

Egg Freezing: Preserving Future Parenthood

A renowned reproductive medicine specialist discusses egg freezing.

Imagine a young woman who is newly diagnosed with cancer. Her life-saving treatment defeats the disease but also threatens her future fertility. Another young woman is healthy yet worried about her future. Will she find a partner and start a family before her biological clock runs out?

These women face a dual dilemma, but science has an answer. Through a process called oocyte cryopreservation (egg freezing), a reproductive medicine specialist can stimulate a woman's ovaries to produce oocytes (eggs).

The specialist then "harvests" the eggs from the woman's ovaries and freezes them using a method called vitrification. The eggs are stored in liquid nitrogen tanks. As the woman ages, her eggs do not, allowing her to use younger, presumably healthier eggs if she later decides to have a baby using in-vitro fertilization (IVF).

In a 2019 report, the International Federation of Fertility Societies (IFFS) called egg freezing "one of the most significant recent advancements in assisted reproduction technology."

The report was encouraging about the safety of egg freezing, as well as fertilization and pregnancy rates. It found no increase in chromosomal abnormalities, birth defects, or developmental deficits in babies born from frozen eggs.

Am I a candidate for egg freezing?

As a board-certified specialist in Reproductive Endocrinology and Infertility and Chief of the UHealth Center for Reproductive Medicine at the University of Miami Health System, Pasquale Patrizio, MD, MBE, HCLD, FACOG is at the forefront of this technology.

He sees several situations that might warrant either medical egg freezing (MEF) or elective egg freezing (EEF).

"All patients diagnosed with medical conditions may impact future reproductive plans, such as cancer and non-cancerous medical conditions, including sickle cell disease and autoimmune diseases such as lupus," he says. "MEF might also be an option for some patients with Turner syndrome, patients at risk for early menopause, or transgender female-to-male individuals."

Severe endometriosis is another reason some women could pursue MEF. When younger female patients at Sylvester Comprehensive Cancer Institute must undergo chemotherapy or radiotherapy, Dr. Patrizio collaborates with his Sylvester colleagues to provide consultations and fertility preservation services before patients begin treatment.

On the other hand, "Single women are the overwhelming majority of patients seen for elective egg freezing (EEF)."

Elective egg freezing, Dr. Patrizio says, is for "women who are postponing motherhood because they are in a career, have not yet found the right partner, or are simply not ready to become mothers and are worried that the biological clock is ticking."

Finding your way through the egg preservation process

If you're considering egg freezing, find a specialist to guide you through the process. If your regular physician is not familiar with or is uncomfortable discussing the topic, Dr. Patrizio recommends requesting a referral to a reproductive endocrinologist and infertility specialist.

"Have a consultation and an open, frank discussion with a reputable reproductive endocrinologist and infertility specialist. Your consultation should not be short or quick. There are many aspects of the procedure that need to be discussed. Get as much information as you can on the entire process at the time of the consultation."

He also suggests setting realistic expectations.

"Egg freezing is not a guarantee of a future pregnancy but is a procedure that protects the chance of a pregnancy, according to the age of when the eggs were frozen," Dr. Patrizio says. "Have a thought to whether you will be interested at some point to become pregnant, even if unpartnered, and be aware of companies that promise guarantees or push you towards a medical procedure at a very young age."

Deciding whether to preserve future fertility is hard enough; most women face another challenge when considering this procedure.

"Expense is the major hurdle," Dr. Patrizio says.

"It is a pity that even MEF is not a covered benefit for most insurances."

He advises women to find out the costs associated with egg retrieval, yearly egg storage, thawing and fertilizing the eggs, and implanting the embryo when the woman is ready to attempt motherhood. In the United States, a single cycle can cost \$10,000 or more — and multiple may be necessary.

On the plus side, egg freezing may empower women on several levels. An article co-authored by Dr. Patrizio and published in *Science, Technology and Human Values* noted that the procedure provided women with "peace of mind" at a "difficult juncture in their lives."

As such, it is a "tool of recovery" that gives women the gift of time to think about their future.

To schedule a consultation with the UHealth Center for Reproductive Medicine, call 305-243-8642.

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