

NHS restrictions prompt fertility tourism boom

Stringent NHS criteria for treatment force hundreds of women over the age of 40 to travel to clinics abroad, the first Europe-wide study of fertility tourism reveals

Sarah Boseley, health editor

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Hundreds of women over the age of 40 are travelling to fertility clinics in Europe to try to get pregnant because NHS clinics in the UK will not take them, the first-ever Europe-wide study of fertility tourism shows.

The research shows considerable movement across Europe, with women seeking out procedures that are banned in their own country. Italian women are crossing the border in droves following tough legal restrictions on IVF imposed in 2004, while large numbers of gay French women bypass a ban by seeking treatment in Belgium.

Francoise Shenfield from University College hospital in London, who co-ordinated the study, said at the European Society for Human Reproduction and Embryology (ESHRE) conference in Amsterdam that it appeared at least 20,000 to 25,000 cross-border fertility treatments were carried out each year. While one woman might have more than one treatment, there are still many thousands seeking help to get pregnancy abroad.

Hundreds are thought to be travelling from the UK every month. The most popular destinations for UK women are the Czech Republic and Spain, the top locations for obtaining donated eggs. As women get older, their eggs are fewer, and less likely to fertilise and implant in the womb. Donated eggs can be their only chance, but they are in short supply in the UK, where the rules say donors can only be given expenses up to £250. A further disincentive has been the rule change to help a child discover the identity of the donor when he or she is 18.

In Spain, by contrast, the ceiling on compensation is 900 euros and in the Czech Republic women receive 500 euros. Of the women in the study leaving the UK for treatment, 53% went to the Czech Republic and 28% went to Spain.

Dr Shenfield said that, although the UK had some of the most liberal fertility laws in Europe, there were "all kinds of barriers" to treatment on the NHS, including age and waiting lists. Private treatment is very expensive. "They might find it is cheaper to go somewhere else," she said. "London is still one of the most expensive capitals in the whole of Europe."

Infertility Network UK confirmed that many couples consider travelling because they cannot get help at home. An online survey of over 300 patients last year found that 76% would consider going abroad. The vast majority of those who went (88%) were happy with their treatment. Chief executive Clare Lewis-Jones said many patients could not get NHS care because they did not fit the "extremely tight access criteria applied by many of the PCTs".

Couples are finding clinics in Europe on the internet and even in adverts in airline magazines, she said. "I don't think it is stoppable. There is no ethical reason why it should be stopped, because it enhances the autonomy of patients. But we must concentrate on the information and make it even safer for our patients," she said.

One of her concerns was that women would have several embryos transferred in a European clinic, where in the UK the move is to have just one. Multiple pregnancies are riskier, especially for the babies who may be premature and need intensive care. "We know that women will come back with problems," she said.

The willingness of women to donate their eggs in countries with higher levels of compensation payments was a very important ethical issue, she added. "Young women may not be well enough counselled about what it means to donate eggs," she said. "The risks are very little but there is the psychology of it all – realising 10 years later when one is a bit more mature what it means to give some of your genetic input, whether you are a man or a woman."

The study was carried out in six countries during the course of one month – Belgium, the Czech Republic, Denmark, Slovenia, Spain and Switzerland – where foreign patients in fertility clinics were given questionnaires about their trip. A total of 1,230 forms were completed. The biggest proportions were from Italy (31.8%), Germany (14.4%), the Netherlands (12.1%) and France (8.7%).

Most travelled to bypass legal restrictions, but 34% of those from the UK said they went abroad because of difficulties of access to treatment. The average age was over 37 but 63.5% of the British patients were over 40.