

General Information



Information for Patients and Partners



What is this leaflet about and who is it for?

This leaflet has been produced to provide patients with more information about the assisted conception treatment journey. What to expect before, during and after treatment. The patient journey will differ according to which treatment you are having. The Leicester Fertility Centre is licenced by the Human Fertilisation and Embryology Authority (HFEA).

What is assisted conception?

Assisted conception treatment includes all treatment in which gametes (sperm or eggs) and/or embryos are handled outside the body (in the laboratory). Assisted conception treatment includes intrauterine insemination (IUI), *in vitro* fertilization (IVF), intracytoplasmic sperm injection (ICSI), sperm or egg freezing and embryo freezing.

Pre treatment

Women will need to have their Rubella immunity checked before treatment. If you are not immune to Rubella you will be advised to contact your GP to be vaccinated against Rubella and then have the test repeated after one month to confirm that you have become immune prior to treatment. It is also important to screen women for Chlamydia and other sexually transmitted infections (STIs) prior to treatment. Women will be screened for abnormal haemoglobin (sickle cell and thalassemia); if results are not within the normal range, the partner will be screened for abnormal haemoglobin. If both have results which are not in normal range, further advice will be taken from haematology department.

Prior to starting assisted conception treatment, you and your partner will need to have a blood test to screen for HIV, Hepatitis B, Hepatitis C, HTLV and Syphilis. This is essential as we need to take extra precautions when dealing with sperm, eggs, or embryos from carriers of those conditions. If you test positive for one of these conditions, you will need to see a specialist before undergoing assisted conception treatment. Some of these screening tests will be carried out in secondary care.

The above health screening is clinic policy for infection prevention and welfare of the child considerations. This means that patients and partners will be required to undergo screening, even if they are not providing gametes. For self-funding patients, the costs of the tests are outlined on our price list, which is also available online.

We offer face to face, telephone or virtual appointments. In the event of further lockdowns due to COVID-19, footfall in hospitals is likely to be discouraged, in which case most appointments will be virtual. Patients using virtual appointments need to be aware that there may be a risk of reduced security.

Leicester Fertility Centre (LFC) follows government guidance and University Hospitals of Leicester (UHL) NHS Trust policy regarding COVID-19 precautions. For more details, please see COVID-19 leaflet. For any travel overseas, we follow World Health organisation (WHO) guidance regarding viruses such as Zika and Ebola. Please inform us if you have travelled overseas in the last two years.

Which patients are eligible for NHS funding?

In order to receive NHS funded infertility treatment within the East Midlands, you will need to meet the following criteria:

- Couples must be in a stable relationship for at least 2 years
- Couples must be living together at the same address
- Couples must be registered with a GP in Leicestershire
- No living children from either partner, including adopted children
- Each partner must have British citizenship or 'indefinite leave to remain' in the UK
- Meet the definition of infertility:
Infertility is defined as failure to conceive after regular unprotected sexual intercourse for two years in the absence of known reproductive pathology, in line with National Institute for Health and Care Excellence (NICE) guidelines.
- Normal ovarian reserve [serum follicle stimulating hormone (FSH) < 15 IU/L, serum Antimüllerian hormone (AMH) more than 5.4 pmol/L and antral follicle count (AFC) ≥5
- Female age ≤42 (ovarian stimulation for IVF/ICSI treatment must be completed prior to 43rd birthday)

- Female Body Mass Index (BMI) between 19 and 30
- Male BMI <35 (only applies for men requiring Surgical Sperm Retrieval)
- Where couples smoke, only those who stop or agree to take part in a supportive programme of smoking cessation will be accepted onto the waiting list for IVF treatment. Both partners must be non-smoking for at least 28 days before treatment commences and must continue to be non-smoking throughout the treatment. Failure to do so will result either in cessation of treatment or treatment cost being applied.
- Welfare of the child: there should be no concerns as to the welfare of any future or living children
- Same sex female couples are eligible for one cycle of IVF if they have previously had unsuccessful (self-funded) cycles of donor insemination at an HFEA Licensed Fertility Centre or have an identified cause of subfertility

Isn't all treatment funded by the NHS?

Unfortunately, not all treatment provided is funded by the NHS. The provision of NHS funded fertility treatment is limited and you need to meet the criteria set by the Integrated Care Boards (ICBs).

Who decides what funding and treatments are available?

The ICBs within the East Midlands decide what funding and treatments are available. The ICBs also decide on the eligibility criteria for funded treatments.

Types of NHS funded treatment available and number of cycles that may be NHS funded

The types of treatment and maximum number of funded cycles that are available on the NHS are shown below. Unfortunately, NHS funding availability and the number of NHS funded IVF treatment cycles you may be offered may not necessarily be compliant with current National Institute for Health and Care Excellence (NICE) guidelines.

The number of cycles available for a couple will take account of any previous subfertility treatment received. Couples who had self-funded IVF/ICSI will be entitled to one NHS cycle provided they have not previously undergone more than two cycles of self-funded IVF/ICSI treatment. For women up to 40 years the East Midlands ICBs offer funding for one full cycle of IVF/ICSI treatment. Women aged 40-42 are eligible for one full cycle of IVF/ICSI, provided that: they have never had any previous IVF or ICSI (NHS or self-funded); there is no evidence of low ovarian reserve; and the implications of IVF and pregnancy at this age have been discussed with the patient.

Ovulation Induction (OI) Maximum of six cycles, Clomid or Gonadotrophin stimulated as required. Not including halted cycles.

Intra-Uterine Insemination (IUI) Maximum of three cycles, Natural, Clomid or Gonadotrophin stimulated as required. Not including halted cycles.

In-Vitro Fertilisation (IVF) or Intra-Cytoplasmic Sperm Injection (ICSI)
Maximum one full cycle, includes fresh and subsequent frozen embryo transfers, only one halted cycle will be funded. If no eggs are collected at the oocyte retrieval procedure, or no eggs are fertilised (fail to fertilise) at IVF/ICSI, this is deemed a completed cycle and patients are not eligible for further NHS funded treatment.

Couples who choose not to have IUI and progress straight to IVF will not be permitted to revert to NHS funded IUI if IVF is unsuccessful.

Donor Insemination (DI) Maximum of three cycles, natural, Clomid or Gonadotrophin stimulated as required. Not including halted cycles.

Heterosexual couples who choose not to have DI and progress straight to IVF-DI will not be permitted NHS funded DI if IVF-DI is unsuccessful.

Self-funded fertility treatment

If you are not eligible for NHS funded treatment you may wish to self-fund your treatment. To maximize the chance of success of assisted conception treatment, we have set a number of criteria that should be

met for couples seeking **self-funded** fertility treatment. These criteria include the following:

- Ovarian reserve as indicated by ovarian reserve test (AMH more than 2.5 pmol/l + AFC ≥ 5 including both ovaries). Please ask a member of staff for our ovarian reserve information leaflet if you need further information
- Female partner should be aged under 43 years and have sufficient ovarian reserve (if using own eggs) or under 50 years (if receiving donor eggs)
- Male partner to be aged 60 or under (patients above the age of 60 years will be considered on a case-by-case basis)
- Woman's BMI $< 32 \text{ kg/m}^2$
- No contraindication for assisted conception treatment
- Suitability for assisted conception treatment
- No concern about the welfare of the child
- Please note surrogacy treatment is not offered at Leicester Fertility Centre

Medications for self-funded patients to be purchased from LFC directly or by a LFC chosen supplier. You can get further information about the medications from the LFC directly.

Criteria for single embryo transfer (SET)

To reduce multiple births, East Midlands ICBs follow NICE guidance regarding the number of embryos to be transferred, which takes into account the woman's age, embryo quality and the number of previous IVF treatment cycles. See also HFEA leaflet for multiple births.

Pre conceptual care

The following will be discussed with you:

- Folic acid/vitamin D
- BMI - weight management
- Smoking

Initial clinic appointments will include:

- Both partners/single women will have their photograph taken to confirm identity for future treatment cycles

- Completion of patient information sheets with accompanying documentation at consent check appointment
- Both partners are weighed and have their height measured to calculate their BMI at consent check appointment
- Review of results and individual treatment plan
- Completion of consent forms, if not already done electronically
- Self-injection lesson for IVF/ICSI treatment and stimulated IUI/DI

We can provide support from the learning disability team if required.

Please note this is a teaching hospital and the presence of students is possible. If you do not wish a student to be present during a consultation or procedure, please inform a member of staff.

Consent forms

A number of consent forms will need to be signed by you and/or your partner before treatment is commenced. Many of these are produced by the HFEA and constitute legal documents; these will be discussed with you in detail at your clinic appointment and will require completion prior to treatment commencing. We encourage patients/partners to use our electronic consents platform, Engaged MD.

Consent to Disclosure for identifying information:

Sometimes your identifying information will need to be shared with other parties such as your GP- to discuss your medical history for planning the most appropriate fertility treatment; other healthcare professionals outside the clinic for your medical care; administrators and auditors for financial or clerical reasons. Your identifying information will not be shared with the above parties unless you provide your written consent for this other than in a medical emergency.

You can withdraw or vary your consent at any time up until gametes (eggs and sperm) or embryos have been used by contacting the clinic and we will explain the implications to you.

Scans and blood tests

During your treatment cycle you may need several scans and blood tests. Scans are carried out internally. You are not required to have a full bladder for an internal scan. These tests and scans are detailed in the treatment specific information leaflets.

Counselling

We know that assisted conception treatment can be emotionally as well as physically draining and we have a team of experienced counsellors to help you through any difficulties you may encounter. Counselling is available at any stage during your journey, either on your own or as a couple.

Considerations

Please note that Leicester Fertility Centre is unable to guarantee that your treatment will be carried out by a specific doctor. Please let us know if you would **not** proceed with treatment unless a specific doctor was available.

Support services

Prayer room

The UHL Trust has a multi faith prayer room available for use, as well as chaplains who represent numerous faiths.

Translators

We can provide translators in a number of different languages. Please ask for details. Written and verbal information is also available in several languages.

Treatment leaflets

Leaflets are available in more detail for all our treatments.

Website

We have a comprehensive website which gives more details about all our services and staff: www.leicesterfertilitycentre.org.uk

What happens after treatment?

If you are successful and achieve a pregnancy, you will have a scan at 6 weeks after which you are referred to your GP/midwife who will arrange your antenatal care.

If your treatment is unsuccessful, you will be offered a follow up appointment to discuss:

- Further treatment using any frozen embryos in store
- Planning another fresh attempt at treatment
- Not pursuing any further fertility treatment

You can choose to have counselling even if the treatment has not been successful.

Success rates

Information on success rates is of limited value in comparing and choosing where to seek treatment. Data can be found on the HFEA website by using the following link: <https://www.hfea.gov.uk/choose-a-clinic/>. Our most recent data is available in the clinic, but this has not yet been verified by the HFEA.

HFEA code of practice

During your visits to the Leicester Fertility Centre (LFC) you will be given a lot of information, both verbally and in writing. Sometimes it can be difficult to remember everything, so before your treatment it is important for you to understand what is involved. Listed below are the points we want you to be sure that you are aware of and understand.

1. The possible disruption to your domestic life which treatment will cause, and the length of time you will have to wait for treatment.
2. Any other subfertility treatments which are available, including those for which a licence is not necessary.
3. The limitations and possible outcomes of the treatment proposed and how effectiveness can vary over time.
4. The LFC's statutory duty to take account of the welfare or any child resulting from treatment and the effect on other existing children; and (where relevant) the advantages and disadvantages

of continued treatment after a certain number of attempts.

5. The centre's policy on selecting patients and fertility treatments available.
6. The possible side effects and risks of the treatment to you and any resulting child, including (where relevant), the risks associated with ovarian stimulation and ovarian hyperstimulation syndrome (OHSS).
7. The availability of embryo freezing facilities, including the likelihood of success of embryo freezing, thawing and transfer and the implications of storage; including (where relevant) the possible deterioration of any stored sperm or embryos.
8. In the case of fresh egg donation, the screening requirement of the donor and the risk of infection for the recipient.
9. The risks to you and any resulting child (or children) associated with a multiple pregnancy as well as the practical, financial, and emotional impact a multiple birth can have upon the family unit.
10. The techniques involved in treatment, and the possible pain and discomfort that you might experience.
11. The likely outcomes of the proposed treatment, including the most recent live birth rate and clinical pregnancy rate per treatment cycle; this is available via the HFEA website and is verified by the HFEA.
12. The financial cost to you of the proposed treatment and of any alternative treatments, and the fees relating to donation or storage.
13. There may be additional medication costs over and above the standard medication package.
14. Counselling is available.
15. The importance of telling us about any resulting birth.
16. Who will be the child's parent or parents under the HFE Act.
17. The information which the LFC must collect and register with the HFEA and the extent to which that information may be disclosed to people born as a result of IVF, sperm, egg, or embryo donation.
18. A child's need to know about his or her origins.
19. Fertility treatment has to take account of the interest of the child that may be born as a result of this treatment and of any other children who may be affected.
20. The consent to treatment, storage, donation, and disclosure of information requirements.

21. The right to withdraw or vary your consent.
22. The recording and protection of personal data and confidentiality, the implications of disclosure, in particular the fact that, once it is disclosed, the information will be subject no longer to the special provisions of the HFE Act 1990 (as amended) but only to the general law of confidentiality.

Parenthood

As a woman if you are legally married to a previous partner and are having treatment with a new partner, then you need to be aware that your husband will be the legal father of any child you give birth to. If required, we can provide you with a form that will enable you and/or your husband to withdraw consent to being the legal parent. You are strongly advised to seek your own legal advice.

Definition of infertility

Infertility is defined as failure to conceive after regular unprotected sexual intercourse for two years *in the absence of known reproductive pathology*, in line with National Institute for Health and Care Excellence (NICE) guidelines.

Definition of treatment cycles

Completed IVF/ICSI cycle

A cycle is classed as completed once egg collection has been attempted. The cycle includes provision for further transfer of frozen embryos in storage.

Abandoned IVF/ICSI cycle

A halted cycle is a cycle halted prior to egg collection due to lack of response or excessive response to hormone injections.

Completed IUI/DI cycle

A cycle is classed as completed once insemination occurs.

Halted IUI cycle

A halted cycle is a cycle halted prior to insemination, usually due to lack of response or excessive response to stimulation regimens, or lack of response in a natural cycle.

Completed OI cycle

A cycle is classed as completed following follicular monitoring resulting in timed intercourse.

Halted OI cycle

A halted cycle is a cycle halted prior to intercourse, usually due to lack of response or excessive response to stimulation regimens, or lack of response in a natural cycle.

What additional treatments are included as part of NHS funding?

When it is deemed to be clinically appropriate the following will be available for NHS patients:

Sperm freezing/storage of sperm (will be funded for oncology and transgender patients within the catchment area)

Egg donation (will be funded for women with premature ovarian failure (menopause), gonadal dysgenesis such as Turner syndrome or for those who have had both their ovaries removed)

Egg Freezing (oncology and transgender patients within the catchment area)

Surgical sperm retrieval - Funding will not be provided for sperm retrieval in men who have undergone vasectomy

There may be some further treatments in addition to the ones listed that will be considered on a case-by-case basis.

Are there any patient exclusions to NHS funding?

These patients may not meet the definition of infertility, and therefore may be excluded from receiving NHS funded treatment:

- Single individuals
- Sterilized patients or those who have had a reversal procedure
- Couples requiring a surrogate for their embryos

How can I access NHS funded treatment?

All patients should be referred initially by their General Practitioner to the Gynaecology Outpatient Department University Hospitals of Leicester NHS Trust (UHL) and receive a specialist fertility appointment.

After initial investigations are carried out the fertility specialist can refer you to the Leicester Fertility Centre at the Leicester Royal Infirmary. Your G.P. or ICB can advise you of your options regarding choice of infertility clinic for your treatment.

Can I have treatment if I pay for it?

You may choose to fund treatment yourself if you are not eligible for NHS funding, some patients prefer not to wait for NHS funding. Please contact us for details or see our website. Our price list and Terms and Conditions are available online.

What can I do if I do not meet the criteria for NHS treatment?

Requests for NHS funded treatment by patients who do not meet the East Midlands criteria will not be sanctioned unless there are exceptional clinical circumstances compared to all other patients in this cohort. Unique requests supported and undertaken by the Consultant looking after your care are submitted to the East Midland Individual Funding team. It is extremely rare for these to be sanctioned, and only in extraordinary special circumstances.

If you wish to register your concerns regarding the criteria, you may write to the relevant commissioning body, which will consider these concerns when the policy is next reviewed. However, this will not alter the decision or outcome for you regarding your ineligibility for NHS funded treatment.

These concerns should be addressed to:
NHS Arden & GEM Commissioning Support Unit (Head Office)
St John's House,
East Street,
Leicester,
LE1 6NB

If you wish to make a formal complaint about the commissioning policy this should be addressed to your ICB. Please note that this also will not alter the decision regarding funding for your own treatment if you do not meet the criteria currently in place. The ICB will inform you that if

you are dissatisfied with the response to your complaint, you have the right to ask the Care Quality Commission to review the case.

CQC National Customer Service Centre
Citygate
Gallowgate
Newcastle upon Tyne
NE1 4PA

Telephone: 03000 616161 <http://www.cqc.org.uk/>

Data Protection

The General Data Protection Regulation (GDPR)

The LFC is part of Leicester Hospitals and as such is compliant with the Data Protection Act (DPA) 1998, and as an NHS Trust we have measures in place to protect your data. The new GDPR replaces the DPA and introduces some new rights for individuals in certain circumstances. The processing of your personal data is necessary to comply with the legal obligations of our HFEA licence and we are required to report certain personal data, including data about your treatment to the HFEA.

A leaflet is available explaining why the Hospital collects information about patients and how it is used, who we may share information with and patients' right to see their health records and how we keep your records confidential.

You can request a copy of your Leicester Fertility Centre notes by contacting us on 0116 2585922

Or

Your UHL medical records by contacting:

Access to Health Records

Tel No: 0116 2047939

Leicester Royal Infirmary

Infirmary Square

Leicester
LE1 5WW
Online:: uhl.ams-sar.com

Complaints

Please be assured if you make a complaint, future healthcare will in no way be prejudiced.

Making a verbal complaint

You can make your complaint to any member of our staff

Making a formal complaint

Written complaints should be addressed to:

Chief Executive
Trust Headquarters
Gwendolen House
Gwendolen Road
Leicester LE5 4QF

Contact PALS

You can also contact the Trust's Patient Advice and Liaison Service (PALS)

Freephone: 0808 178 8337

Email: uhl-tr.pals@nhs.net

Online:

<https://www.uhleicester.nhs.uk/patients-visitors/support/feedback-complaints/pals/>

Our commitment to patients

We are constantly striving to improve our services to patients, and we will welcome your comments or suggestions for improvement.

Leicester Fertility Centre contact details

Tel: 0116 258 5922

E-mail: Uhl-tr.LeicesterFertilityCentre@nhs.net

Website: www.leicesterfertilitycentre.org.uk

Please follow us on Facebook and Twitter:



<https://www.facebook.com/leicesterfertilitycentre/>



https://twitter.com/Leics_fertility

Useful addresses

Human Fertilisation and Embryology Authority: www.hfea.gov.uk

www.hfea.gov.uk/treatments/explore-all-treatments/risks-of-fertility-treatment

www.hfea.gov.uk/choose-a-clinic/consent-to-treatment

NICE guidelines: www.nice.org.uk

NHS - Response line: 111.nhs.uk / 111

NHS - Smoking helpline: 0300 123 1044

Fertility Network UK: www.fertilitynetworkuk.org / 0121 323 5025

Do you feel that you are at risk of verbal or physical abuse? If so, you may find the following numbers useful:

Domestic Violence Helpline:

United against violence & abuse (UAVA)

Helpline: 0808 802 0028

Email: info@uava.org.uk

Text support: 07715 994 962



This information was correct at the time of printing. While the Trust makes every reasonable effort to keep its information leaflets up to date, very recent changes may not be reflected in the guidance and you should discuss this with the clinical staff at the time of your appointment.

Questions

If you have any questions write them down here to remind you what to ask when you speak to your consultant.

This image shows a full page of blank, lined paper. It features approximately 20 evenly spaced horizontal grey lines across its entire width, providing a template for handwriting practice or general note-taking. The margins are consistent on all sides.



Today's research is tomorrow's care

We all benefit from research. Leicester's Hospitals is a research active Trust so you may find that research is happening when you visit the hospital or your clinic.

If you are interested in finding out how you can become involved in a clinical trial or to find out more about taking part in research, please speak to your clinician or GP.

If you need information in a different language or format, please call the number(s) below or email equality@uhl-tr.nhs.uk

اگر آپ کو یہ معلومات کسی اور زبان میں درکار ہیں، تو براہ کرم مندرجہ ذیل نمبر پر ٹیلی فون کریں۔

على هذه المعلومات بلغة أخرى، الرجاء الاتصال على رقم الهاتف الذي يظهر في الأسفل
જો તમને અન્ય ભાષામાં આ માહિતી જોઈતી હોય, તો નીચે આપેલ નંબર પર કૃપા કરી ટેલિફોન કરો

ਜੇ ਤੁਸੀਂ ਇਹ ਜਾਣਕਾਰੀ ਕਿਸੇ ਹੋਰ ਭਾਸ਼ਾ ਵਿਚ ਚਾਹੁੰਦੇ ਹੋ, ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਹੇਠਾਂ ਦਿੱਤੇ ਗਏ ਨੰਬਰ 'ਤੇ ਟੈਲੀਫੋਨ ਕਰੋ।

Aby uzyskać informacje w innym języku, proszę zadzwonić pod podany niżej numer telefonu

0116 258 4382 or 0116 250 2959