

Freeze-only cycle: a safe option

If you are undergoing a routine IVF or ICSI cycle, your doctor may recommend a freeze-only cycle. This improves your chance of a healthy pregnancy, and protects you from developing the potentially serious condition called ovarian hyper-stimulation syndrome (OHSS).

HOW DOES IT WORK?

Here are the steps in a freeze-only cycle:

1. You proceed with your routine IVF or ICSI cycle
2. The embryos are grown until day 5 and 6
3. Suitable embryos are frozen and stored
4. The embryos are then thawed and transferred to the uterus one at a time, in a cycle known as frozen embryo transfer (FET) or thaw cycle

WHY WOULD I HAVE A FREEZE-ONLY CYCLE?

Your doctor will recommend freeze-only for one or more reasons:

- Your progesterone level may be too high for a successful pregnancy
- You may have a high risk of developing ovarian hyper-stimulation syndrome (OHSS). This will be based on indicators such as the number of follicles, raised estrogen during the stimulation phase of the cycle, your AMH level, previous history of OHSS, or you are showing symptoms
- You may have a health issue, making the transfer or pregnancy too risky, eg polyps in the uterus
- You have planned for your embryos to be genetically tested, eg PGS or PGD

HOW MANY EMBRYOS WILL BE FROZEN?

Some clinics use the term freeze-all cycle, which we believe is misleading as it implies that all embryos are frozen.

It is important to understand that not all your embryos can be frozen. That's why we call it a freeze-only cycle, as there is no transfer of fresh embryos.

Only high-quality embryos that have developed at a normal rate will be frozen. This happens on day 5 or 6 after egg collection, which is known as the blastocyst stage. In a typical cycle you can expect to get 25-30% of your embryos frozen. This will depend on the egg numbers, quality and your age.

There is a 20% risk that no embryos will reach the blastocyst stage, or are not good enough to freeze (which again can depend on your age). If embryos don't reach blastocyst stage, they are unlikely to result in a successful pregnancy. By growing embryos to the blastocyst stage, we can learn more about their potential.

HOW WILL THIS TECHNIQUE IMPROVE MY CHANCE OF GETTING PREGNANT?

Embryos transferred in FET/thaw cycles have a greater than 40% chance of resulting in pregnancy per cycle. This is because:

- Embryos are frozen at the blastocyst stage, indicating good potential
- The uterus has not been exposed to hormones from fertility drugs, providing a more natural and receptive environment for the embryo to implant
- There are very small risks associated with the freezing and thawing process. In the current rapid freeze process (vitrification), more than 95% of all thawed embryos survive

WHEN I WILL KNOW IF I'M TO HAVE A FREEZE-ONLY CYCLE?

Your doctor will decide on a freeze-only cycle based on your scan and blood results. This decision may be made as early as the planning stages of your IVF cycle, or often as late as the day of your planned embryo transfer if you have symptoms of OHSS.

WHAT ARE THE BENEFITS?

1. Your embryo is transferred into an optimal environment for implantation and pregnancy. In an FET/thaw cycle, the uterus has not been affected by the high level of hormones which are regularly present during a stimulated IVF cycle.
2. You avoid developing the most serious form of OHSS, which is complicated by pregnancy.

WHAT DOES IT COST?

Private patients:

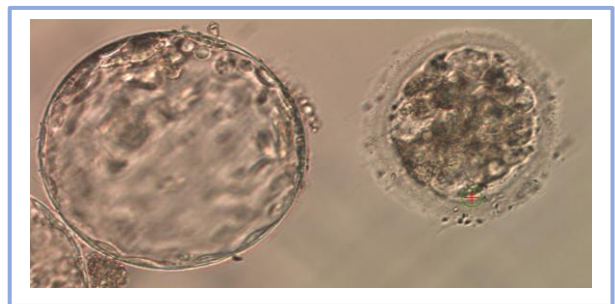
- The cost of embryo freezing and storage for 12 months is covered in your IVF/ICSI cycle cost
- If your plan has changed from a fresh transfer cycle to a freeze-only cycle, we refund the cost of the transfer component
 - Please note that the FET/thaw cycle is an additional cost

Public patients:

- The cost of freezing and FET/thaw cycles is covered under your public funding
- The cost of storing embryos is covered for 18 months, after which time 6-monthly storage fees will apply
- If you did not have an embryo transfer or freeze you might be eligible for another cycle. You will need to discuss this with your doctor

FREEZABLE QUALITY

The image below shows two blastocyst embryos. The one on the left is an expanded embryo which is of freezable quality. On the right is an unexpanded, degenerating embryo which is not freezable.



Ask your Repromed doctor if a freeze-only cycle is recommended for you.