

female reproductive options

OPTION	Embryo Freezing	Egg Freezing	Ovarian Tissue Freezing	Ovarian Suppression	Donor Embryos	Donor Eggs	Gestational Surrogacy	Adoption
MEDICAL STATUS	Standard	Experimental	Experimental	Experimental	Standard	Standard	Standard	Standard
DEFINITION	Harvesting eggs, in vitro fertilization and freezing of embryos for later implantation	Harvesting and freezing of unfer- tilized eggs	Freezing of ovarian tissue and reimplantation after cancer treatment	Gonadotropin Releasing Hormone (GnRH) Analogs or Antagonists used to suppress ovaries	Embryos donated by a couple	Eggs donated by a woman	Woman carries a pregnancy for another woman or couple	Process that creates a legal parent-child relationship
PUBERTAL STATUS	After puberty	After puberty	Before or after puberty	After puberty	After puberty	After puberty	After puberty	After puberty
TIME REQUIRE- MENT	10-14 days from menses Outpatient surgical procedure	10-14 days from menses Outpatient surgical procedure	Outpatient surgical procedure	In conjunction with chemotherapy	Varies; is done in conjunction with IVF	Varies; is done in conjunction with IVF	Varies; time is required to find surrogate and implant embryos	Varies depending on type of adoption
SUCCESS RATES	Approximately 40% per transfer; varies by age & center Thousands of babies born	Approximately 21.6% per embryo transfer 200+ live births	Case reports of two live births	Unknown; conflicting results reported Larger randomized trials in progress	Unknown; higher than that of frozen embryo IVF transfers	40-50%	Similar to IVF – approxi- mately 30%	N/A
COST	Approx. \$12,000/ cycle; storage fees & pregnancy costs additional	Approx. \$12,000/cycle; storage fees & pregnancy costs additional	\$12,000 for procedure; storage fees & reimplantation costs additional	\$500/month	\$5,000-\$7,000 (in addition to costs for IVF)	\$5,000- \$15,000 (in addition to costs for IVF)	\$10,000- \$100,000	\$2,500- \$35,000
TIMING	Before or after treatment	Before or after treatment	Before or after treatment	During treatment	After treatment	After treatment	After treatment	After treatment
SPECIAL CONSIDER- ATIONS	Need partner or donor sperm	May be attractive to single women or those opposed to embryo creation	Not suitable if high risk of ovarian metas- tases Only preserva- tion option for pre-pubescent girls	Does not protect from radiation effects	Donor embryo available through IVF clinics or private agencies	Patient can choose donor based on various characteristics	Legal status varies by state	Medical history often a factor

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