



Reproductive Tourism: Reproductive Exile or an Insemination Vacation



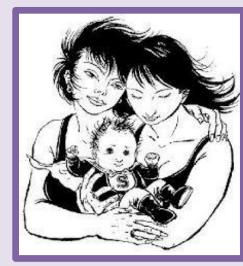
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THE NEXT GENERATION

Califoria Cryobank





DISCLOSURE

- Research Director , Ovation Fertility;
- Technical Director to the California Cryobank.
- Scientific Advisory Board for Innovative Cryo Enterprises (I.C.E., NJ)
- No Conflicts of Interests





- Matorras R. Reproductive exile versus reproductive tourism . Hum. Reprod. 2005; 20(12): 3571-2. doi:10.1093/humrep/dei223.
- Inhorn MC, Patrizio P. "Rethinking reproductive "tourism" as reproductive "exile"". Fertil.Steril.2009; **92**(3):904-06. doi:10.1016/j.fertnstert. 2009.01.055.
- Pennings G, de Wert G, Shenfield F, Cohen J, Tarlatzis B, Devroey P. ESHRE Task Force on Ethics and Law 14: equity of access to assisted reproductive technology. Hum Reprod 2008;23: 772–4.
- Deonandan R. Recent trends in reproductive tourism and international surrogacy: ethical considerations and challenges for policy. Risk Management Healthcare Policy 2015; 8:111-19. doi.org/10.2147/RMHP.S63862
- Hughes EG, Sawyer A, DeJean D, Adamson GD. Cross-border reproductive care in North America: a pilot study testing a prospective data collectionprogram for in vitro fertilization clinics in Canada and the United States. Fertil. Steril. 2015; 105(3):786-90. doi.org/10.1016/j.fertnstert.2015.11.048
- ASRM Ethics Committee. Cross-border reproductive care: an Ethics Committee opinion. Fertil. Steril. 2016; 106(7):1627-33. doi.org/10.1016/j.fertnstert.2016.08.038.



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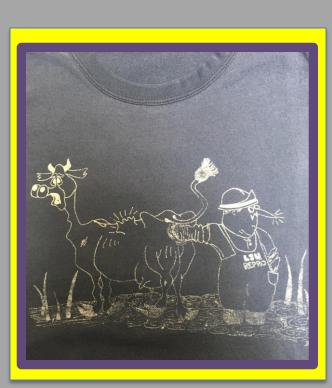
- CRB Organizing Committee
- Kavoussi Outstanding Teaching Award ASRM
 2015 2nd Annual Recipient : In Memorium

Robert A. Godke, PhD



LSU

Legacy of the **"REPRO RANGERS"**



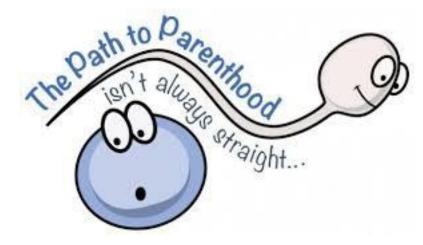


- The act of infertile individuals or partners travelling

over national and international borders

for the purpose of receiving ART advice and treatment.



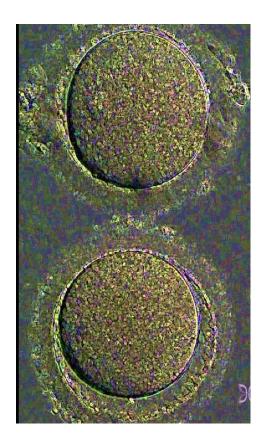


Cross-border Reproductive Care (CBRC)

Confidential



Fertility Diagnosis Semen Analysis/Cryo IVF / ART **Donor Gametes** Surrogacy







IVF Treatment ?

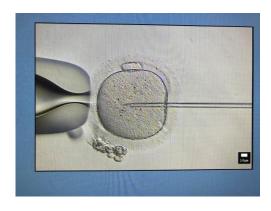
- DECISIONS
- STRESS / LIFESTYLE
- COSTs \$\$\$



Cross-border Reproductive Care









Diagnosis/Semen Analysis

- Limited access to diagnostic testing
- Diagnosis may not be covered or treated in country
- Difficult male factor conditions may require TESE
- Failure with treatment due to undiagnosed reason





Insemination Vacation

- Affordability (\$\$\$)
- Preservation of privacy









Cross-Border Reproductive Care (IVF)

- ART demands outweigh availability of services
 - (wait listing/shortages)
- Availability of ART resources
 - (expertise, equipment, donor services)
- ART success rates
 PGT (gender selection)







Reproductive Exile

- Ethical and religious reasons
- Regulatory issues in country of origin
- Discrimination of Sexual Orientation
- Limited/Regulated 3rd Party Services





The concept of a Cross-Border Reproductive Experience :

Patients

- Safety (societal opinion, religion, IDS)
- Effective care (technology)
- Legal concerns (regulations)
- > Affordable care (lower cost, efficiency of outcomes)
- Reproductive Professionals
- Advanced training
- Diversified services





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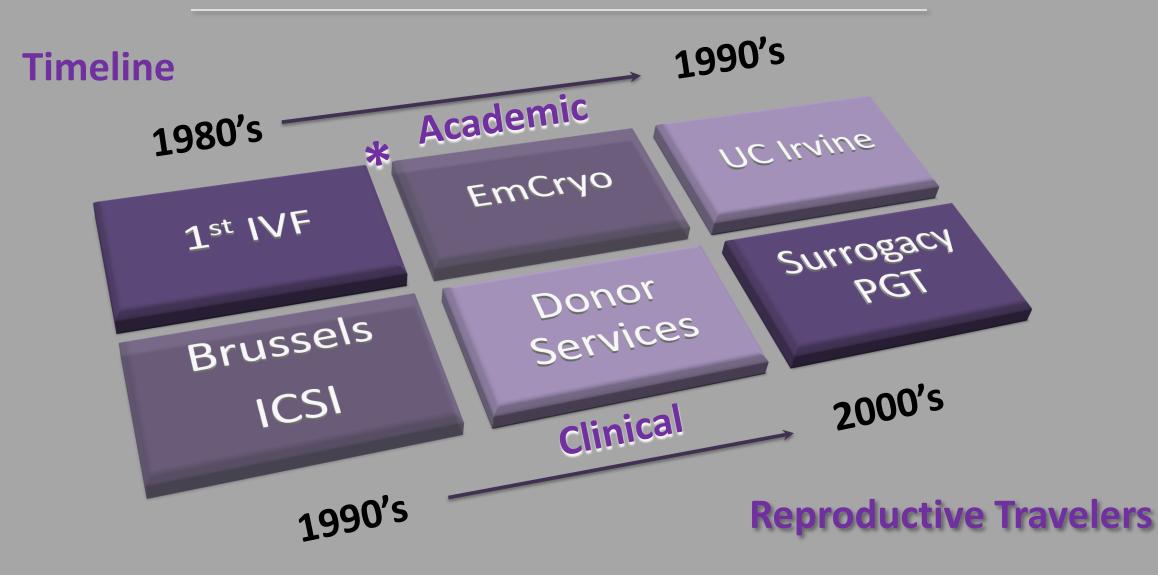


Historical Timeline

- 1980's IVF Advances : IVF and Embryo Cryopreservation
 - UK, Australia, USA (Patients and Professionals)
- 1988-95 UCI Global Enterprise
 - International Patients / Research Fellows
 - Global Satellite Clinics (\$\$\$ Driven Pitfalls)
- 1992-95 ICSI Success UZ Brussels
 - Workshops and CB-ICSI
- 1990's Donor insemination in European countries
- 2000's Governmental "embryo" restrictions /3rd Party Use
 - Vatican Party "Italian" Law / German Laws
- 2000's Surrogacy Boom worldwide / Low Cost IVF
- Since 2010 PGT Boom Worldwide



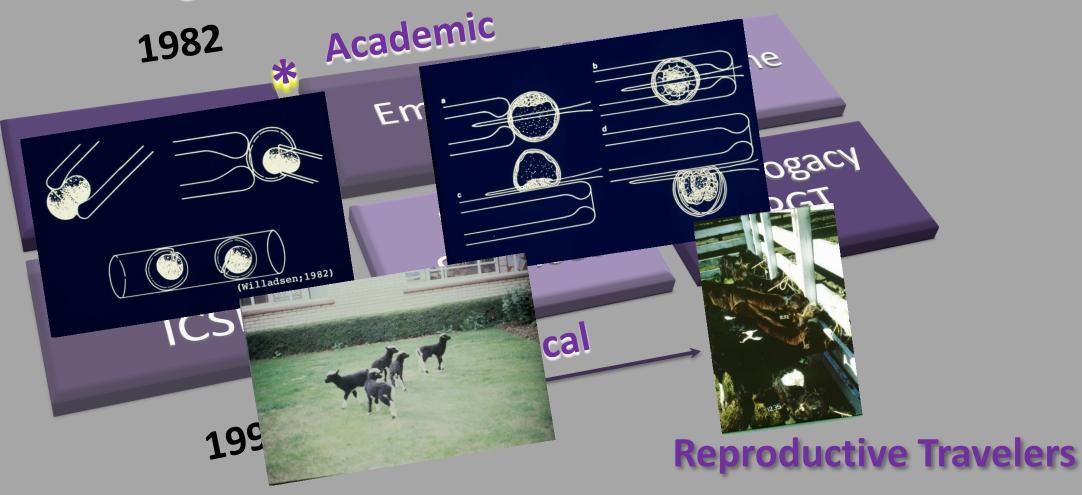
CROSS BORDER FERTILITY





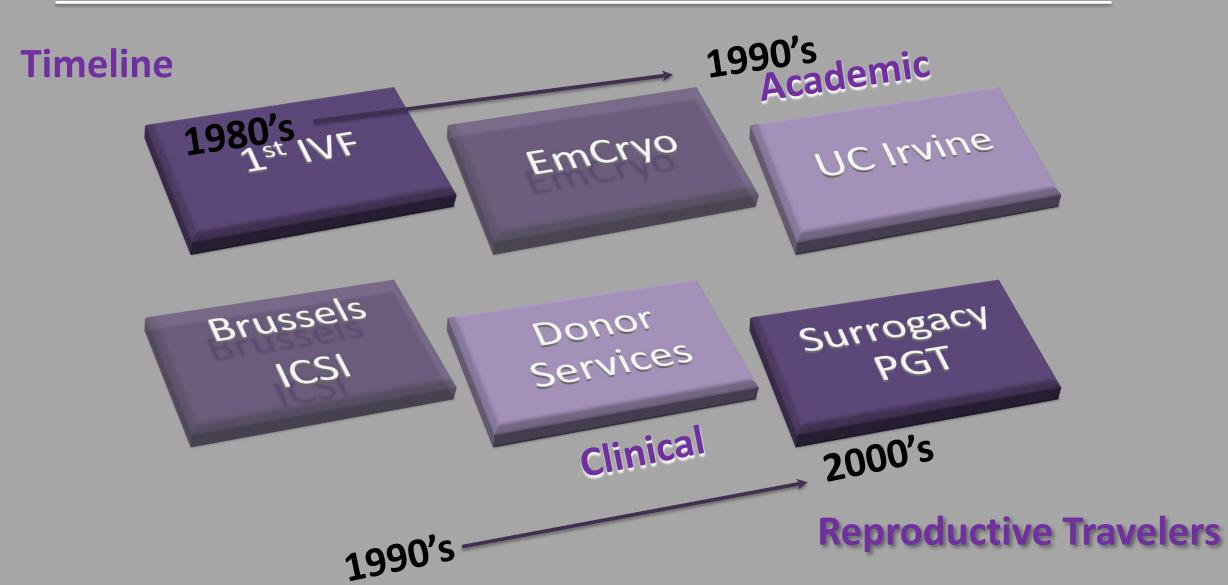
CROSS BORDER EDUCATION

Godke - Cambridge Sabbactical





CROSS BORDER REPRODUCTION



Key Components to Successful Operation





HEALTH & SAFETY?

- Concerns regarding CBRC patients
- > Safety (IDS) to patients and staff
- Receiving Oocytes/Embryos from outside Lab
- Responsible treatment / care
 Multiple births : health & birth complications
 Does affordable care come at a cost?

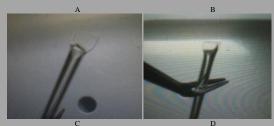
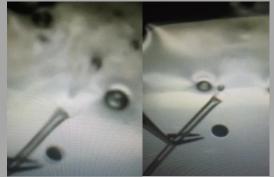


Figure 1



- Need for international policies /laws : CBRC practices
 - \Leftrightarrow Standard of care
 - \Leftrightarrow Quality control measures

3rd Party Services



Surrogacy
- Big \$\$\$?

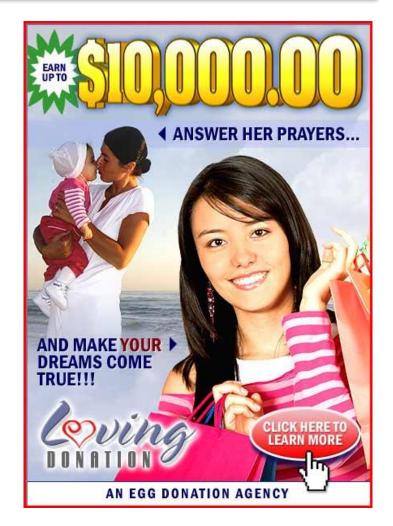
- Commericalism?

Typical RT Patient:

- Single Parent
- Same Sex Couples



Gestational Carriers



• Egg Donors



Patients Seeking International Fertility Treatment





- Perceived low-cost
- Access to discount 3rd party services
- Vacation
- Specific treatment

Confidential



Risks with International ART

- Ineligible or nonexistent screens eliminating future embryo transfers to be performed in the US
- Failures require continual trips to international clinic
- Storage and communication difficulties

Patients Coming to US for Treatment



IP Reasons for US ART

- Perceived high-success
- Access to various 3rd party services
- Specific ART treatments
- Child citizenship







Risks with International ART

- Shipping risks for countries to not allow embryos in/out
- Failures require continual trips to US
- Storage and communication difficulties
- Increased cost

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SCCRM / OVATION FERTILITY

CBRC APPEAL?



Success Rates!



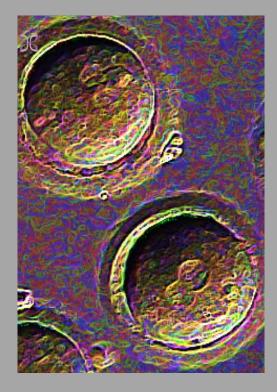




OVATION FERTILITY - NB

LABORATORY STORIES of Reproductive Travelers Experience #1

- Italian Couple (2009)
- Donor egg cycle
- Poor egg / embryo yield
- 2 blastocysts D5 -fresh ET (not pregnant)
- 1-LMor, 1-eBL (fair quality)
- Cryopreserved ? (1st µS-VTF *)
- VFET- both embryos survived and transferred
- Twin live birth in Italy 🔀 SUCCESS!

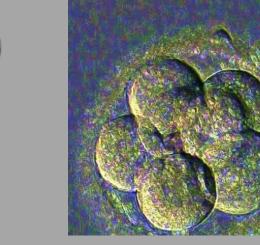




OVATION FERTILITY - NB

LABORATORY STORIES of Reproductive Travelers Experience #2

- Female Patient 32yo : decreased ovarian reserve
 - 4 eggs vitrified in Columbia
- Partner has history of azoospermia
 - 3 countries, 5 clinics No Sperm
 - Pre-TESE: Ejac ICSI-prep --- 3 motile Sperm(CCB)
 - OFNB: repeated 4-8 sperm/ejac
- 2 ICSI-PGT cycles : 4-5 eggs each
- 1st cycle : single abnormal blastocyst
- 2nd cycle : single euploid blastocyst
 - VFET- 3rd trimester pregnancy



SUCCESS!



μS

OVATION FERTILITY - NB

VFET / PGT cycles : SCCRM/OFNB 2017

	Transfers	%	
AGE	Ν	Implantation	
≤25 (DE)	24	71% *	
26-30	11	82%	
31-34	34	79%	
35-37 yo	40	83%	
38-40 yo	41	85%	
41-42 yo	14	71%	
43-44 yo	4	75%	9.5
VIT DL IECOVE	ry/survivar r	ates: 10070 / 9	9.3



* Typical annual pattern due to repeat failure recipients



OF-NB: PGT/VTF OUTCOMES

Table 1. Euploid SET versus DET Pregnancy Outcomes forPatients of Advanced Maternal Age.

Age		SET			DET	
(years old)	Implantation	Clinical Preg	Live Birth	Implantation	Clinical Preg	Live Birth
38-40	79.1%	79.1%	75.8%	68.8%	87.5%	87.5%
	72/91	72/91	69/91	11/16	7/8	7/8
41-42	93.1%	93.1%	89.7%	88.9%	88.9%	88.9%
	27/29	27/29	26/29	16/18	8/9	8/9
43+	100%	100%	100%	0%	0%	0%
	2/2	2/2	2/2	0/2	0/1	0/1
Total	82.7%	82.7%	79.5%	75.0%	83.3%	83.3%
	101/122	101/122	97/122	27/36	15/18	15/18

(Gordon et al., 2018)



6.5% of the BL tested were Day 7, they had a 36% euploidy rate, in contrast to 53.5% & 40.4% on Days 5 & 6, respectively.

	Day 5	Day 6	Day 7
# VFET	145	92	16
# Implantations	115	63	9
% Implantation	79.3% ^a	68.5% ^{ab}	56.3% ^b
% Loss	2.6% ^a	1.6% ^a	22.2% ^b
% Live births	78.6% ^a	67.4% ^a	43.8% ^b

^{a,b} Row values with different superscripts are different (P<0.05) (Whitney et al., 2018)



CBRC CONSIDERATIONS

Diagnosis

Organize all travel to US to capitalize on the days for all treatments needed for any service

♦IUI

- Advise international patient that IVF as a better alternative, especially when using donor sperm
 IVF
 - Organize alternate protocols to minimize the time needed in the US
 - Discuss failures and success to properly inform parents on future needs of OB treatment





OPTIONS FOR **DONOR SERVICES**

Frozen Eggs

Eggs can be shipped, if country allows

- Ovation Fertility Donor Services
 - Ship sperm to the US
 - Embryos are generated from requested donor
 - Guaranteed euploid frozen blastocysts
 - Ship embryos back (easier and more guaranteed than oocytes)
 - Patient never needs to leave their country.





Commercialization of infertility trade practices

- Facilitator-3rd Party agencies \$\$\$
- International mergers: Clinics & \$groups
- Marketing & Ethics
- Screening of STD's per FDA (21 CFR Part1271)
 - How to deal with unexpected results ?
- Long-term storage
 - consents, billing, discards
 - notary services
- Communications
- Accepting outside Lab vitrified samples



"Japanese RT's take 'sleeping buses' to the Yukon Territory to enhance fertility success"



The Future ?

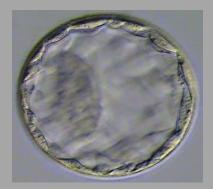


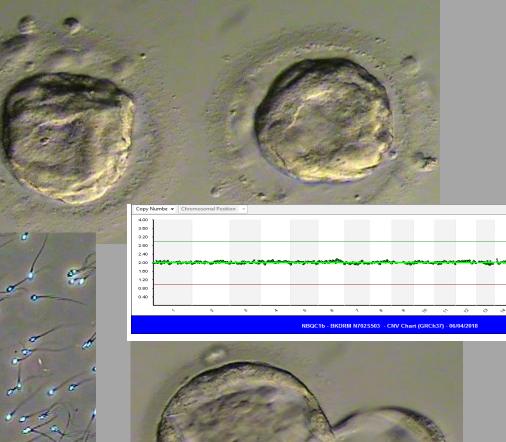


Genetic Modification: the next frontier in Reproductive Tourism ?



REPRO TRAVELER SUCCESS





ARTWORLDWIDE

A A & A A A



INSEMINATION' or **"SEET" VACATION**