policy, and explanations of the main treatments.

You can provide your feedback on these through our online survey, please visit www.northeastlondonccg.nhs.uk/fertility

Treatment to help get pregnant	Current policies	Proposed policy	Why we want to change
<p>IVF procedures and how many IVF cycles you can have at what age - During IVF, eggs are collected from the ovaries and fertilised with sperm in a laboratory. One or two fertilised eggs, called an embryo, are then put into (transferred into) the womb to try to grow and develop. One full cycle of IVF includes the putting the embryo into the womb, usually one or two embryos at a time, of all suitable embryos created from that round of egg collection.</p>			
<p>IVF for the woman or person trying to get pregnant up to their 40th birthday</p>	<p>One embryo transfer procedure for people living in Barking and Dagenham, Havering and Redbridge (BHR).</p> <p>Up to three embryo transfer procedure for people in other areas of North East London.</p>	<p>Increase to three 'full' IVF cycles for eligible people trying to get pregnant aged 39 and under.</p> <p>One full cycle of IVF includes the transfer of an embryo into the womb, usually one or two embryos at a time, of all suitable embryos created from that round of egg collection.</p>	<p>This is the same as National Institute for Health and Care Excellence (NICE) clinical guidelines.</p>
<p>IVF for the woman or person trying to get pregnant aged 40 and over</p>	<p>Not funded for people in BHR.</p> <p>One fresh plus one frozen embryo transfer for people in other areas of North East London aged 40 and 41.</p>	<p>Increase to one 'full' cycle for eligible people trying to get pregnant who are aged 40, 41 and 42.</p>	<p>This is the same as NICE guidelines.</p>
<p>The number of embryos transferred in each procedure (embryo transfer strategies)</p>	<p>The policy for those living in BHR policy says single embryo transfer (SET) should be used if there is one or more top quality embryos, and double embryo transfer (DET) should only be used if there are no top quality embryos. The policies for those living in other areas of north east London say that SET should be used unless there is clear reason for not doing so.</p>	<p>Follow embryo transfer strategies set out in NICE guidance. This specifies when SET or DET should be used depending on the person's age, cycle number and quality of embryos).</p>	<p>This is the same as NICE guidelines.</p>

Eligibility for IVF for people who have not been diagnosed with a condition that means they require IVF and are trying to get pregnant through artificial insemination.	IVF will only be offered after 12 unsuccessful cycles of IUI.	IVF will only be offered after 12 unsuccessful cycles of IUI, or six if the woman or person trying to get pregnant is aged 36 or over. Six of these could be funded by the local NHS if you are eligible.	The policy is equitable for people who are trying to get pregnant through sexual intercourse and people who are trying to get pregnant through artificial insemination.
Abandoned/ cancelled IVF cycles	The first two cancelled (where egg collection procedure is not undertaken) or abandoned (treatment leading to failed embryo transfer) cycles do not count towards the number of cycles funded.	One abandoned cycle (where egg collection procedure is not undertaken) does not count towards the number of cycles funded.	This is the same as the Human Fertilisation and Embryology Authority (HFEA) commissioning guide.
Storage of surplus embryos	Not addressed in current policies	Funded for up to two years after each fresh cycle	Most people will not have more than two frozen embryo transfers per full cycle. Two years is likely to be enough time to finish a full cycle.
Order of fresh and frozen cycles	Not addressed in current policies	All good quality frozen embryos should be transferred before starting the next NHS fresh IVF cycle.	Frozen embryo transfers are as likely as fresh embryo transfers in leading to a live birth. Frozen embryo transfers are less invasive and less expensive than fresh cycles.
Funding of natural cycle IVF	Not addressed in current policies	Not routinely funded.	This is the same as NICE guidelines.
Funding of intrauterine insemination (IUI) - IUI is a type of artificial insemination. This is when the better quality sperm are separated out and this sperm is then injected directly in the womb. This can either involve the partner's sperm or donor sperm.			
Intrauterine insemination (IUI)	IUI is funded if you have a physical disability, or psychosexual problem, or if you have a	Increase to fund up to six cycles of IUI for the following, where eligible:	This is consistent with NICE guidelines.

	condition that means you need IUI as part of your fertility treatment.	<p>a. individuals and couples trying to get pregnant using donor insemination who have fertility problems.</p> <p>b. some people with social, cultural or religious objections to IVF.</p> <p>c. people with physical disability or psychosexual problems who have fertility problems.</p> <p>d. people with a condition that means you need IUI as part of your fertility treatment.</p>	
Funding of assisted conception treatments using donor eggs/sperm			
Funding of donor sperm	Treatment involving donated sperm is funded by the NHS, however the donor sperm used in the treatment need to be paid for by you.	<p>Increase funding to cover the costs of the donor sperm and IUI/IVF for the following, where eligible:</p> <p>a. people with conditions recommended by NICE.</p> <p>b. individuals and couples trying to get pregnant using donor insemination who have fertility problems.</p>	This is the same as NICE guidelines.
Funding of donor eggs	Treatment involving donated eggs is funded by the NHS, however the donor eggs used in the treatment need to be paid for by you.	<p>Increase funding to cover the costs of the donor eggs and IVF for eligible people with conditions recommended by NICE.</p>	This is the same as NICE guidelines.

Fertility preservation			
Storage of eggs, sperm and embryos for people with conditions or who need a treatment that can cause infertility.	Storage is funded for the first 10 years in Tower Hamlets. Storage is funded for the first five years in other areas of north east London.	Increase the time eggs, sperm and embryos are stored for eligible people to: a. Up to 10 years storage for people aged 32 and over. b. For people aged under 32 years, storage is funded up until their 43rd birthday.	This is longer than NICE recommends in some cases.
Eligible groups of patients	People with cancer or other illnesses which may impact on future fertility	People who need a treatment that may cause infertility or people with a condition that might progress so that it will cause infertility.	To cover all types of patients who need fertility preservation for medical reasons.
Eligibility criteria for fertility preservation	BHR require the woman or person trying to get pregnant to be aged under 40. Other NEL areas require women to be aged under 42. All current policies require men to be aged 55 or under.	People do not need to meet the normal eligibility criteria (including an age threshold). However, people freezing their eggs/ embryos must be well enough to have ovarian stimulation and egg collection and enough time must be available before their treatment (where appropriate).	This is the same as NICE guidelines.

Funding of ovarian tissue cryopreservation (OTC)	Not addressed in current policies	Not routinely funded.	OTC is a relatively new intervention and therefore the effectiveness is not yet well established. NICE do not currently recommend funding OTC.
Sperm washing			
Eligible groups of patients	The man or person providing the sperm is living with HIV, and the woman or person trying to get pregnant does not have HIV.	The woman or person trying to get pregnant is not living with HIV, but the sperm is being provided by a partner who is living with HIV and has an HIV viral count that is too high or they are unable to take their HIV medication regularly.	This is the same as NICE guidelines.
Storage of washed sperm	Not addressed in current policies	Funded for eligible people for up to two years	This is the same as storage for embryos.
Surgical sperm retrieval - extracting sperm by a surgical procedure.			
Funding of surgical sperm retrieval	Funded in appropriately selected patients	Not funded by the CCG because it is commissioned by NHS England.	This is consistent with NHS commissioning responsibilities.
Storage of surgically retrieved sperm	Not addressed in current policies	Funded for eligible people for up to two years.	This is the same as storage for embryos.
Ovarian reserve criteria - This is the number and quality of eggs remaining in the ovaries which is measured by tests to predict how many eggs might be produced during IVF.			

<p>Ovarian reserve criteria measured by NICE recommended tests – two hormone blood tests and an ultrasound scan.</p>	<p>To be eligible for assisted conception treatment, regardless of your age, you must have sufficient ovarian reserve measured by one of the three NICE recommended tests.</p>	<p>To be eligible for assisted conception treatment, regardless of your age, there should not be evidence of low ovarian reserve measured by two or more of the three NICE recommended tests.</p>	<p>This is not the same as NICE guidelines. NICE recommend that for women or people trying to get pregnant aged 40-42 only there should be no evidence of a low ovarian reserve.</p> <p>The proposed policy, and current policies, include ovarian reserve criteria for people of all ages.</p>
<p>Referral for investigations</p>			
<p>Referral for investigations for people trying to conceive through artificial insemination who do not have a known cause of infertility/ at risk of infertility.</p>	<p>Referral after six cycles of self-funded IUI.</p>	<p>Referral after six self-funded IUI if aged under 36, or three IUI cycles if aged 36 and over.</p>	<p>The policy is equitable for people who are trying to get pregnant through sexual intercourse and people who are trying to get pregnant through artificial insemination.</p>