

Expanding insurance for single-embryo IVF could improve pregnancy outcomes

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Expanding insurance coverage for a type of in vitro fertilization known as elective single-embryo transfer could lead to improved health outcomes and lower health care costs, according to a newly published study that included researchers from the University of Colorado School of Medicine.

The study, published in the journal *Fertility and Sterility*, offers a national survey of outcomes for 263,375 in vitro fertilization (IVF) cycles in the United States and finds that elective single-embryo transfer leads to fewer adverse outcomes.

The study covers nearly a decade of national data and shows that elective single-embryo transfer is more likely with insurance coverage for infertility treatment and most often results in the ideal pregnancy outcome—a single, full-term baby of normal birth weight.

"We hope that this report will help inform the ongoing discussion regarding optimal assisted reproductive technology treatments," said Alex J. Polotsky, MD, MS, associate professor of obstetrics and gynecology at the University of Colorado School of Medicine and the senior author of the article.

Historically, the transfer of multiple embryos with IVF was performed to maximize pregnancy rates, but frequently the practice resulted in twins, triplets and other multiple gestations. IVF with multiple embryos often can lead to complications caused by premature birth.

In this study, researchers evaluated factors associated with using elective single-embryo transfer and pregnancy outcomes from 2004 through 2012. The study encompassed analyses of cycle outcomes in women less than 38 years old.

While the use of elective single-embryo transfer has increased dramatically, researchers found it is more likely in states with [infertility treatment insurance coverage](#). About 48 percent of all procedures occurred in the six states with the greatest use of assisted reproductive treatments. Of those states, three (Illinois, Massachusetts and New Jersey) have the most comprehensive insurance mandates.

"These findings suggest that in circumstances with less financial risk (i.e. out of pocket expense), patients and their clinicians may be more willing to use elective single-embryo [transfer](#)," the authors write. "More importantly, this observation demonstrates the possible large-scale influence of healthcare costs on medical practice."

Provided by CU Anschutz Medical Campus

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