

****EMBARGOED PRESS RELEASE (00.01; 06/09/18)****

#Scream4IVF – a Fertility Network campaign for fair access to IVF in the UK

Thursday September 6, 2018: The screams of childbirth are loud. But the screams of frustration from not being able to have a child can be just as loud.

Yet they are not being heard.

In the UK, 3.5 million people – or 1 in 6 couples – are affected by the devastation and pain that fertility issues wreak. Yet most local health authorities unfairly deny couples the medically recommended fertility treatment.

Today, the UK charity Fertility Network, in collaboration with London-based creative agency Saatchi & Saatchi Wellness, is launching a campaign to right this wrong.

#Scream4IVF is a campaign for fair access to IVF in the UK. It asks the British public to donate their SCREAM on social media. The campaign will give a voice to couples with fertility problems so that their frustrations can be heard.

Fertility Network aims to collect 100,000 signatures in an [online petition](#) so that the issue of unfair IVF access can be debated in the Houses of Parliament.

The screams will be collated to form THE WORLD'S LONGEST SCREAM FOR IVF, to be played at a rally outside Parliament on Wednesday October 10.

Please see the foot of this document for further information and contact details to arrange interviews with affected couples.

Why scream?

“The scale of damage infertility wreaks is vast,” says Aileen Feeney, Fertility Network’s Chief Executive. “It can destroy relationships, lead to serious mental health problems, create social isolation, and cripple people financially. Facing a life without the children you long for

means screaming in pain, despair, frustration, desperation, and rage. But these screams of infertility are not being heard. This suffering is in silence.”

In what way is current access to IVF unfair?

In England, Wales, and Northern Ireland, access to NHS fertility treatment is determined by where a couple lives, or by their social circumstances – eg, whether one of the couple has a child from a previous relationship. 98% of England’s NHS services and all of Wales and Northern Ireland unfairly ration IVF treatment.

By contrast, in Scotland, all eligible couples have access to the recommended fertility treatment of three full IVF cycles, including access for couples in which one person has a child from a previous relationship.

“In England, Wales, and Northern Ireland, couples struggling with fertility problems face an unethical and unfair postcode lottery to get access to IVF,” says Anya Sizer, Fertility Network’s Regional Organiser London. “Some couples are forced to spend their life savings or re-mortgage their house to fund private treatment. Those who can’t afford it but who still want to try for a family either have to move to an area that does enable access to NHS fertility treatment or have to travel abroad for treatment. It’s simply unfair – treatment for the disease of infertility should not be determined by your postcode.”

Why is the recommended treatment important?

The National Institute for Health and Care Excellence (NICE), the UK’s chief health advisory body, recommends three full cycles of IVF as the treatment for infertility. This recommended treatment increases the chances of a successful pregnancy by up to 53%.

The consequences of infertility include serious mental health problems, with associated long-term financial costs to the NHS.

“England was the pioneer in developing IVF,” says Feeney. “However, that achievement means far less if only those who can afford to pay for private fertility treatment benefit from this life-changing technology. The scale of disinvestment in NHS fertility services is at its worst since NICE introduced national fertility guidelines in 2004. The Government should be ashamed that, after 40 years of IVF, it is your postcode and your pay packet, and not your medical need, that are the key determinants of whether you will be able to try IVF. We urge them to take action now to change this.”

Sam Petyan, General Manager of Saatchi & Saatchi Wellness, said: “This is a campaign close to our hearts – we just had to help. People with infertility are suffering in silence. I’m confident that decision-makers in Westminster will empathise with their plight once they see how strongly people feel about this.”

For a factsheet on slashed IVF services – and some telling statistics: <https://bit.ly/2oAWVt4>

For high-resolution images and videos please access this link: <https://bit.ly/2MMJ6q0>

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To arrange interviews with Fertility Network's Leadership or with couples affected by rationing of IVF please contact Catherine Hill on the contact details above. Examples of individuals available for interview are given below.

Hugh (32), from West Sussex, had treatment for chronic myeloid leukaemia as a teenager that left him infertile. Despite having stored his sperm before treatment, he is being denied IVF because his partner has children with a previous partner.

Lauren (32), from Easy Riding of Yorkshire, could have only 1 cycle of IVF whereas just 6 miles away in Hull patients can access 2 cycles. Lauren and her partner have been forced to pay for private treatment to pursue their dream of having a family. They have spent £10,500 so far and have not yet begun their second cycle. "There's nothing more heart breaking than wanting to become a mum and it being ripped away from you," she says.

Sam (35), from Poole, has access to only 1 cycle of IVF and cannot afford to pay for private IVF. "Infertility is a disease and needs to be treated that way like other diseases," she says. "We are emotionally and physically drained. For now we can't afford to pay for private IVF so we live a day at the time with this unfair disease."

Kemi (33) was successful after her third and final NHS IVF cycle under Thurrock CCG (one of the few CCGs in the south to offer 3 full IVF cycles). She was diagnosed with polycystic ovarian syndrome as a teenager. Kemi says: "I was lucky to have been granted funding for 3 rounds of IVF and on our third and final cycle we were successful. I'm from a black African background and it's almost a taboo to talk about this. I was ashamed of my situation and then I started my blog and now, I talk about it at every chance I get."

Becky (now 40), from Hertfordshire, has a rare medical condition affecting her Fallopian tubes that means her only chance of success is via IVF. She was denied NHS treatment because her partner has a child from a previous condition. She says: "We put our heads down and worked really hard to pay for treatment privately. Our twin daughters were born on St George's day, 2016 – our miracle babies. The whole IVF stigma is so wrong and all the rules that go with it are wrong, too."

About Fertility Network

Fertility Network UK is the nation's leading patient-focused fertility charity. It provides free and impartial support, advice, information and understanding for anyone affected by fertility issues. The charity works with the media to raise public awareness of all aspects of fertility issues, to highlight the need for equitable access to NHS fertility services, and to promote the need for fertility education to protect and maintain future fertility. For more information visit www.fertilitynetworkuk.org.

Fertility Network launched the online petition to gather 100,00 signatures in collaboration with online fertility magazine IVF Babble.

About Saatchi & Saatchi Wellness

Saatchi & Saatchi Wellness (London, UK) is an award-winning specialist health and wellness advertising agency and a creative force within Publicis Health – the largest health agency network in the world. With ideas that are creative, compelling and rooted in a belief that empathy is the driving force for a healthier world, it connects people with each other and with causes that matter.

For more information visit www.saatchiwellness.co.uk/.

About IVF

During in-vitro fertilisation (IVF), ovulation-stimulating drugs are taken to encourage a woman's ovaries to produce more eggs than normal. Eggs are then removed and fertilised with sperm in the laboratory. A fertilised embryo is then placed into the woman's womb (embryo transfer).

IVF should be considered by couples who have only a low chance of conceiving otherwise. Couples with severe male factor infertility, severe endometriosis or tubal disease that affect both fallopian tubes should consider IVF at a relatively early stage. For couples with unexplained infertility or minor endometriosis, particularly

where the woman is younger than 35 years, there is a reasonably good chance of conceiving spontaneously in their first two years of trying and they should consider IVF after this period has elapsed.