

Canada's universal health care system should fund in-vitro fertilization

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Canada should extend universal health coverage to fund in vitro fertilization (IVF) and intracytoplasmic sperm injection, writes Dr. Renda Bouzayen, Division Head, Reproductive Endocrine and Infertility, Dalhousie University in an editorial with the *CMAJ* (*Canadian Medical Association Journal*) editorial writing team.

For infertile couples in Canada, the cost of becoming pregnant is largely private but the public health care system bears the cost of caring for mother and children. Infertility treatments are expensive, with an average cost of \$10,000 which can climb to \$15,000 to \$20,000 for women who require more medication to spur ovulation. Because of high costs, many couples choose to transfer multiple embryos, which can result in multiple births.

However, there are higher health risks for both mother and children with multiple gestational pregnancies. The mortality rate after birth is 4 times higher for twins and 6-9 times higher for triplets than singleton births. Complications such as cerebral palsy are 3-7 times more common in twins and 10 times more common in triplets.

"When those deaths and complications occur, it is the public health care system that bears the cost while the parents and children bear the grief," Dr. Bouzayen writes.

Quebec has recently introduced legislation to ensure the province's health insurance system will pay for in vitro fertilization. After Finland



decided to fund single-embryo transfers, <u>multiple births</u> after in vitro decreased from 24% in 1996 to 14% in 2002 with an unchanged live birth rate.

Canada must do the same. A cooperative, coordinated approach across the country is needed to improve health for Canadian women attempting to conceive with <u>in vitro fertilization</u> and the children who are the fruits of this technology.

More information: http://www.cmaj.ca/press/cmaj091344.pdf

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