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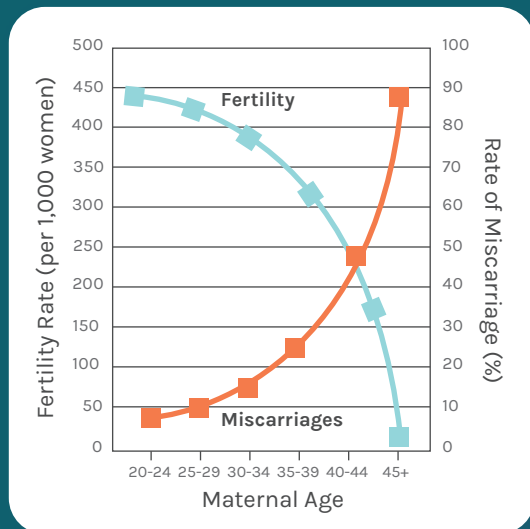
MEDICAL UPDATE | July 2022

Age is #1 indicator of female fertility

As more women are delaying starting their families to pursue education, career opportunities, or for other personal reasons, it is important to provide resources and information for women trying to conceive in their forties.

The quality and quantity of egg supply decreases as a woman ages. By the time a woman reaches 40, they have less than a 5 percent chance each month of achieving a pregnancy on their own. For women who do achieve an unassisted pregnancy in their early 40s, the rate of miscarriage ranges from 50-90%.*

[Learn more about fertility for women over 40 →](#)



*ASRM The impact of age on female fertility. https://www.asrm.org/globalassets/asrm/asrm-content/learning-resources/patient-resources/protect-your-fertility3/age_femaleinfertility.pdf. Accessed July 18, 2022.

Women over 40 have options, here is what they should consider

When a woman is in their forties, getting and staying pregnant can pose challenges and risks, but fertility specialists at Shady Grove Fertility (SGF) can provide information and resources.

The notion of a woman's biological clock is familiar to many of us, but the impact of age on fertility can seem elusive when we see women achieving pregnancies later and later. In actuality, age is the number one factor influencing a woman's fertility potential. By the time a woman reaches age 40, they have less than a 5 percent chance each month of achieving a pregnancy on their own. Age not only affects the chances of achieving a spontaneous pregnancy, it also affects the success rates of infertility treatment options as well as the risks of pregnancy itself. Women in their 40s should be counseled to understand these potential challenges and risks.

Trying to conceive for women over 40

Encourage patients over 40 who are trying to conceive to pursue a basic fertility work-up to identify any factors in addition to their age that could be potential roadblocks to achieving a pregnancy. "We encourage women over 40 who have been trying to conceive for more than three months, to go ahead and seek help from a fertility specialist," shares Melanie Ochalski, M.D., who sees patients at SGF's Lancaster, Pennsylvania location. "Time is of the essence when it comes to fertility treatment success, so we want to see those patients earlier on, so we can move forward quickly and effectively."

For your patients considering donor eggs

The uterus itself is capable of sustaining a pregnancy long past the age of 40. But the lack of high-quality eggs presents the largest hurdle for patients ages 40 and over. Should testing reveal that a patient's ovarian reserve is very low or there are no viable eggs remaining, SGF will encourage counseling patients about pregnancy success rates through the use of donor eggs or donor embryos with IVF.

SGF is home to one of the largest egg donor programs in the country and can provide information and resources to patients pursuing egg donation to grow their families. Donor eggs are recommended for the majority of patients ages 45 and over. The treatment process using donor eggs is very similar to IVF except the egg used comes from a prescreened donor between the ages of 21 and 34. Women over 40 who choose donor egg treatment at SGF see increased chances for achieving a pregnancy than those using their own eggs.

"More than 10,000 SGF patients have become parents through egg donors," shares Dr. Ochalski. "SGF's donor egg program provides patients with a highly effective treatment option to overcome infertility."

| Maternal Age | <35 | 35-40 | >40 |
|--|---------------------------|-----------------------------|-----------------------------|
| When to Refer | No pregnancy after 1 year | No pregnancy after 6 months | No pregnancy after 3 months |
| Typical chance of pregnancy per month (without medical assistance) | 20% | 10% | <5% |
| Chance of egg chromosomal abnormalities ¹ | <35% | 35-58% | >58% |
| Intrauterine insemination (IUI) pregnancy rate per cycle at SGF ^{2,3} | 17-20% | 15-17% | up to 12% |
| In vitro fertilization (IVF) clinical pregnancy rate per embryo transfer at SGF ⁴ | 52% | 42% | 25% |
| IVF with donor egg clinical pregnancy rate per embryo transfer at SGF ⁵ | 60% | 60% | 60% |

Basic fertility work-up: What SGF looks for

- Bloodwork:** Assesses follicle-stimulating hormone (FSH), anti-Müllerian hormone (AMH), and estradiol (E2) levels. Elevated FSH or E2 levels or decreased AMH levels would suggest a decrease in ovarian reserve. An elevated LH level would suggest anovulation and potentially polycystic ovary syndrome (PCOS).
- Ultrasound:** Determines antral follicle count (AFC). AFC paired with hormone test results give physicians a clear picture of ovarian reserve status.
- HSG:** Examines if the Fallopian tubes are clear of obstructions
- Semen analysis:** Analyzes motility, morphology, and volume

¹ Fransiak J, Forman E, et al. Aneuploidy Versus Age. Fertility and Sterility. 2014, 101: 656-663.

² Pregnancy rate per cycle following ovulation induction (OI) or superovulation with a minimum of 9 million total motile sperm (2014-2015).

³ Muthigi A, et al. Fertility and Sterility. Clarifying the relationship between total motile sperm counts and intrauterine insemination pregnancy rates. 2021.

⁴ Preliminary Shady Grove Fertility 2020 IVF and FET Statistics.

⁵ Shady Grove Fertility 2020 Donor Egg Success Rates.