IVF Services for East of England
Patients as of May 1st 2009
Contents

1. Introduction
2. Policy and criteria
3. Barts and the London
4. Bourn Hall
5. Hammersmith
6. Leicester
7. Oxford
8. Links
Introduction

The East of England IVF policy and criteria was implemented from the 1st of May 2009, under the management of the East of England Specialised Commissioning Group.

As from that date all couples with in the East of England that are eligible may now be entitled up to 3 fresh NHS IVF cycles.

It is now also possible for all couples to be referred by their NHS consultant to any one of our 5 chosen centres. They are as follows Barts and the London Centre for Reproductive Medicine, Bourn Hall Clinic, IVF Hammersmith, Leicester Fertility Centre and Oxford Fertility Unit.

Within this information pack you will find details of the policy and criteria and also information on all of the 5 centres, which we hope will be of use.
East of England
Specialist Commissioning Group

Fertility Treatment Policy
1. INTRODUCTION

This commissioning policy sets out the criteria for access to NHS funded specialist fertility services for the population of the East of England, along with the commissioning responsibilities and service provision.

The paper specifically sets out the entitlement and service that will be provided by the NHS for In-Vitro Fertilisation (IVF) and Intracytoplasmic Sperm Injection (ICSI). These services are commissioned by the East of England Specialised Commissioning Group and provided via tertiary care providers.

It is the purpose of the criteria set out in this policy to make the limits on fertility treatment fair, clear and explicit. This paper should be read in conjunction with:

- The NICE Fertility Guidance (CG 11) available on their website at www.nice.org-pdfCG011niceguideline.pdf.url
- The Human Fertilisation Embryology Authority (HFEA) document The Best Possible Start to Life (2007) available on their website www.hfea.gov.uk
- The report ‘One Child at a Time’ published by the Expert Group on Multiple Births after IVF set up by HFEA available on their web site www.hfea.gov.uk/en/505.html

1.1 Review

The East of England Specialist Commissioning Group will review this policy bi-annually and within with 3 months of any legislative changes that should or may occur in the future.
2. COMMISSIONING RESPONSIBILITY

Specialist fertility services are considered as level 3 services or tertiary services. Preliminary levels 1 & 2 are provided and commissioned within primary care and secondary services such as acute trusts. To access level 3 services the preliminary investigations should be completed at level 1 & 2, see appendix 2.

Formal IVF commissioning arrangements will support the implementation of this policy, including a contract between East of England Specialised Commissioning Group and each tertiary centre. Quality standards and clinical governance arrangements will be put in place with these centres, and outcomes will be monitored and performance managed in accordance with the Human Fertilisation & Embryology Authority Licensing requirements.

This policy offers fertility treatment to couples where there are no living children in that relationship. This would include adopted children.

Couples who do not meet the criteria and consider they have exceptional circumstances should be directed to the Exceptional Treatment Policy for their local Primary Care Trust.

Couples will be offered a choice of providers that have been designated by the East of England Specialised Commissioning Group.
3. EAST OF ENGLAND FERTILITY SERVICES POLICY AND CRITERIA

TREATMENT FUNDED

The East of England commission the following fertility techniques regulated by the Human Fertilisation and Embryology Authority (HFEA)

In-vitro fertilisation (IVF)

An IVF procedure includes the stimulation of the woman’s ovaries to produce eggs which are then placed in a special environment to be fertilised. The fertilised eggs are then transferred to the woman’s uterus.

For couples requiring IVF or ICSI, up to 6 embryo transfers will be funded, using no more than 3 fresh cycles of treatment. Where a couple have more than 1 frozen embryo in storage, these must be used before a fresh treatment cycle is offered.

A fresh cycle would be considered completed once treatment has reached the egg retrieval stage even if egg retrieval is not achieved.

If a cycle is commenced and ovarian response is poor than a clinical decision would need to be taken as to whether a further cycle should be attempted or the use of a donor egg may be considered for further IVF cycles.

Couples will be advised at the start of the treatment that this is the level of service that is available on the NHS in the East of England and that the NHS will fund storage of the embryos for one year only. Patients must be counselled by the clinician and infertility counsellor to this effect. Any costs relating to the continued storage of the embryos beyond the first calendar year of retrieval, and before the commencement of the next fresh cycle, is the responsibility of the couple.

Sperm Recovery and Intra-cytoplasmic sperm injection (ICSI)

Spermatozoa can be retrieved from both the epididymis and the testis using a variety of techniques with the intention of achieving pregnancies or couples where the male partner has obstructive or non-obstructive azoospermia. Sperm recovery is also used in ejaculatory failure and where only non-motile spermatozoa are present in the ejaculate.

In obstructive azoospermia, sperm needs to be obtained directly from the testis by aspiration (TESA) or biopsy (TESE). In some men sperm can be recovered from naturally occurring spermatoceles by percutaneous puncture.

In non-obstructive azoospermia, sperm needs to be obtained directly from the testis by aspiration (TESA) or biopsy (TESE). The chance of finding sperm is reduced. PESA and TESA can be performed under local anaesthesia in an outpatient clinic. PESA does not jeopardise future epididymal sperm retrieval.
Sperm recovery techniques outlined in this section are not available to patients who have undergone a vasectomy.

**Donor insemination which would include six cycles of IUI**

Male infertility affects about 25% of all fertile couples. Until ICSI became available the main technique for treating male factor infertility where azoospermia or severe abnormalities of semen quality were present was insemination with donated sperm. The need to prevent transmission of sexually transmitted diseases (including HIV) by donor insemination has led to the mandatory quarantine of donor sperm for six months by cryopreservation prior to its use in the UK. Donor insemination may be indicated where the male partner is likely to pass on an inheritable genetic condition or severe rhesus incompatibility has been a problem because of the male partners homozygous stat.

If investigations of the female partner are normal, including tubal patency, then six cycles of donor sperm IUI should be offered before resorting to IVF treatment. If donor IUI fails then 3 cycles of donor sperm IVF (1 fresh + 1 frozen) would be funded.

**Egg and Sperm storage for patients undergoing cancer treatments**

Before commencing chemotherapy or radiotherapy likely to affect fertility, or management of post-treatment fertility problems, the procedures recommended by the Royal College of Physicians and the Royal College of Radiologists should be followed.

Men and adolescent boys preparing for medical treatment that is unlikely to make them infertile should be offered semen cryo storage because the effectiveness of this procedure has been established.

Local protocols should exist to ensure that health professionals are aware of the values of semen cryostorage in these circumstances, so that they deal with the situation sensitively and effectively.

Women preparing for medical treatment that is likely to make them infertile should be offered oocyte or embryo cryostorage as appropriate if they are well enough to undergo ovarian stimulation and egg collection, provided that this will not worsen their condition and that sufficient time is available.

**Egg donation where no other treatment is available**

The patient may be able to provide an egg donor; alternatively the patient can be placed on the waiting list, until an altruistic donor becomes available.

This will be available to women who have undergone premature ovarian failure due to an identifiable pathological or iatrogenic cause before the age of 40 years or to avoid transmission of inherited disorders to a child where the couple meet the other access criteria.
Pre-implantation of Genetic Diagnosis (PGD)

The PGD service will only be available when there is significant risk of a serious genetic condition. Couples requesting PGD must meet the same criteria as those requiring any other form of fertility treatment. The seriousness of the condition is expected to be a matter for discussion between the people seeking treatment and the clinical team.

The following factors are expected to be considered when deciding the appropriateness of PGD:

- The view of the people seeking the treatment of the condition to be avoided
- Their previous reproductive experience
- The likely degree of suffering associated with the condition
- The availability of effective therapy, now and in the future
- The speed of degeneration in progressive disorders
- The extent of social support available
- The family circumstances of the people seeking the treatment

Chronic Viral Infections

The need to prevent the transmission of chronic viral infections, during conception, such as HIV, Hep C etc requires the use of ICSI technology. This is a specialist service and is only available at a limited number of centres. The East of England Specialised Commissioning Group will commission these services from the specialist unit at Chelsea and Westminster NHS Foundation Trust.

This is may not be a fertility treatment, but should be considered as a risk reduction measure for a couple who wish to have a child, but do not want to risk the transmission of a serious pre-existing viral condition to the woman and therefore potentially her unborn baby.
4. ELIGIBILITY CRITERIA FOR ACCESSING FERTILITY SERVICES

Minimum maximum age

Any treatment cycle will not be commenced before the female is 23 years of age but must be commenced before the female reaches her 40th birthday.

Mass Body Index

The woman must have a body mass index of between at least 19 and up to and including 30.

Maximum FSH Level

A maximum FSH level of 15U/L on day 2 of the menstrual cycle.

Duration of sub-fertility

Sub-fertility must be proven before there can be access to NHS funded IVF treatment. Sub-fertility is defined as the inability to conceive after 3 years of unprotected intercourse of fertility problem demonstrated at investigation.

Previous IVF treatment

Previously private funded IVF cycles will not preclude patients from being eligible to NHS funded cycles up to a maximum of 3 cycles in total. However, lack of success in relation to previous cycles will be a factor, taken into account by the responsible medical consultant, in determining the clinical appropriateness of both the commencement and further cycles.

Smoking status

Where a couple smokes, only couples who agree to take part in a supportive programme of smoking cessation will be accepted on the IVF treatment waiting list; and should be non-smoking at the time of treatment.

Parental status

There should be no children from the couple’s relationship. This would include adopted children.

Previous sterilisation

Ineligible if previous sterilisation has taken place (either partner), even if it has been reversed.

Child welfare

Couples should conform to the statutory ‘welfare of the child’ requirements.
Medical conditions

Treatment may be denied on other medical grounds not explicitly covered in this document.

5 REFERRALS

5.1. Couples who experience problems with their fertility will attend their GP practice to discuss their concerns and options. The patients will be assessed within the Primary and Secondary Care setting.

5.2. A decision to refer a couple for IVF or other fertility services will be based on an assessment against the East of England Access Criteria which is based on the NICE guidelines and the HFEA recommendations as detailed in the clinical pathways.

5.3. Referral to the tertiary centre will be via a consultant gynaecologist or GP with special Interest (GPSI) in primary care.
Barts and The London Centre for Reproductive Medicine

Barts and The London has been providing assisted conception services for the past 25 years with excellent pregnancy rates consistently above the national average. We are licensed by the HFEA to perform intrauterine insemination (IUI) using both partner and donor sperm, IVF, ICSI, embryo, sperm and egg freezing, ovum donation, assisted hatching and surrogacy. Barts have an established donor sperm bank for use for our own patients.

Access
We are based at St Bartholomew's Hospital which is a short walk (5 minutes) from Farringdon, Barbican and St Paul's tube stations. These stations are easily accessed from Liverpool Street and Kings Cross mainline stations with journey times of 10 and 5 minutes respectively.

Services

Multidisciplinary Team
We are a large team with a well established team of 4 consultants with expertise in reproductive endocrinology, assisted conception, andrology and minimal access surgery as well as an associate specialist, subspecialty trainee in reproductive medicine and 6 clinical fellows. We have 9 full time embryologists, 11 nurses 2 counsellors and a full compliment of administrative support.

Treatments
All patients’ treatments are individualised, evidence based and consultant led. We routinely perform day 3 embryo transfers and offer blastocyst transfer as appropriate.

Andrology
We have a designated fertility /andrology clinic run by Mr Luca Sabatini who is a reproductive medicine specialist with a special interest in andrology. Our andrology service allows for the evaluation of male factor problems in conjunction with the female partner to maximise treatment outcome. Surgical sperm retrieval can be performed either before ICSI treatment or concurrently as deemed appropriate. Surgical sperm retrieval is performed either using local anaesthetic and sedation or general anaesthetic as necessary and dependent upon the requirements of the individual.

Transabdominal and laparoscopic egg retrieval
Whilst more than 98% of women are suitable for vaginal egg recovery we do have the ability to perform both transabdominal egg collections and laparoscopic egg collections as appropriate where the ovaries are not accessible by the transvaginal route.
Fast Track Clinics
All patients are seen as part of a ‘fast track’ service to allow any necessary tests such as a pelvic scan and semen analysis to be performed prior to consultation so that couples can be set up for the appropriate treatment at the time of consultation. This prevents unnecessary follow up appointments and thus expedites the process of assisted conception for couples.

Fertility preservation for women undergoing cancer treatments
We have a dedicated ‘fast track’ service for those women who wish to discuss fertility preservation prior to cancer treatments. We ask for a referral to be faxed to Mr Al-Shawaf, the lead consultant for fertility preservation, with patient contact details so that an appointment can be set up within 2-4 days.

Counselling
We have a dedicated counselling service run by 2 fully trained fertility counsellors available Monday to Friday. There is no limitation on the number of times couples can be seen.

Multidisciplinary Team work
As part of a large teaching hospital we have ready access to other specialities for advice/input regarding medical conditions and the impact on IVF treatment of visa-versa.

Out of hour’s service
An on-call pager is held by consultants for advice for those couples in treatment out of the working hours of the centre.

Emergencies
For emergency admissions after 5pm for those women who are not local to Barts, women are advised to attend their local A & E if possible but can otherwise be admitted to the A & E department at The Royal London Hospital. Patients who are found to be unwell whilst at Barts for treatment or review during the working day can be admitted to Barts Hospital if necessary. We will ensure good communication between the secondary care providing hospital and the Centre for Reproductive Medicine for those patients requiring admission locally. The incidence of moderate to severe ovarian hyperstimulation syndrome (OHSS) is very low and we do not anticipate the requirement of many admissions locally
About us

- As the world’s first IVF clinic we offer a comprehensive service which puts you at the heart of decision making
- We continue to improve our success rates and range of treatments through our research
- We use our skills to gain a genuine understanding of your individual situation and share our knowledge with you in a meaningful way
- Our team is well established, highly skilled, experienced and friendly
- Bourn Hall is more like a country house than a clinic; a ‘sanctuary’, with a relaxed and supportive atmosphere set in 22 acres of beautiful Cambridgeshire countryside. Our founding vision was a relaxing, tranquil atmosphere and a place of support. That’s why we’re not in a busy hospital. There’s time and space for people here
- Easy access by road and public transport and free parking

Beginning your Journey

- You will be invited to attend a seminar to help you understand what to expect and find out more about us
- Your experience at Bourn Hall will be unique - an exceptional journey guided by a depth of experience and caring expertise that you can get nowhere else
- Our individualised approach, treating you with the highest level of quality and care
- We will be with you all the way and should you have the need, we have three dedicated Infertility counsellors and full translation services

Where can I have Bourn Hall treatment?

- At Bourn Hall Clinic just outside Cambridge
- At Bourn Hall Clinic in Colchester
- At our outreach clinics:
  - James Paget Hospital, Gt Yarmouth, Norfolk
  - Queen Elizabeth Hospital, Kings Lynn, Norfolk

Or in a combination which suits you.
Treatments

- In Vitro Fertilisation (IVF) & associated treatments (ICSI)
- Intra-Uterine Insemination (IUI)
- Frozen Embryo Transfer (FET)
- Egg/Sperm and Embryo Freezing
- Donation

Results

Facts and figures, including the number of treatments we carry out per year and their outcome, can be found on our website. At Bourn Hall we're keen on quoting figures that apply to you personally. There is no such thing as an 'average' patient we'd like to meet you, hear about your situation and give more exact information as to what we think your chances are.

Our values

HONESTY, COMMITMENT AND ADAPABILITY

People are individuals. We assess and treat them according to their needs. We're caring, truthful and honest - we give prospective parents the best chance of a successful outcome - even when that outcome is not the one expected or hoped for at the beginning.

We are committed to providing the highest standards of treatment and care adapting these to individual needs.

PASSION AND ENTHUSIASM

People come to us with a dream of their own. Our passion matches that of those who come to us; we cared enough to be first, and our patients deserve nothing less. We're enthusiastic about what we do, and want to move the field forward - our work is about the future and growth.

TEAMWORK AND COLLABORATION

Although there is a finite number of treatments available at present, the variety of people we will meet is infinite, which makes the relationship we have with them a crucial part of the journey. That means that as well as our own team working intuitively together, we also work with our patients in collaborative partnership to ensure we care for them as individuals with a personal and human touch.
Welcome to IVF Hammersmith where our team is committed to maintaining the clinic’s reputation as a centre for excellence in reproductive medicine. We are one of the largest providers of assisted conception in the UK and are one of the few centres to offer a comprehensive service covering all forms of fertility treatment allowing us to provide treatment plans that are tailored to your individual needs.

Quality Care

Your health and welfare is of paramount importance to us. This means it is our responsibility to ensure that you are confident in our medical and scientific expertise. It means working in partnership with you, respecting your needs as an individual or couple, welcoming your feedback and providing you with additional emotional support through our counselling service.

Here you will find comfortable and spacious surroundings with a friendly and dedicated team, we enjoy a very high staff / patient ratio, with over 60 professionals contributing to your care. We were one of the first units in the UK to be recognised for the quality of our service with ISO 9001 certification.

In full recognition of the emotional needs of patients, there is free access to counselling at any time during treatment. We take a very holistic view of patient care and have lead the way in integrating acupuncture into our fertility treatments offering 'at the bedside' treatments at the time of embryo transfer.

Our patients come first

We are open 7 days a week, and also offer appointments from 7:00 am which many couples find particularly helpful as it allows them to balance treatment in their normal busy lives.

Our large nursing team specialises in the field of Reproductive Medicine so they are very aware of the stresses and strains experienced by people undergoing fertility treatment. We provide nursing cover 7 days a week with a dedicated patient helpline that is available to all of our patients. In addition you will be assigned a ‘named nurse’ and be given their email address to help with communication during your treatment.

We offer some of the shortest NHS waiting times in the country with your first consultation within 4 weeks of referral. You will then be offered a date to start treatment within 12 weeks.

The very latest clinical and scientific advances

Our clinical and scientific teams have pioneered some of the most important developments in fertility treatment. Our close collaboration with Imperial College allows us to stay at the cutting edge of new procedures such as blastocyst transfer...
and embryo selection to ensure we offer you the best chance of achieving a pregnancy. Our egg collections and embryo transfers are performed by fully qualified and experienced doctors and unlike many units we have a consultant anesthetist present to ensure that the egg collection procedure is as pain free and safe as possible. Embryo transfers are performed 7 days a week allowing us to individualise your care and advise you on the very best day to have your embryos transferred to the uterus. Our embryo freezing programme consistently produces some of the best results in the country.

We have a reputation for accepting and helping couples that may have a very poor prognosis, however these challenges do not affect our success rates. We monitor and update our results regularly and publish them on our website www.ivfhammersmith.com.

How to get referred

You should be referred by your local gynaecologist according your PCT eligibility criteria. This referral will consist of a ‘check-list’ of agreed criteria to streamline the referral process and avoid unnecessary duplication of tests. These referrals should be directed to Mr Stuart Lavery or Mr Geoffrey Trew at The Department of Reproductive Medicine, Hammersmith Hospital, Du Cane Rd, London W12 0HS; or they can be faxed to 0208 749 6973.

Contacts

Enquiries for referrals: 0208 383 4903
Enquiries for IVF bookings: 0208 383 4900
Fax: 0208 749 6973
Website: www.ivfhammersmith.com

Address: IVF Hammersmith
          Hammersmith Hospital
          Du Cane Rd
          London W12 0HS

How to find us?

We are well located with easy access by road from the M25 and M40. There is pay and display parking at the rear of the hospital. Our nearest tube stations are within a 10 minute walk (East Acton or White City both on the Central Line). Buses run every 10 minutes from both central and north London (please see our website for details).
The Leicester Fertility Centre

Services offered: Intrauterine Insemination (IUI), IVF and ICSI, Frozen embryo transfer, Blastocyst transfer

- Extensive donor sperm bank, (including ethnic minority sperm) no waiting list for treatment with donor sperm
- Short egg donation waiting list of 6 months, ability to treat with own donor immediately
- Choice of female or male medical staff
- Specialised counselling service available
- All care (including in patient care if required) by the same clinical team
- Patient information available in the following languages: Punjabi, Urdu, Turkish, Gujarati, Bengali and Somali
- Only one appointment needed at the centre before treatment starts.

Assisted Conception Unit
Kensington Building
Leicester Royal Infirmary
Infirmary Square
Leicester LE1 5WW

E-mail: enquiries@leicesterfertilitycentre.org.uk
Tel: 0116 258 5585
Website: leicesterfertilitycentre.org.uk

Clinic Details: Leicester Fertility Centre is located at Leicester Royal Infirmary, close to the city centre.
Our location makes us easily accessible by train, being a 10-minute walk from Leicester station (East Midland train services from Luton, Bedford or Peterborough). The journey times by train from Bedford, Peterborough, and Luton are under an hour. Our hospital shuttle bus departs from outside Leicester Railway Station every 30 minutes from 7am until 6.30pm Monday to Friday stopping close to the centre. We are a 10-minute drive from Junction 21 of the M1 and the A6 allowing easy commuting from Bedfordshire, Cambridgeshire and Hertfordshire.

The centre opens from 07:30 until 18:00 Monday to Friday with the ability to offer weekend services as necessary. Outside of centre opening hours there is an ansaphone for non urgent calls and a Specialist Fertility Nurse available for out of hours emergency contact.

Ground floor disabled access
-7-

Oxford Fertility Unit

The Oxford Fertility Unit (OFU) was established by the University of Oxford in 1985 and has since become a major centre for research into improving ways of providing fertility treatments. A multi-disciplinary team consisting of doctors, nurses, embryologists and administration staff deliver the highest standard of care.

- OFU consistently delivers high quality care as well as research into the area of reproductive medicine
- OFU success rates are consistently amongst the highest in the country
- OFU is the only UK clinic to offer innovative treatments like In-Vitro Maturation (IVM), a form of IVF that does not need ovarian stimulation.
- OFU is located in the new purpose-built Institute of Reproductive Sciences in Oxford
- This building is easily accessible from the M25 and M40 with 95 free car parking spaces
- We offer a wide range of fertility services including intra-uterine insemination (IUI), In-Vitro Fertilisation (IVF), Intracytoplasmic sperm injection (ICSI), Surgical Sperm Retrieval (SSR), In-Vitro Maturation (IVM), Preimplantation Genetic Diagnosis (PGD) and Screening (PGS)

Institute of Reproductive Sciences
Oxford Business Park
North Oxford
OX4 2HW

More information can be found at [www.oxfordfertilityunit.com](http://www.oxfordfertilityunit.com)

or contact:
Kate Lee, Patient Service Manager
Telephone 01865 782800
Fax 01865 782890
Links

East of England Specialised Commissioning Group
The East of England Specialised Commissioning Group (EoESCG) commissions services, including IVF, on behalf of all 14 East of England Primary Care Trusts (PCTs).
Charter House, Parkway, Welwyn Garden City, Herts AL8 6JL
Tel: 01707 369762
Website: www.eoescg.nhs.uk

Human Fertilisation and Embryology Authority (HFEA)
Licenses and monitors UK fertility clinics and embryo research.
21 Bloomsbury Street, London, WC1B 3HF
Tel: 020 7291 8200 Email: admin@hfea.gov.uk
Website: www.hfea.gov.uk

National Institute for Health and Clinical Excellence (NICE)
Independent organisation responsible for providing national guidance on the promotion of good health and the prevention and treatment of ill health.
MidCity Place, 71 High Holborn, London, WC1V 6NA
Tel: 0845 003 7780 Email: nice@nice.org.uk
Website: www.nice.org.uk

Infertility Network UK
Charity providing support and information for people who are infertile.
Charter House, 43 St Leonards Road, Bexhill on Sea, East Sussex, TN40 1JA
Tel: 0800 008 7464 Email: admin@infertilitynetworkuk.com
Website: www.infertilitynetworkuk.com