

ISSUE #55 AUTUMN 2018

AFFINITY

THE MAGAZINE FROM FERTILITY NETWORK UK



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*Aileen Feeney
Fertility Network Chief Executive*

WELCOME TO AFFINITY MAGAZINE

Hello and welcome to the autumn edition of Affinity, Fertility Network's magazine.

This issue is published to coincide with the charity's annual Fertility Week, this year 29 October – 4 November. The aims of Fertility Week are threefold: it's about changing perceptions and raising awareness of fertility issues; it's also about providing support for the 3.5 million people affected by fertility problems and, finally, it's about raising much-needed funds to continue the charity's work.

Not being able to have the family you yearn for can be an incredibly isolating experience whatever stage of your fertility journey you are at: considering your future fertility, having fertility treatment, or facing life without children. That's why, during Fertility Week, we challenge the taboos and myths around infertility and highlight the devastating impact fertility problems wreak - physically, emotionally, financially and socially.

#YouAreNotAlone is the core message this year. Far too often when facing infertility, people struggle in silence and alone. Fertility Week is a chance to signal where to find help and advice,



and what kinds of support are available.

It's a fantastic opportunity to gather the fertility community. Together – sharing stories and experiences – we can change perceptions, signpost support and raise funds to help others. Together we are stronger.

#YouAreNotAlone

Please do get involved during Fertility Week. Be social: share your stories, experiences, blogs and more using the hashtags #YouAreNotAlone #FertilityWeek18 and, depending on what the focus is: #Scream4IVF #LifeWithoutChildren #FertilityFellas #FertilityatWork and #FutureFertility Share and tweet our fertility facts.

Host a Fertili-Tea party and help raise funds. Call friends, family or colleagues, bake a fertility cake or two (let your imagination run wild) and sell tea and cakes to help others. And, yes, we want to see photos of those amazing egg and sperm cakes. For a Fertiliti-Tea pack visit www.fertilitynetworkuk.org/fertilititea/

Each day of Fertility Week focuses

on a different fertility issue. On Monday 29 October we will reveal the latest figures on access to NHS IVF in England and release the latest news about #Scream4IVF – our campaign for fair access to NHS fertility treatment. Help us end the IVF postcode lottery: scream, share and sign our online petition at www.scream4IVF.org

On Tuesday 30 October we look at #LifeWithoutChildren How do you move forwards meaningfully when you have not been able to have children? We reveal exclusive research results and host two webinars.

#FertilityFellas is the focus on Wednesday 31 October. Fertility is not solely a female issue – men are half the fertility equation too – so it's time to explode some male fertility myths. Did you know the most common reason for a couple to try IVF is because of male factor problems?

On Thursday 1 November we look at #FertilityAtWork Do you know your employment rights during fertility treatment? We highlight what people can and should expect from their employer when facing fertility issues and going through treatment. Share and

tweet our fertility at work facts.

Your #FutureFertility is in the spotlight on Friday 2 November. Do you know your fertility vital statistics? For women, they're 28:35:42. 28: female fertility is already falling, 35: female fertility plummets, 42: your chance of becoming a biological mother is vanishingly small.

Friday 2 November is also World Fertility Day, which is all about education, empowerment and understanding. www.worldfertilityday.com

Fertility Week culminates in The Fertility Show Saturday 3 – Sunday 4 November at Olympia, London – the biggest and best-attended fertility show in the world. Fertility Network will be there; please do come and see us on Stand D10.

We hope you are enjoying the new style and content in Affinity, and welcome any feedback you have. Please send comments and suggestions to info@fertilitynetworkuk.org

Very best wishes
Aileen

#SCREAM4IVF

The screams of childbirth are loud. The screams of not being able to have a child can be just as loud but are not being heard. Fertility Network's Anya Sizer explains why we need your #Scream4IVF



The couple stood before me at the Fertility Show a few years ago: distraught, confused and feeling utterly hopeless. They, like so many others, desperately wanted a family and had started trying almost as soon as they had got together.

The years passed and a GP confirmed their worst fears: conception would be virtually impossible without the help of IVF. To add to the couples' distress, their local clinical commissioning group (CCG) had very strict criteria regarding access to NHS fertility services, one of which was weight loss and the need for a specific female body mass index (BMI).

The couple went away and, with the help of a local group, the woman lost an incredible amount of weight, while trying to remain hopeful and upbeat about the treatment they could soon be starting. However, on returning to the GP under a year later they

were met with devastating news: the criteria for starting treatment in their area had once again changed and she was now too old to access NHS IVF. Two people's lives turned upside down and, without the ability to self-fund treatment, any sense of hope gone forever.

Fertility funding and the #Scream4IVF campaign isn't about numbers and statistics - it's about people, real individuals who face scenarios like this every day; real people who have a real medical need and yet are forced into a postcode lottery for treatment.

It was after this conversation that the phrase 'the right to try' began to play over in my mind. A phrase often thrown at the infertility community is that no one has the right to have a baby; we at Fertility Network agree with that BUT we believe that everyone who has a

medical issue does have the right to at least try to have a baby.

That idea, that everyone deserves the right to try, culminated in Fertility Network's day of action in March 2017: we caused a stir on Twitter through a mass thunderclap, we received countless endorsements from across the political spectrum and even a huge endorsement from Louise Brown. The fertility community's voice was heard and it provided the starting point for the next chapter

After the day of action an ongoing relationship with Saatchi & Saatchi Wellness took an exciting turn. Once a year, the creative agency chooses two pro bono pieces of work and they were so moved by the Right to Try campaign that they wanted to help us make the loudest and most passionate plea for NHS IVF funding that the UK has ever seen. >



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.'

So began a year of planning and big ideas; #Scream4IVF has been an amazing project to work on and we are deeply grateful to Saatchi & Saatchi Wellness for both their practical support and championing this cause.

The aims of #Scream4IVF are two-fold: to amplify the voices of the fertility community, voices that largely go unheard and are still so cruelly misrepresented in society. Voices that cut across race, background and gender - everyone suffers the emotional impact infertility wreaks.

The second crucial aim is to get the powers that be to listen and realise the unfairness of the current system. We want Parliament to hear our voice and we want equality of access to NHS IVF. That's why our #Scream4IVF campaign was born with the tagline:

'The screams of childbirth are loud but the screams of frustration from not being able to have a child are just as loud but they are not being heard.'

I will never forget being in the room when the idea was revealed and being moved to tears by what we had all created; moved to tears because the experience of the couple above was so accurately and simply summed up. IVF rationing is cruel, unjust and is even more unacceptable in 2018 as we mark the 40th year anniversary of IVF.

#Scream4IVF launched at the start of September 2018 - collecting the public's screams for IVF and asking people to sign our online petition calling for fair access to NHS IVF in the UK. In just a few weeks we



One in six couples experience infertility

were three quarters of the way to the 100,000 signatures that will enable us to demand a debate in Parliament. Public reaction is overwhelming and celebrities including Izzy Judd, the actor John Thomas, author Peter James and Jack Thorne, the creator of the play Harry Potter and the Cursed Child have all tweeted and screamed their support.

Parliament is listening: we now have support from nearly all the major parties, with MPs across the spectrum acknowledging the need to support a more equitable way forward.

Our rally outside Downing Street is also a crucial part of amplifying our cries and we are incredibly grateful to Steve McCabe MP and Paula Sheriff MP, as well as all within the community who are screaming to have their voices heard.

We are determined to get the signatures, to collect each scream

and give people a voice and we will push to get fertility treatment fully discussed and debated in Parliament.

This campaign matters because that couple, and every couple and individual who struggle for a family matter; we are not statistics, we are people and in 2018 you WILL hear us #Scream4IVF.

How to get involved

Go to <https://www.scream4ivf.org/> sign the petition and then get anyone and everyone to sign it too.

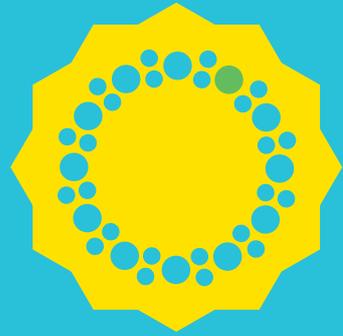
Record your scream to share on social media, encouraging others to get on board too.

Keep sharing the campaign and screaming for us all, we can cause not just a debate in Parliament but in wider society too.

Fertility Network is
delighted to introduce
the new Patient Pledge.

Find out more on
page 46 or contact
cat@fertilitynetworkuk.org.

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HOW CAN THE NHS JUSTIFY TREATMENT OF A DISEASE BY POSTCODE?

Fertility Network media volunteer Kemi Olowe on why #Scream4IVF is so important

I am an example of how access to the recommended three full NHS IVF cycles can turn a dark situation into one that brings immense joy.

When I was diagnosed at age 19 with polycystic ovarian syndrome (PCOS), I didn't think it was a big deal and the consultant certainly didn't give me the impression that I should think otherwise. He sent me on my way with the pill and I thought that was it. I thought the years of irregular periods were over; little did I know that the pill does guarantee a bleed but not necessarily a period.

When it came to trying for a baby shortly after my marriage aged 26, I received a bit of a shock when nothing happened. It became apparent that I needed to take this PCOS disease seriously.

After many visits to the GP, I was referred for fertility treatment. I remember leaving the initial consultation feeling deflated because the timeline was approximately 18 months. I was already feeling low about the situation and felt that 18 months was far too long. Hubby and I soon found out that we had conceived naturally and were taken off the list. My dream came crashing to an end as I miscarried. I was met with comments such as 'at least you know you can get pregnant', 'now you can relax', 'have a break and try again in three months'. Health professionals can be so uncaring.

Almost two years post the miscarriage - nothing. We decided to visit a private clinic and it was the consultant who asked why we were not taking advantage of the full NHS funding from our local clinical commissioning group. This was news to me because I was under the impression that we were not entitled to NHS funding: this was because, each time we asked our GP to be referred for fertility treatment, we were told: 'You're so young, what's the rush?' or: 'You've been pregnant before, so you know there's nothing wrong,' or: 'Enjoy life a little bit more' and 'just relax'.

The consultant wrote to our GP and recommended that we be put forward for funding. Normally, they would say, the rest is history, but it's not. It was not a Hollywood movie first round success with twins, nor a second round success. In total, we had three fresh rounds and one frozen transfer to have our miracle boy (all NHS funded). It was hard. It was draining and painful - both physically and

mentally. There were times when I wanted to give up... times when I wondered why I had woken up only to be reminded of the failure of a woman that I felt I was. My body didn't work on its own, and it wasn't responding to treatment... why was this baby thing so hard?

When I calculate how much money my husband and I would have spent on all our treatment, drugs and counselling, we probably would be sleeping on my mum's living room floor. That's because £30,000 plus doesn't just appear from nowhere and for those who do have it, I'm pretty sure it's earmarked for something like a home for when the children do arrive.

We were able to buy our home in between IVF cycles and the feeling of being able to do this and bring our baby home was invaluable. Infertility isn't a choice, you don't find it on the shelf like a pack of cigarettes - it finds you. It's a disease and should therefore be treated as such.



Kemi Olowe's #Scream4IVF by Saatchi & Saatchi Wellness

How can the NHS justify treatment of a disease by postcode? How can the UK government not see this as an issue - an infringement on our human rights? I see billboards, TV advertisements and so much more for things such as stop smoking and drinking - both of which are choices. While I have no issues with those who choose to make those choices, I wonder whether there could possibly be a cut in these areas and more to provide adequate and fair funding for the things we have NO choice over?

I will continue to #Scream4IVF because access to three full NHS IVF cycles gave me hope, took me out of some of my darkest days and has given me permanent sunshine in the name of Samuel.

'I'M SCREAMING AT PEOPLE TO LISTEN'

Fertility Network media volunteer James d'Souza on why he is screaming for IVF

Having a baby is arguably the most natural human experience. Have lots of sex; then create a baby. Job done. Except for more and more people this isn't the case. Add in the fact that most of the experience tends to be about the woman and here's the starting point for why I'm screaming for IVF.

As a man on a fertility journey with his wife, my perspectives, thoughts and feelings are often ignored. (I choose not to call it 'fertility treatment' or dealing with 'fertility issues' because it creates negative connotations... a journey can be as inspiring as the destination). The man's experience is a blind spot on this journey.

This is why I'm screaming.



James d'Souza's #Scream4IVF

I'm screaming for the other men with me. I'm screaming at the medical research community that chronically under-funds male fertility studies. I'm even screaming at women who think that their husband/ boyfriend/ partner doesn't want to talk. He wants to. He just doesn't feel he can because there's no space for him when talking about fertility.

My wife and I have had three failed attempts at IVF. I've been interviewed on national TV, radio and by newspapers discussing male fertility. The whole journey of fertility goes to the core of who I am as a man. At one of our previous appointments with a medical professional, I arrived with my test results from a sperm DNA fragmentation test expecting an in-depth conversation and some specific actions. What I got was: 'Oh, that's not our area of expertise; we can't help'.

I'm screaming at the medical professionals who ignore my experience.

Awareness of individual stories and experiences is what gives us hope in the 'trying to conceive' (TTC) community. Sometimes I feel, along with my anger; powerless to support my wife as her period starts again for another month, and misunderstood by other people who think they are being supportive when they say: 'Why don't you just adopt?' Hope is crucial. But no amount of hope can affect the structure

of something like the NHS. That takes starting a much larger conversation - one that needs to involve people at policy-making, government level. Fertility Network UK's campaign to get a discussion in Parliament is one of the most forward-thinking, action-oriented things to happen in the TTC community.

I'm screaming at the government to discuss equal access to IVF.

People have been filming their screams for this campaign. The first live one I filmed at the Saatchi & Saatchi Wellness offices for the campaign launch was interesting. There was a designated area with quite a few people milling around. I got out my phone, and I spoke into the camera (it was on Facebook live for the men's fertility group started by Gareth Down). I explained what I was doing, and then screamed. There was a pause of silence from the rest of the room. Most of the screams I've seen online and witnessed in real life are holding back. To really express the anger and the pain takes courage. It makes people stop and think.

I'm screaming at people to listen.

Ultimately, this campaign gives a voice to a silent conversation. It shines a light on a hidden part of everyday life that's happening around us. The number of rounds of IVF someone has had is not a badge of honour; someone's willingness to 'not give up' is not going to be effective in the long-run. It's up to us in the TTC community to share our experience authentically so people know what's happening. It's our exploration and ownership of the fertility experience and our bodies that moves the conversation forward. This campaign is a chance to effect real change. It's an opportunity for us, and the people we know and love around us, to practise compassion.

This is why I'm screaming. ■



Pop star, George Michael

YOU GOTTA HAVE FAITH

In 2010, Fertility Network media volunteer Jo Maidment appeared on This Morning to discuss her struggles with accessing NHS IVF. A few days later, she got a call from a woman named Michelle, who said she worked for a businessman who would like to fund her IVF treatment. It was only until after she gave birth that she discovered this anonymous businessman was famous pop star, George Michael. Jo tells us her story.

Hi Jo, tell us about your fertility journey before George Michael got in touch with you about paying for your treatment.

Will and I got married in 2002; I was 26 and Will was 30. We'd always said we wanted children and we were going to wait a few years and have a few holidays together. I decided to come off the contraceptive pill and assumed something would happen. After a year nothing did. So I went to the GP, Will got tested and they gave me ovulation drugs for a year to boost my fertility.

Six years down the line still nothing had happened; the doctor did other tests but could not find anything wrong with me. In 2009, I went to a gynaecologist and we were told there was nothing wrong with us. It was explained that we could try IVF, but because Will had a child from a previous relationship, we would have to pay for any fertility treatment. At this point we had been trying for about seven or eight years and we simply carried on. We thought it would just happen.

How did your experience of fertility problems affect you?

We could not afford to pay for IVF. We could have scrimped for a few years, but I didn't want to wait much longer as I was by then in my thirties. It was the emotional pain more than anything. I couldn't be around friends or family with babies, or who were pregnant. I couldn't go to supermarkets because I couldn't bear to see baby clothes. At the start I was positive, but it wasn't until we saw the gynaecologist that I felt it was never going to happen.

Did you try any sort of fertility treatment? What was your experience of that?

Nothing was available for me. The only thing I was given was the hormone tablet from the GP, but my experience of that was very negative. So, I took it upon myself to join Fertility Network. My husband was also very supportive.

Before your IVF treatment, was there ever a point where you thought you would never be able

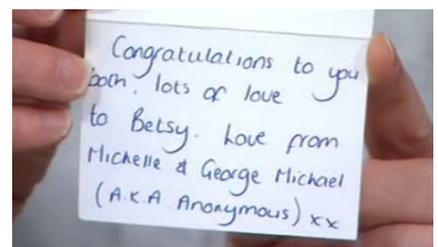
to conceive? How did you feel about that?

Deep down, although I thought I was never going to have a baby, there is always a part of you that hopes one day it will happen. It takes over your life completely.

How did George Michael become involved in your life?

I contacted the National Institute of Health and Care Excellence (NICE) to highlight how it wasn't fair that I wasn't allowed IVF simply because of where I lived in Kent [other areas of the UK do provide access to NHS IVF for couples in Jo's situation].

I wanted the unfairness of IVF accessibility out there because I knew I wasn't the only one going through this. I was watching the



George Michael's secret message

TV programme This Morning, and emailed agony aunt Denise Robertson, because I was really down about not being able to have IVF. She emailed me back and told me she did a lot of campaigning about the issue herself and she'd like to do a story about it on the show.

Tell us about your experience on This Morning.

It was amazing. Afterwards, lots of women contacted me saying they'd had similar experiences; some were now mothers. Two days later, I was at home and This Morning rang me and said a woman named Michelle would like to speak to me. She told me she was a PA for a businessman who wanted to pay for my IVF.

At first we refused to take the offer because that's not the reason why I went on the show. But then we realised it was the most generous gift. I asked if I could have his name, but Michelle told me he wanted to remain anonymous. All our contact went through Michelle: she told us to find a clinic and he would pay for everything.

In 2010, a few months after appearing on This Morning, we had our first round of IVF: it worked but I had a miscarriage after my 12-week scan. It was the worst day of my life. I told Denise and Michelle what had happened and they were both devastated; Michelle sent flowers.

We had frozen embryos, but I didn't know if I could put myself through it again, physically or emotionally. But a few months later I got a letter from the clinic telling us that, after a year, we would have to pay for storage of the embryos. I thought it would be a shame to dispose of them, so we saved up the money and had the embryo transfer at the end of 2011.

The night before I was due to take the pregnancy test, I was bleeding everywhere. The hospital managed

to find a heartbeat - I was about six-weeks pregnant. I tried not to be too happy: this was our last chance so I had to keep myself calm. This time round I didn't feel pregnant; I don't think I was letting myself. Although our 12-week scan confirmed everything was fine, I still didn't let myself enjoy the moment. But this time it was successful, and we had our daughter Betsy.

How did you find out your mystery benefactor was George Michael?

After I gave birth to Betsy, I spoke with Michelle and she congratulated me and passed on the news to our mystery benefactor. A few days later we received a massive bunch of flowers signed by Michelle and George Michael (A.K.A. Anonymous). Will and I just looked at each other, and read the note about 100 times.

I called Michelle to thank her for the flowers and asked if I had read the name on the card right. She said I had, but expressed that George Michael wanted to continue to remain anonymous, and had revealed himself to us as a kind gesture. We didn't tell anyone; not even family, out of respect for George.

We sent George lots of photos all the time. We didn't ever have direct contact, but I think if he hadn't died we probably would have done.

A year later I kept getting bad period pains. I was talking to my friend and she told me that I was glowing and she thought I was pregnant. A few days later I took a pregnancy test and it was positive. I was in absolute shock; I couldn't believe it especially as I was on the pill.

Our son Stanley was then born naturally in 2014.

Do you think he should have done it anonymously, or should he have been more vocal about his support for people with fertility problems?

He was a quiet person. He was a strong believer in random acts of kindness.

Were you a fan of George Michael?

I listened to his music - that was my era, but I didn't ever see him live. Betsy knows he was mum and dad's special friend, so she listens to his music too. She has all his CDs in her bedroom!

How would you like people to remember George Michael?

Not only was he a great musician, but people didn't realise what a kind person he was. He did so much but didn't publicise it. He did it because he wanted to. I can't ever thank him enough for changing our lives.

You are now a media volunteer with Fertility Network. Why did you decide to become involved?

I've been on the other side, so I know what it is like. People don't talk about fertility enough, even I didn't know about it before I went through it. I joined Fertility Network's community because I knew that I wasn't the only one going through fertility problems. I wanted support, friendship and advice on what to do next.

What do you think is a major fertility issue nowadays?

I don't think fertility issues are talked about enough. When you go the GP because you can't conceive, you don't expect to be told you need IVF. People don't know what it involves - the injections and hormone replacements. No one ever told me. I was rushed into hospital after my ovaries over-stimulated. You also don't know what you have to go through emotionally. You don't know what you have to put your body and relationship through. But, for me, it was all worth it in the end. ■



HAPPY 15TH BIRTHDAY TO US!

Fertility Network celebrated its 15th birthday on 5 July 2018. Fertility Network's Natalie Aminoff takes a look at how the charity has grown over the last decade and a half.

Where do I start...?

You helped keep me sane at the most challenging time of my life.

You gave me a network of people I could lean on when I felt nobody around me understood what I was going through. You helped me cope as I had to change course repeatedly to reach our goal of becoming a family.

You made me realise that I wasn't alone.

You gave me advice and information that ultimately led me down the route that gave me my amazing daughters. You helped me not to feel guilty when it worked.

You helped me connect with other people who had got their happy ever after through slightly less traditional routes. And then you gave me a chance to give back, to feel that I could help others who were feeling lost or heading down a similar journey.

You have shaped so much in the last 14 years of my life, and I honestly believe I am the person I am today, with the family that I have, thanks in no small part to your wonderful organisation and all the fabulous people within it and connected to it.

Thank you so much, and happy birthday! xxxxx

This is just one of the wonderful birthday messages Fertility Network received as we marked fifteen years providing support, advice and understanding. During the last decade and a half, there have been many changes within the charity - including our name - but our overall objectives remain constant. We are here to support, inform and advise anyone with fertility problems at whatever stage of your journey; to raise awareness of fertility issues and campaign for fair access to NHS fertility treatment, and to advance education around fertility.

Fertility Network came into being in 2003 with the merger of two charities: CHILD and ISSUE, which were both focused on fertility and childlessness. Originally called Infertility Network, the charity changed its name to Fertility Network in 2016.



Clare Lewis-Jones was Fertility Network's first chief executive

CHILD's founder, Clare Lewis-Jones, was Fertility Network's first chief executive. 'I was a volunteer for many years before I became employed, so there was always a passion there,' she explains. 'I am so proud of the charity. I know that others were just as passionate as me, so we made a great team.'

Clare led the charity until 2014 and played a major role in ensuring patients' voices were heard. Her work included the launch of Fertility Week which does so much each year to raise awareness of fertility issues with the public and media, and raise Fertility Network's profile.

Many of the Fertility Network team have direct experience of infertility. 'I'd been through my own fertility journey by the time I joined the charity,' says Susan Seenan, who, in her twelve years at the charity enjoyed the roles of communications officer, deputy chief executive and chief executive. 'I joined because of my fertility problems, as I had been through that struggle and I wanted to help other people and make a difference.'

'I believe everyone has the right to try to have a baby, and those with fertility issues don't get that choice. I believe the whole point of the charity is to get people to understand this message: that access to the ability to try should not be dependent on your postcode or purse.'

That belief underpins one of Susan's biggest and most important achievements: getting three full NHS IVF cycles for clinically eligible women under 40 in Scotland - the IVF Gold Standard. Since stepping down as chief executive in 2017, Susan is still involved in the charity as a patient advocate.

Sheena Young is another former member of Fertility Network who had a key role to play in Scotland's implementation of the IVF Gold Standard. Sheena joined



Louise Brown and Fertility Network's former chief executive, Susan Seenan

the charity in 1997 and was a key player in both her roles as regional organiser and head of business development; she left last year.

Sheena says: 'I have so many favourite memories. One is being able to see the charity being formed, as well as being invited to the Queen's garden party as a thank you for all the work we had done in Scotland. Having worked with the charity as both a volunteer and a paid worker, it really helped my own personal fertility struggle. It was more than just a job; I was helping others as well as myself. The charity meant a lot to me during my time there.'

Aileen Feeney joined Fertility Network as chief executive at the end of 2017 and has already made a huge impact on the charity developing a series of new initiatives. She's also managed to complete a 1000-mile bike ride from Land's End to John O'Groats; raising over £3,000 for the charity.

Aileen says: 'Over the last 15 years, the charity has done fantastic work and supported many people on their fertility journey. We have grown enormously and are widely respected - gaining a higher profile, campaigning for NHS funding and extending the level of face-to-face and online help and support available across the four regions. This year has seen the launch of our major funding campaign #Scream4IVF and our new fundraising focus - Fertili-Tea. Key work is also underway around implementing fertility policies within the workplace and The Patient Pledge (see inside back cover).'

'The growth of social media in recent years, with platforms such as Facebook, twitter and Instagram enables fertility conversations to reach a wider audience, and helps break down taboos and myths around the topic. Our message #YouAreNotAlone reaches far more people now, and we

hope we can continue to help people feel less alone, as one of our birthday messages [below] conveyed.'

'When I found out that I couldn't conceive naturally I felt so alone. I looked at all of these couples getting pregnant so easily and having these beautiful children; I felt isolated and low, until I found out that I wasn't alone.

Thanks to Fertility Network, I had a monthly support group and met with other couples also experiencing fertility struggles. I also had a Facebook group that I could use to ask questions, gain advice and sometimes just rant... Fertility Network helped me at a time when I needed support and a more positive outlook, and I hope it continues to help couples in the future.'

'I AM PROUD TO BE AN IVF BABY'

Fertility Network's digital communications officer Natalie Aminoff on why she joined the FN team

'My experience with Fertility Network is a special one despite only joining the charity recently. In July, I graduated with an English degree and was eager to start my career within the communications sector. Like many young graduates, I applied for job after job, many of which I did not actually care much about - until I came across Fertility Network.

Not only did the job specification seem to suit me well, but Fertility Network's agenda spoke to me. I am a product of IVF: my parents were successful with their first IVF cycle in 1996 – that's me - and my younger brother came along three and a half years later (from a frozen embryo).

I felt an instant connection to Fertility Network because it is an organisation supporting those facing struggles similar to my parents'. My mum told me that she received virtually no support from her doctors while trying to conceive via IVF, as well as during her pregnancy.

Although she comes from a very compassionate family, many of her friends, as well as her sister, had already had their children, and she did not know many people who could relate to her struggle. In short, she did not have access to a network of people who had been or were going through the same journey as her.

In joining Fertility Network, I feel as if this has come full circle. My mother did not have any support throughout her fertility struggles to have myself and my brother but, nearly 22 years later, I am able to be a part of that supportive network that my mother needed, but never received.

I am proud to be an IVF baby, and even prouder to be a part of an organisation whose sole goal is to help people at every, and any, stage of their fertility journey. Although my own parents were not able to receive Fertility Network's supportive services, as their own IVF journey started over 22 years ago, it gives me

an immense sense of joy that I am able to help people who are in similar circumstances to my parents.'

'I AM GRATEFUL FOR THAT PHONE CALL EVERY DAY'

Former fertility nurse and trained counsellor Diane Arnold runs Fertility Network's free Support Line and has been with the charity since its beginning.



Fertility Network's Diane Arnold

Fertility Network is a huge part of her life, and she is incredibly dedicated, caring and compassionate – helping hundreds of people every year, answering questions, advising or simply listening.

Diane says: 'It has been a privilege to be able to support so many people with fertility problems. I am glad I am able to share my knowledge and give the time to

those with fertility issues, that they often can't find through their clinic or GP.'

Many of the 15th birthday messages we received thanked Diane. They included:

'When I was undergoing treatment I hit an incredible low point when I was told the low grade quality of my viable embryos and that none of the others had survived for freezing; I telephoned your helpline/nurse who helped me get back on my feet and turned my negative thoughts to positive ones. I am grateful for that phone call every day.'

'You provided a source of information and insight and from those came the confidence to discuss fertility with professionals in an informed manner. So overall, you gave some element of control over choices and decisions about our options and treatment, at a time in our lives where all control and hope seemed to have been snatched away from us. Without this, and lots of luck, we may never have managed to navigate through the stormy journey to become parents. Thank you.'

Call Diane on the Support Line 0121-323-5025 between 10am-4pm Monday, Wednesday and Friday. ■



Author Lesley Pyne

FINDING JOY BEYOND CHILDLESSNESS

*More To Life coordinator Heather Whiffin reviews
Lesley Pyne's guide to finding a fulfilling life without children*

For so many, being childless by circumstance means that true feelings of grief and disappointment are denied or locked away to survive everyday life. This book aims to make readers face up to those locked away feelings in order to become who they truly want to be and thereby experience fulfilment.

Lesley Pyne, who underwent six unsuccessful rounds of IVF between the ages of 35 to 40, explains how she finally managed to 'fully show up in her life'; knowing exactly who she is. This is done with good Yorkshire honesty, without candy-coating how hard the journey will be and yet in a way that the reader still feels nurtured and guided at their pace. Lesley understands that this process is not an overnight journey and is willing to wait patiently for the reader to take small steps to their new life.

The book is divided into three main sections: call to life, finding your wings and learning to fly. All three include frank accounts from herself and 19 other women who have faced up to their childlessness, and together their intuitive insights give this book an unmistakable authenticity throughout.

These contributions will strike a chord with every childless woman and make them feel less alone. Lesley understands the grief, pain, awkwardness and isolation childless wrecks but doesn't let the reader stand still for long enough to wallow in it.

The Call to life section explores how the reader can own their story and

pain to get ready for moving on to new patterns in life. Finding your wings facilitates an uncomfortable transformation by nudging the reader to apply change at their own pace, after reading about the experiences of those who have managed it before. Learning to fly aims to support the reader in becoming comfortable in their own skin as they move forwards.

Readers should be prepared to choose how to engage with the suggested end of chapter writing activities. These can be completed quickly or given more personal commitment to achieve a deeper level of self-analysis. Doing these activities enables the reader to think deeply about their values, history and failed expectations so far, but also encourages different thinking patterns. Lesley is definite in her belief that past experiences stay with the reader but feels these shouldn't create limitations for people's future happiness and fulfilment.

This book will resonate with many because it does not isolate the grief of childlessness from other painful experiences in life. Lesley's reference to her grief at losing her parents is challenging, thought provoking and has a clear positivity running throughout that should empower many, no matter what other experiences they have encountered in the past. This book urges readers to face up to their situation and be ready to move on. It urges them to achieve that fulfilling life in which they know exactly who they are, even without the children they expected to have. ■



Finding Joy Beyond Childlessness urges individuals to acknowledge their feelings about childlessness

CAN YOU HELP SUPPORT PEOPLE WHO ARE STRUGGLING WITH FERTILITY ISSUES BY DONATING TO FERTILITY NETWORK UK?

Donate to Fertility Network UK and help us continue to provide our free support services to anyone affected by fertility issues.

Choose a one-time donation or sign-up for monthly giving. Contact our fundraising team at fundraising@fertilitynetworkuk.org for more information about how your contribution will help.

We receive no guaranteed funding, and no matter how much you can donate, it will make a difference to us. Last year our free Support Line alone dealt with almost 6,000 enquiries. We want to do even more. Thank you.

VISIT WWW.FERTILITYNETWORKUK.ORG/DONATE.



fertilitynetworkuk

Charity Registered in England No. 1099960 and in Scotland No. SC039511



BREW LIKE YOU'VE NEVER BREWED BEFORE

Everything seems better after a cup of tea, so we're asking people all over the UK to host their own Fertili-Tea party, selling tea and cakes to friends, family and colleagues.

Cat Strawbridge, Fertility Network's head of fundraising.



The first Fertili-Tea party: left to right Anya Sizer, Fertility Network's regional organiser, Andreia Trigo, fertility coach, journalist Ami Wyllie and Jessica Hepburn, founder of Fertility Fest

Fertili-Tea's aims are twofold, says Cat. Firstly, it's about getting people together raising funds to help us support the 1 in 6 couples with fertility problems. Just as importantly, it's about raising awareness of the prevalence of fertility issues, challenging some common fertility myths and making new fertility friends.

But don't limit it to people who have experience of infertility: invite your friends, family and work colleagues. The more people that attend a Fertili-Tea, the more people find out about fertility issues which will help to break any taboos.

Hosting one is straightforward. Make sure to download the Fertili-Tea information pack at fertilitynetworkuk.org/fertilitea. This includes a Fertili-Tea event poster, a Fertili-Tea quiz and Fertili-Tea donation forms.

Then choose your venue and style of Fertili-Tea: perhaps your friend's house at the weekend for Fertili-Tea brunch, or an afternoon Fertili-Tea party with family members or a Fertili-Tea Friday lunchtime at your place of work. You may want to have people speaking at your event, or organise a Fertili-Tea quiz or raffle; it's up to you.

Andreia Trigo, a fertility coach and Fertility Network media volunteer,

organised the first ever Fertili-Tea event earlier this summer in London. 'Our goal was to raise money for Fertility Network,' Andreia says.

'However, I also got the chance to meet people, share stories and put faces to names. It was a very emotional event, and the support and warmth between everyone was truly incredible. It made me realise that we need more face-to-face events.'

Her Fertili-Tea featured speakers including Jessica Hepburn, founder of Fertility Fest and Anya Sizer, Fertility Network's regional organiser, and Andreia hosted a raffle and quiz with prizes.

'It was such a nice afternoon for both men and women,' says Andreia. 'It was a safe place where people were able to talk to each other. Amazingly, for the first Fertili-Tea event, we had booked a room for 45 people, and it was completely full.'

Andreia encourages anyone thinking about holding a Fertili-Tea to go for it. 'It doesn't take as much time or effort to organise as you may think. The outcome is so rewarding: you get to meet people and hear their stories. It's amazing: everyone supports one another along the way.'

FERTILI-TEA AT CARE

Fertility clinic CARE has also joined Fertility Network's fundraising efforts and hosted their first Fertili-Teas on 23 August at all seven of CARE's UK clinics. 'Fertili-Tea is not only a great way to raise money and awareness for a brilliant cause, it also encourages people to come together and have a bit of fun,' says Sophie Lott, marketing assistant at CARE.

'We have seven clinics across the UK, and it can sometimes be quite difficult to organise all staff members in seven different locations. Everyone's always busy, but, like most people, everyone at CARE has a little bit of time to spare for cake.'

One of our embryologists is not only great at making babies, she's great at making cupcakes as well. One of our receptionists has been making jam for years and provided us with plenty to fill some tasty scones. And you can't forget those who had the most important role... the cake eating. They couldn't have done a better job - a truly fantastic effort from all. ■

Thank you to everyone at Care Fertility!



CARE's first Fertili-Tea event on 23 August 2018



TOP TEN TIPS FOR HOSTING FERTILI-TEA PARTIES

1 Download Fertili-Tea information

fertilitynetworkuk.org/fertilitea

2 Have a supportive team

Fertility Network members and volunteers will be able to help you during preparation and on the day.

3 Choose a venue

Try and pick a space that is pleasant and private. People will feel more comfortable attending and sharing their experiences.

4 Approach organisations and experts

Contact organisations and experts who would like to attend, share their knowledge or contribute to goodie bags.

5 Share your event on social media

And ask your friends, family and experts to share it too. You can also use Eventbrite or Meetup to keep track of any bookings.

6 Put up posters

This will be a visual reminder for all members of staff to bring in lots of nice treats on the day, and not to forget their spare change. Images of cupcakes and biscuits are always helpful.

7 Send reminders

For example, send emails to all of those expected to attend, as well as mention it to people you speak to in conversation throughout the day. If you mention cake, no matter what time of the day, people will listen.

8 Download the Fertili-Tea quiz to hand round on the day

Everyone loves a quiz. No matter if the answer is right or wrong, it's a fun activity.

9 Remind everyone why you are holding the event

Let people know about the work Fertility Network does to help those struggling with infertility.

10 Don't forget to have fun

Everyone loves a cup of tea and a bit of cake, so you can't go wrong when hosting your own Fertili-Tea. Make sure everyone is catered for: provide vegan and gluten-free options so everyone can enjoy the food.





Fertility Network's
Northern Ireland
regional coordinator,
Hilary Knight

SPOTLIGHT ON NORTHERN IRELAND

*Fertility Network Northern Ireland coordinator
Hilary Knight presents a round-up of what's been
happening in the country*

It's an exciting time here in Northern Ireland with so many new developments taking place alongside all the continuing support available.

We recently welcomed Rachel Ross to our team as our new support coordinator Northern Ireland. Rachel will be providing support for our service users and developing several new projects; she has an extensive medical background and will be a great asset to us.

In addition, a big thank you goes out to all our volunteers who make such wonderful contributions in helping to support our projects and support groups, including professionals who come to speak to groups, and those who take the time to talk to others in distress or those in need of a chat from someone who understands.

The Department of Health announcement of equality of NHS treatment for same-sex couples, which previously had not been available (see article on page 38 for more information) is wonderful news and something we have been lobbying hard for.

We've recently launched our autumn programme of fertility groups and workshops, there's a range of topics and the programme also includes another free four-week Living Life to the Full CBT-based life skills programme. Many previous participants have found this CBT-based course had a lasting positive impact on improving their coping skills.

Fertility Network Northern Ireland supports many people on a personal, one-to-one basis but we are also working on new projects with a wider scope.

Fertility in the workplace: we are talking with large employers keen to develop better policies and a greater understanding of fertility in the workplace. The aim is to help employees reduce the stress surrounding taking time off for fertility treatment and having to disclose the story of their fertility journey.

Information for health professionals: we are working to identify new ways to reach health professionals and GPs. This is in addition to our existing annual Northern Ireland GP newsletter, which has vital information about the referral process to fertility specialists, the criteria for IVF treatment, information on the emotional impact of trying to conceive, and details of our support services.

Your future fertility: we are piloting the very successful education project for young people in order to improve awareness of the factors that can affect your future fertility.

Fertility Week is approaching – 29 October – 4 November - and our #Scream4IVF and additional local campaigns are going well. To keep up-to-date with support and details of events happening here you can go to the Fertility Network Northern Ireland page www.facebook.com/FNUKNI/ or go to the FNUK website www.fertilitynetworkuk.org or get in touch by email at hilary@fertilitynetworkuk.org or rachel@fertilitynetworkuk.org. ■

Family is for everyone

Whether you're looking for help starting or growing your family, our world-leading fertility group has spent decades developing new tests and treatments to give you the best possible chance of success.

more than
29,000
CARE babies
born so far

With love from CARE
X

Birmingham • Dublin • London • Manchester • Northampton • Nottingham • Sheffield • Tunbridge Wells

WHAT IT FEELS LIKE TO LOSE YOUR FERTILITY THROUGH CANCER TREATMENT

In February 2018, news broke that human eggs had been grown for the first time in the laboratory – a scientific advance that in the future may mean more options for fertility preservation for cancer patients and improved fertility treatments. Fertility Network media volunteer Ruth Pawsey, who lost her fertility as a result of cancer treatment, told the Independent newspaper how fertility and cancer have affected her emotionally and physically, and her hopes for future research. We reproduce her words here, with permission.

“When you first get diagnosed with cancer, you assume that this is the worst day of your life: the fear, the unknown, the feeling that the word “cancer” surely can’t be related to you. I was 32 years old, and being told that I had cervical cancer was absolutely impossible to understand.

That shock and pain is immediate and terrifying – but in actual fact, it’s over pretty quickly. Once you know how far it has spread and your treatment plan has been agreed, then the night terrors tend to stop and you find yourself caught up in a whirl of hospital visits, a lot of waiting around and an awful lot of trying to take your mind off it, by any means.

The dull ache you’re left with is much harder to deal with. You know that those closest to you have been shaken to the core and feel powerless to help you – and

you can’t help but feel responsible. The fear I saw in my husband’s eyes is something that I will always carry with me.

Immediately after your diagnosis, no one really knows how to treat you, or what to say. There is a lot of talk about “fighting” and staying strong. As an only child, I felt pressure to get through to the other side as I knew what the alternative would do to my parents.

I have always known that I wanted to be a mother. I’m ashamed to say that it was something that I took for granted – I assumed that my time would inevitably come. In the days and weeks immediately after my diagnosis, I was so focused on staying alive that I didn’t really consider the long-term implications of losing my fertility.

Initially I had a procedure called a trachelectomy, which is the removal of the cervix and tumour. It leaves the uterus in place, in an attempt to preserve fertility. Sadly, this wasn’t successful and I had to have a hysterectomy as the cancer was particularly aggressive.

Physically I recovered quite quickly from the surgery and all I am left with is a few scars on my abdomen. I have been lucky to escape the potential side effects, which for many can be devastating. Emotionally, things have proved a lot tougher. I was determined to “be OK” as soon as possible – but this meant I pretended that I was all right until I reached the point where I couldn’t pretend any longer.

Sometimes I feel angry about all of the things that I have lost, but mostly it’s just a sadness that is ever-present. I will never get

BECOME A MEDIA VOLUNTEER FOR FERTILITY NETWORK AND MAKE A REAL DIFFERENCE

Being a media volunteer for Fertility Network involves being potentially willing to share your fertility story with the media when a media request appropriate to you comes in to the charity's press office. If you are one of our media volunteers, a member of the Fertility Network communications team would then contact you by phone or email to ask if the particular topic was one you were happy to comment on. If it is, we then put you in contact with the member of the press.

Media requests can be for television, radio, print or online, can be live or pre-recorded at your home or work address, or at a media studio; pictures are often

requested too. You can stipulate which sectors of the media you are happy to speak with and which not. Anonymity may be possible.

Fertility Network relies on media volunteers to help raise the awareness of fertility issues with the public. It is a vital role: often the media will not cover a story unless they have the human angle too – the person who is willing to talk about how they are, or have been affected by fertility issues.

If you would like to be a media volunteer for Fertility Network, email Fertility Network's head of communications Catherine Hill at media@fertilitynetworkuk.org

and please provide the following information, if possible.

- How old are you and your partner?
- Where do you live?
- What stage of your fertility journey are you at?
- How long have you been trying to conceive?
- Have you been able to access NHS treatment?
- Do you know the nature of your fertility problems?
- Are you happy to do telephone, TV, and/or radio interviews, and be identified by name and/or photograph?
- What is the best phone number and email to contact you on?

to share the moment with my husband when I tell him that I am pregnant. We will never go to our first scan with the excitement and anticipation that new parents have. I won't get to experience pregnancy and feel that sense of pride at growing a new life. I will never see the look on my husband's face as he holds our child for the first time; all of this breaks my heart.

The long-term emotional impact of losing your fertility is a huge thing to carry around. Friends are kind and encourage you to think about adoption and while this of course is a way to become a parent (notwithstanding the rigorous process), it dismisses the anguish you feel about not being able to carry your own child.

As time moves on, the pain doesn't lessen – but the way in which I deal with it changes. I

hope one day to reach a point of acceptance, but it's a while off at the moment.

I avidly follow all new published research relating to fertility and I think the developments that have occurred this week provide hope and comfort to women who find themselves in my position. It is encouraging to know that the unlucky cards I have been dealt will not necessarily mean that the chance of being a parent has been taken away. The fact that human eggs have been grown in a laboratory for the first time gives me hope that advances are being made which will mean more options in the future.

However, it's important to note that if I could have a baby tomorrow that was genetically mine and my husband's, that still wouldn't lessen the pain of not being able to conceive, carry and

give birth to that child naturally. That is and will remain particularly hard. That is the card I have been dealt. ■



Fertility Network media volunteer, Ruth Pawsey, lost her fertility as a result of cancer treatment

WHAT TO EXPECT WHEN YOU'RE NOT EXPECTING

Emily Phillips is features director at Grazia magazine and a woman struggling to become a mother. She talks to Fertility Network about writing her first book TRYING

'When you pin your colours to the mast and say one of your main life goals is to have a baby, you're really putting yourself out there. And that's what I did this year, when, upon the release of my debut novel TRYING, I admitted that the two things I'd really wanted all along were to write a book (check) and have a baby. But at that point, the second was very clearly eluding us.

When I pitched the idea for "a comedy about trying for a baby and failing" – including the pratfalls of a regimented sex life, and warts and all medical tests – I wasn't sure anyone else would be laughing apart from me. Because you need a good dose of dark humour to get through years and years of trying for a baby when everyone else around you seems to be popping them out left, right and centre.

But it seems there are plenty of both women and men who feel the same. That the emotional

rollercoaster of wanting something so much which you just can't seem to grasp, will be peppered with furious, tear-stained lows, but will also have a lot of ridiculous, laugh out loud moments which will bring you so much closer to your loved ones.

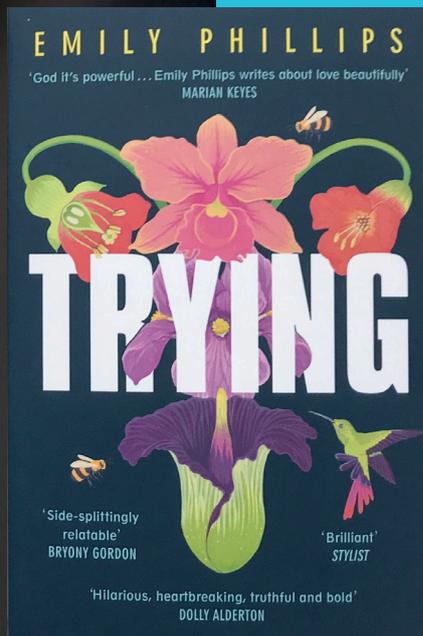
Possibly writing the book two and a bit years into our crusade to have a kid was throwing yet another stressful obstacle in my way (tell a woman battling infertility to calm down, or just relax at your peril – it will not end well!), but the catharsis I had at putting it all down on paper was more than worth the six months of working every night and weekend alongside my full-time job at Grazia magazine.

It allowed me to vent all of those moments that I could never confess to with friends who'd got lucky on the first month they'd popped unprotected P into V, or the frustrations of being the designated child-wrangler at

parties because all of the parents were too worn out to do their own clown-work. In getting those silly moments out in the open, it allowed me to lighten the load and the mood as I entered into "the serious bit" of actually having fertility treatment.

It also allowed me a bit of perspective about why it was I wanted this so much. To look at the societal pressures in your thirties to tick all the boxes, to have it all, to have it looking Instagram perfect and right on time. I was lucky I'd met the man I wanted to spend the rest of my life with, but what if that was tested – there was plenty of room for drama in deconstructing how some relationships can crumble when faced with all of this expectation.

Ridiculously, as if I'd planned it all along (oh, the irony), two weeks after the hardback came out in January, we completed our first round of IVF and it took.



'IT WASN'T SUPPOSED TO BE THIS WAY'

An extract from TRYING by Emily Phillips, with permission of Hodder & Stoughton.

'As we laughed through our vows in Mum and Dad's favourite gothic church, I mentally granted us a six-month reprieve – honeymoon, buy a house, enjoy youth for a few more moments – before I'd come off the Pill and immediately ruin our lives with sleepless nights and fiscal cuts.

That first month, I was so convinced I was pregnant that I ate nothing but pickles for seven days and seven nights. After three negative pregnancy tests, all I was left with was bad indigestion. I blamed the backlog of hormones from a decade of contraception. Just a couple more months. Then came 'the black period'. It wasn't a bleak time, just an actual black period, ten days late.

In those nine interim days, I resisted every urge to test – I was not tempting fate this time – so I sat on my hands, went for runs, froze my Boots Advantage card in a shallow ice tray. Again, my hackles were up: I must be pregnant this time. No other symptoms apart from the passage of time.

When I eventually bled what looked like tar, I began to think I may have developed the zombie plague. I visited the GP 'just to check in.' Admitting you've been trying for four months raises little more than a chuckle from medical practitioners, so I was shamed into silence after that.

From months five to nine, it all gets a bit murky. The fun sex wasn't working, so instead, we proceeded with military intent. Except a sergeant-major barking at a flaccid penis – especially when said penis has just moved house and resigned from his dream job at The Times to go and earn 'proper money' as an agent – doesn't get major returns.

We couldn't even look each other in the eye. After four months of trying and failing to even initiate anything, we wrangled with the sex elephant in the room, settling into the groove we now call home: cycle after cycle of bland sex, blind hope, then abject failure.

I was astounded. So, just as the paperback comes into the world to tie in with Fertility Week, our baby girl is also due.

This year we've celebrated 40 years of IVF but there's still so much work to be done. We got lucky having one round of NHS-funded fertility treatment, but not every couple in the country will even get that chance. That's why I'm sharing my #Scream4IVF this autumn to help other people access the treatment for which we are eternally grateful.

TRYING by Emily Phillips is out in paperback October 18 (Hodder & Stoughton, £8.99). ■

COME FLY THE CLYDE... OR CYCLE ACROSS COUNTRY

Fertility Network relies on donations; that's why we want to say a massive thank you to all our fantastic fundraisers who have bravely completed so many challenges – running marathons, zip-wiring across the River Clyde and cycling the length of the country - to raise money to help everyone facing fertility issues

Running and baking have both provided a focus for Caroline Stafford who completed the Manchester marathon in April this year, and recently won the Big Marathon Challenge in Women's Running magazine.

Caroline began trying for a baby in 2011, when she was 31, but quickly realised it wasn't going to be as easy as she had hoped. Sadly, she was not successful with ovarian stimulation or IVF, developed ovarian hyperstimulation syndrome and had to face the devastation of miscarriage. 'After five years of gruelling fertility treatments,' says Caroline, "my husband and I decided it was time to accept that it's very unlikely that we will be able to have our own children, as heart-breaking as that is, and to begin to try to figure out how to embrace the life we have, as we are.'

While going through her fertility journey, Caroline turned to running as a way of relief. It was not only a way for her to deal with her frustration, but a chance for her to celebrate her body rather than be ashamed of it.

She says: 'I spent so long feeling upset by my body and by what my body was supposed to do, but couldn't. I wanted to celebrate my body for what it can do. It's so easy to focus on the negative, but it's

important not to miss out on all the good stuff.'

Caroline decided to fundraise for Fertility Network because of what the charity means to her. 'For me, it's the perfect charity and very close to my heart... it does such a good job of raising awareness and helping you,' she says.

If you're thinking of taking up a challenge, she advises to 'pick something you enjoy doing; find a challenge you've always wanted to do. Then just do it! If you haven't told people what you're going through, it's a nice way of letting people know without having to talk about it. I was amazed at how generous people are, and this only motivates you further to raise for a brilliant charity.'

Caroline's struggles also inspired her business: the Kitsch Hen. 'I was absolutely 100 per cent determined to make something positive from what had happened,' she says. 'The whole idea behind the Kitsch Hen is 'edible inspiration' biscuits that arrive through the letterbox to remind someone that they are loved, and supported and encouraged and that they aren't on their own - it somehow makes sense of our situation if I can use it to help others feel a bit better.'

FLYING FOR FERTILITY

Fertility Network Scotland faced the challenge of zip-lining across the River Clyde: 150ft high and 1000ft across. Around thirteen volunteers and members of staff took part in the flying fundraiser and, although many had a fear of heights, it was an exciting day for all and something to tick off their bucket list.

Fertility Network Scotland's volunteer co-ordinator Emma Farrell was one of those taking part. 'I am new with the charity, says Emma, 'but I am aware of fertility issues. I've had friends of mine who have gone through IVF, one of them being in the LGBT community, and their journey has been even more difficult.'

'Issues of fertility are not directly addressed in mainstream narratives. This encouraged me to apply for this job, and it's my dream role. I was told on my first day about the challenge, and I'd always wanted to do a zipline; not only for myself, but also to raise awareness and funds for fertility issues and Fertility Network.'

On a less scary fundraiser the embryology team at Glasgow Royal Hospital baked cakes to celebrate IVF's 40th anniversary, with all proceeds going to Fertility Network.

'It's always good to do something that is going to challenge you.'

Biscuit entrepreneur and marathon runner Caroline Stafford



To cap off our summer, Fertility Network Scotland facilitated a very successful fertility options event, with some fabulous guest speakers and informative exhibitors in attendance.

FERTILITY CYCLE

In September, Fertility Network's chief executive Aileen Feeney, together with her partner Mark, completed an amazing 1,000-mile cycle ride from Land's End to John O'Groats in just two weeks - raising almost £3,500.

'I think it's always good to do something that is going to challenge you,' says Aileen. 'And a challenge is different for every

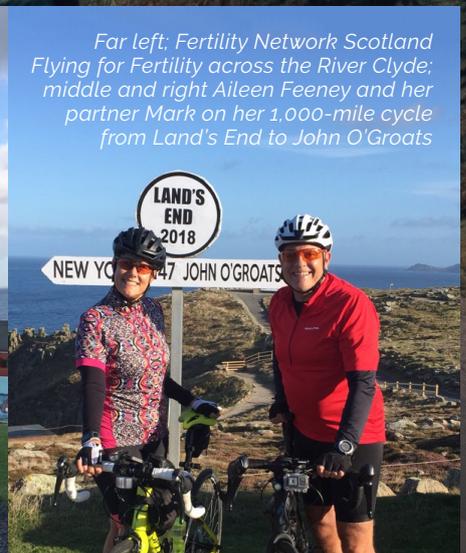
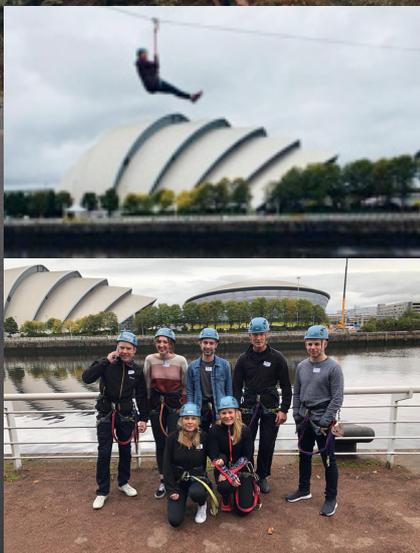
person. For some people, that challenge may be a 5K run, but for me it was this 1,000-mile cycle.'

A challenge won't be necessarily physical for everyone, but as an individual I love pushing myself and being outdoors. Plus, the fact that you are doing it for a good cause gives you that extra incentive to go out and train, because you know people have supported you to raise funds.'

If you're considering taking up a fundraising challenge, then don't forget to let us know about it. Email Maria at fundraising@fertilitynetworkuk.org and share your story and pictures.

Emma has these words of encouragement: 'If you are keen to

fundraise let your imagination fly and get creative. Don't be afraid to think outside the box. It's that out of the box, creative thinking that inspires the passion for fundraising. It's precisely because of this passion that we've been able to do the #Scream4IVF campaign, Flying for Fertility and Aileen's 1,000-mile cycle. If you are nervous, just believe and trust in yourself. Don't let your fears affect you, let your actions be guided by hope and not by fear.' ■



Far left: Fertility Network Scotland Flying for Fertility across the River Clyde; middle and right Aileen Feeney and her partner Mark on her 1,000-mile cycle from Land's End to John O'Groats

HAPPY 40TH BIRTHDAY TO LOUISE BROWN AND IVF

On 25 July 1978, Louise Joy Brown – the world's first IVF baby – was born. Since then more than 300,000 babies have been born in the UK via IVF, and worldwide it's estimated around eight million babies have been born as a result of fertility treatment.

On 25 July 2018, Fertility Network joined with many other organisations and individuals to mark 40 years of IVF. It was a time of celebration of 40 years of a life-changing technology, but it was also a moment to pause and reflect that IVF does not work for everyone and there are millions more people who have experienced IVF but have not become parents as a result.

Commenting in the press, Aileen Feeney, chief executive of Fertility Network said: 'The IVF story over the last 40 years is miraculous: developments in IVF technologies coupled with improvements in IVF success rates mean an estimated 8 million babies have been born worldwide. But there is a dark, often unacknowledged, side to the IVF story: fertility treatment still fails more than it works and much more needs to be done to provide support for the emotional impact

of infertility, and in recognising the trauma involuntary childlessness wreaks.'

'Sadly, IVF's scientific advancements have gone hand-in-hand with an increase in rationing of medical treatment based on arbitrary and non-medical criteria such as where you live. If Louise Brown's parents wanted to try NHS IVF today, they would be turned down by the vast majority (83 per cent) of England's clinical commissioning groups on social rationing grounds: although Mrs Brown was clinically infertile, Mr Brown had a child from a previous relationship.'

'England pioneered the development of IVF but that achievement means far less if the people who benefit from this amazing, life-creating technology are determined by their postcode or pay packet. Fertility Network

urges the government to take action now – or we are creating a society where only the more affluent will have access to IVF.'

'Looking ahead to the next 40 years, Fertility Network wants to see girls and boys being taught to value and protect their fertility; men being recognised as half the fertility equation, and a greater openness around talking about fertility problems.'

Aileen's message was covered extensively across national and regional media: TV, radio, print and online. As a result the Fertility Network team were seen on Sky News, BBC Breakfast and the Victoria Derbyshire show, to name just a few, and were at the opening of the Science Museum's IVF is 40 exhibition in London. It was an incredibly busy week and one we will not forget. ■

"It is very strange to think that those cells dividing in a petri dish 40 years ago became me! Patrick Steptoe and Bob Edwards suggested my middle name 'Joy' because they said IVF would bring joy to so many people. That joy is still spreading today. My heart also goes out to those for whom it has not been successful,"

Louise Brown



Top: Louise Brown, the world's first IVF baby. Bottom: Fertility Network's head of communications Dr Catherine Hill on the BBC breakfast sofa with Professor Adam Balen (far left), the BBC's Dan Walker (centre right) and Louise Minchin (far right)



WHAT DOES IVF MEAN TO YOU?

As the world marked IVF at 40, social media gave a voice to everyone with experience of IVF – good and bad. Here are some of your thoughts and feelings.



“ IVF gave me my world. ”

“ IVF ruined my life, my marriage, I'm over the fact I'll never have children but I'm still angry, resentful and bitter... every day I wonder what if... why me??? I'm happy for all those it worked for but it was a killer for me... No one ever talks about when it doesn't work. ”

“ Without IVF I wouldn't have my family that I longed for – for 11 years. ”

“ IVF changed my life. It didn't work for us; in fact, it left me with a myriad of health problems. But it confirmed what we thought in the first place: adoption was right for us and we were right for two wonderful (challenging!) children. Adoption is far from the easy route and it's not right for all but so far, despite the very difficult times, it has been right for us. ”

“ IVF has been both the worst and best thing that has ever happened to me! Five years TTC. ”

No NHS funding. Various drug combinations, add ons, and then fifth lucky! We prayed for a miracle... and got two! ”

“ Wish I could afford IVF, nearly 40 and TTC for nearly 15 years; feels like my dream will never come true. ”

“ So glad we kept going: three rounds and we were only given a 10% chance. Due in February. ”

“ IVF was the worst thing I have ever put my family through for absolutely nothing but heartbreak. ”

“ It's the reason my purse is empty, my weekends a blur of early mornings, dance classes and chauffeuring and, most importantly, the reason my heart is complete. IVF was the most stressful, heart wrenching and exhausting experience but one I would do again in an instant. ”

“ I tried it three times, suffered two miscarriages. It is the hardest

thing to do, and even harder to decide to stop. I still wonder if we should have tried more times, but know I couldn't have done it. ”

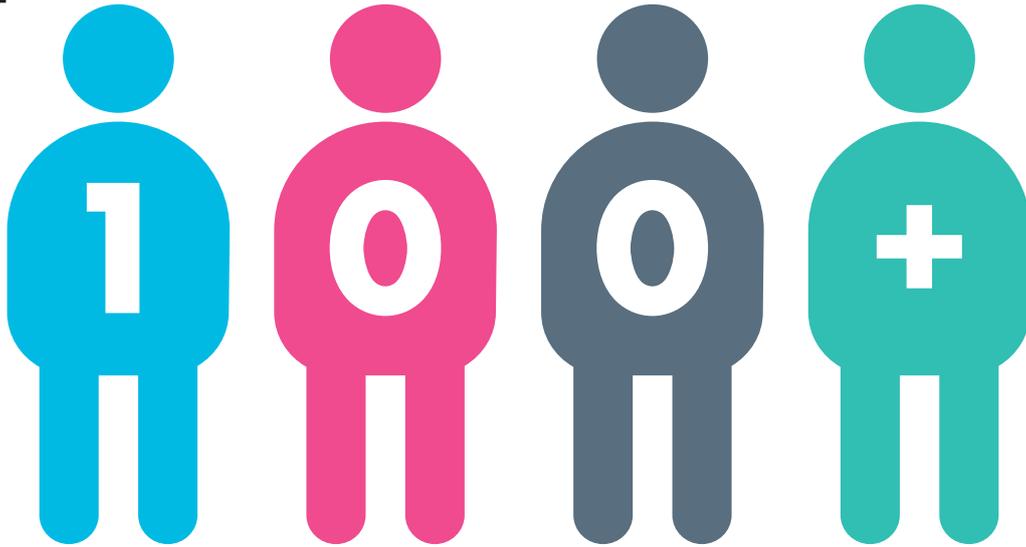
“ Stress, heartbreak, hope. ”

“ Put myself through IVF four times, last try with donor eggs but all failed. Only now, just over a year of hell since hearing those words 'it's never going to happen for you', am I starting to turn the corner. ”

“ Our little miracles arrived after five early miscarriages, an 18 week loss, a 20 week loss and 10 years of hell; three unsuccessful IVF cycles. After being told there was no point continuing with my own eggs, my best friend stepped up to be our donor. ”

“ Our little miracles arrived on Christmas morning 2005 and made our lives complete. We are thankful every day for the wonderful science that is IVF. ”

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Dr Shipra Krishna

HOW EVIDENCE-BASED MEDICINE DELIVERS PERSONALISED FERTILITY CARE

Consultant gynaecologist Dr Shipra Krishna is director of London IVF and Genetics centre. She is passionate about bringing the latest science and research to her patients; here she discusses evidence-based medicine.

Evidence-based medicine has been in the spotlight in recent months. At patient events and in specialist meetings the talk has been about evidence-based medicine – about fertility treatment add-ons and the evidence or not for them. But is it clear what is meant by evidence-based medicine?

We are living in an information age where sharing and democratising information is becoming a routine part of daily life - whether this information is about sharing holiday photographs or fertility treatment experiences. Via the internet, patients around the world can share their treatments and experiences.

However, when the information is shared without a full understanding of perspective and context, it may in fact cause undue anxiety. That's why it is vitally important that patients understand what 'evidence' means; and how it is generated and applied in their treatments. What are the different types and levels of evidence, and how does this evidence influence the recommendations made by fertility specialists?

The term 'evidence' in medicine refers to findings and conclusions from various research studies. In science, every new idea or pioneering intervention is supported by scientific research

before it can be used in patients.

Before any practice, intervention or medication is introduced, it is subjected to preliminary assessment. This may be by conducting preliminary animal studies or small pilot studies in humans to understand both the beneficial and harmful effects.

A research study will ask a specific question, and a good study has a very precise question that it is seeking to answer. Then the researchers will describe in detail how they will conduct the study. This is sometimes referred to as the study design, and is where the healthcare professionals decide

the level of evidence.

There are many aspects that form part of the study design. This includes defining who is included or excluded; whether there will be a control group of study subjects, the defining intervention; how data will be collected and analysed, and the findings.

Each of the models has its own strengths, limitations and feasibility issues in different settings. For example, a randomised double blind controlled trial may not be suitable for pioneering technology. Similarly, if there are many reported studies for a particular problem, then a review or meta analyses approach may work well.

Studies may also vary in terms of how the data is collected. For example, a prospective study is one where the data is collected as the study is being conducted. Retrospective studies are those where the data has been collected from patients mainly during the course of treatment, and is being analysed retrospectively.

There are many levels of evidence. They can range from reporting unusual findings to having large randomised controlled trials with hundreds and thousands of patients. In some studies, in order to exclude any researcher's bias, the researchers may be blinded about the study subjects or their interventions.

There are even more robust studies where data from many studies on a particular topic is brought together and analysed again. These are called systematic reviews. Such reviews have the advantage of having lots of data subjects and hence may be more relevant. So a lot of thought, effort and planning takes place even before a study starts.

That's why, when someone says that something is not evidence-based medicine, it does not

necessarily mean that the patients are being offered treatments that have never been tried and tested. It may be the case that they have been tried in small sized studies. Even when interventions are being tested out in preliminary studies, all participants are fully informed. They will give written consent to participate in studies. Once the preliminary studies have been safely completed and if relevant, then the intervention is rolled out to a wider group of patients.

At the end of a study, the findings are presented to a wider audience of specialist and patient groups. Most healthcare professionals keep themselves updated on such developments in their specialty. They will assess the findings of the study and decide as to which patients or clinical circumstances these findings can be safely applied. Application of this information in treating patients is evidence-based medicine.

Besides knowing about evidence, it is important that clinicians have an in-depth understanding of their patients. Each patient presents a very unique set of circumstances. These can be clinical or non-clinical. They all have different wishes, preferences and beliefs. They have differing attitudes for trying newer interventions that may not be supported by randomised controlled trials or systematic reviews. Some patients would be more open to trying newer interventions even when the data may be from small studies.

In my opinion as a clinician, the key to practising evidence-based medicine is having an in-depth understanding of patients and evidence. It starts with a thorough understanding of a couple's clinical circumstances and then applying the best available research evidence in their context. This not only requires a thorough clinical assessment, but also knowing the patient or couple's wishes, preferences and beliefs. It is

only after that, that the research evidence can be mined and applied to their unique set of circumstances.

Finally, evidence-based medicine is all about communication. Communication with patients is the cornerstone of evidence-based and personalised fertility care. The patient is at the centre of care and they need to develop a sound understanding of these very complex scientific concepts.

It is the clinician's responsibility to simplify and communicate the applied evidence in simple jargon-free language. This should lay clear the background of the circumstances, context and perspective.

In my experience, I cannot emphasise enough the need to offer patients multiple opportunities to discuss and assimilate this information. They should have enough opportunities to ask questions so that they are making truly informed decisions.

Effective communication is vital in striking a healthy balance in informing patients without causing anxiety. It is a dynamic process wherein both specialist and patients work in partnership in deriving the best solution for their unique circumstances. That in my opinion is truly evidence-based medicine.

I was very pleased when the BBC Panorama programme initiated the dialogue about evidence-based medicine. However, I have been disappointed that little effort has been made to help patients understand what evidence-based medicine means and how it can truly lead to personalised fertility care. I firmly believe that more needs to be done to empower our patients and offer truly personalised fertility care that leads to better treatment outcomes and experience. ■

NORTHERN IRELAND ANNOUNCES NHS IVF FOR SAME SEX COUPLES... AS BURY CUTS ACCESS

The lack of access to NHS fertility treatment continues to make news in England, although there was better news from Northern Ireland.

Northern Ireland's Department of Health confirmed at the end of September 2018 that same sex couples will be able to access NHS fertility treatment. The Health and Social Care Board is finalising the updated eligibility criteria for all people seeking NHS fertility treatment, and these amended eligibility criteria will be made available as soon as they are finalised. It is not yet clear what the criteria will be for proving infertility; current age and body mass index criteria will still apply.

Hilary Knight, Fertility Network's Northern Ireland regional coordinator said: 'This is wonderful news for same sex couples in the region. We have been campaigning for a long time for this move towards equality for same sex couples and will continue to campaign for fair access to IVF and related fertility treatments for all in Northern Ireland.' Northern Ireland currently only funds one partial

IVF cycle (one fresh and one frozen transfer) for clinically eligible women under 40.

This good news sadly coincided with Bury clinical commissioning group (CCG) announcing its plans to cut the number of NHS-funded IVF cycles it offers from three to just one (for new patients, effective from 1 October 2018).



Have you signed the #Scream4IVF petition at www.scream4ivf.org

This was despite a consultation showing an overwhelming lack of public support for the cuts, which are estimated to save only £170,000 /year.

The news of the cuts in Bury has particular significance because Bury CCG was one of only 11.5 per cent of England's CCGs that provided the nationally recommended three full IVF cycles. Bury was also one of only four CCGs in England that provided the IVF Gold Standard: three full IVF cycles plus access to NHS treatment if one of the couple has a child from a previous relationship (84 per cent of England's CCGs practise so-called 'social rationing').

Commenting on the news, Aileen Feeney, Fertility Network's chief executive said: 'Fertility Network is appalled that Bury health bosses have cut the number of NHS-funded IVF cycles available to

patients in the area from three to just one cycle, when the national recommendation is for three full IVF cycles for women under 40. Access to fertility treatment should be dependent on your medical need – and not your postcode or pay packet. It is even more disappointing that they have chosen to cut provision rather than try to reduce the amount they are paying to providers of the service.'

Aileen added: 'We are extremely concerned about the effect that reducing access to NHS IVF will have on already distressed patients. Infertility is a devastating disease which can cause depression, suicidal feelings, relationship breakdown and social isolation; removing the recommended medical help is cruel and economically short-sighted.'

'Not treating fertility problems properly costs the NHS a lot of money: through an increase in life-long mental health problems, and by increasing the likelihood that more patients will travel abroad for reduced cost fertility treatment – a move that is highly likely to drive up the number of multiple births which are of high risk to mother and babies and incur additional long-term medical costs. These costs could be saved if national guidelines were followed.'

National Institute of health and care excellence (NICE) guidance recommends three full cycles of IVF for women under 40 years and one full cycle for women aged 40-42. According to NICE, a full cycle of IVF treatment should include one round of ovarian stimulation, followed by the transfer of any resultant fresh and frozen embryos.

In Scotland, women under 40, including couples with children from previous relationships, can access three IVF cycles – this is

the IVF Gold Standard. In Wales, women under 40 are entitled to two cycles, including couples with children from previous relationships.

There is a move towards sustained disinvestment in NHS fertility services in England. The vast majority of England's CCGs – 88 per cent – do not follow national guidance and do not offer three NHS-funded IVF cycles. Seven CCGs have decommissioned NHS IVF or suspended all treatment, while 62 per cent of CCGs offer just one NHS IVF cycle. Approaching one in ten CCGs is currently consulting on reducing or decommissioning NHS fertility treatment.

Fertility Network lobbies hard for fair access to NHS IVF – see the article on page 6 of this edition of Affinity about the charity's #Scream4IVF campaign; have you signed the #Scream4IVF petition yet? You can help in other ways too.

Contact your local politician – by email, letter or tweeting. In order to make this as straightforward as possible for you, we have prepared some draft letters, see fertilitynetworkuk.org/for-those-trying-to-become-parents/nhs-funding/campaign-for-equitable-treatment/ If you are comfortable doing so, it is helpful to include details of your personal situation: how fertility struggles affect you physically, emotionally, financially and socially.

If you are unable to access three full IVF cycles and are happy to share your story with the media in order to raise awareness of these issues, email Fertility Network's head of communications Catherine Hill at media@fertilitynetworkuk.org with brief details of your situation and contact information. ■



Fertility Network's Hilary Knight (far right) with Kellie Armstrong MLA (centre) and Fertility Network's Rachel Ross (far left) at Stormont

BEER GOGGLES AND SPERM IN THE BUCKET

Throughout September, Fertility Network Scotland visited universities and colleges across the country as part of the charity's focus on fertility education. Fertility Network's Natalie Aminoff finds out more

If you were starting university in Scotland this autumn, you may have been lucky enough to try out the charity's alcohol awareness goggles which disorientate vision and, while wearing them, play a fun game 'throw the sperm in the bucket' with members of the Fertility Network Scotland team. This gives the team the opportunity to chat with students about lifestyle factors, including sexually transmitted infections (STIs), which can affect fertility, and provide advice on how to protect it.

Over 1,000 students shared their fertility knowledge through a survey and the results are worrying. More than two-thirds of students (71 per cent) indicated that they were not aware of lifestyle factors that may affect their future fertility. Just 29 per cent said they were aware that the following lifestyle factors could impact their fertility: smoking, alcohol, illegal substances, STI's, age and steroid use.

Age has the greatest impact on fertility. However, only 1 per cent of students surveyed said they believed that age had the

biggest impact. Smoking was the most popular answer: 7 per cent of students thought it had the greatest impact on fertility.

Sharon Martin is Fertility Network Scotland's branch coordinator; she spoke with many of the students and feels students do not understand the impact of age on fertility due to celebrity culture and social media. 'Young people are definitely influenced by celebrity culture. I don't think the amount of celebrities that have babies in their early 40s helps. I think it gives people a false sense of security.'

The survey results clearly suggest the need for more fertility education. However, after talking with the Fertility Network Scotland team, the overwhelming majority of those questioned (94 per cent) said that they will give more consideration to present and ongoing lifestyle choices which could affect their future fertility.

Raising awareness about fertility issues in young people is not solely about planning future fertility: it is also about improving awareness of the impact of infertility on an

individual's mental health. Sharon notes: 'Fertility Network's 2016 study looking at the impact of infertility revealed 42 per cent of people experiencing fertility struggles had felt suicidal. I want to raise awareness of the effects on infertility on mental health too.' ■



Fertility Network Scotland's Sharon Martin ready to speak with students during Freshers' Week in Scotland

WALES FERTILITY INFORMATION & WELLBEING DAY

Fertility Network's Welsh team takes a look at what's happening in the coming months and looks back on highlights of the year

Christmas can be an especially difficult time of year for those facing fertility issues, that's why Fertility Network will be running the Fertility Information & Wellbeing Day on Saturday 1st December 2018.

Come and join us at the largest and most comprehensive fertility and wellbeing event in Wales for accurate information, expert advice and to hear talks covering many aspects of fertility, all in one place. The free event brings together NHS and private clinics, practitioners and support agencies.

Join us to pick up information and discuss clinical and donor treatment options, surrogacy, fertility counselling, nutrition, complementary therapies, male fertility, alternative family options, and local support services. Get face-to-face support and expert impartial advice on coping strategies and ways to look after yourself over the Christmas period and beyond.

- Time: 10am-3:30pm
- Venue: Park Plaza Hotel, Greyfriars Road, Cardiff.

For more information and to register your interest, contact Alice alice@fertilitynetworkuk.org or call 075563 734808.

Our Swansea fertility group welcomes new members and has a series of expert talks lined up from specialist consultants, fertility nurses, nutritional therapists, embryologists and complementary therapists. There will also be a number of other social events over the coming months.

There's a new fertility group in Newport which meets on the fourth Thursday of every month and a new group in Cardiff which looks to specifically meet the additional needs of black, Asian and minority ethnic women (BAME). Plans are underway too for a fertility group for people affected by cancer; this will launch at the beginning of 2019.

For details of all our fertility groups in Wales, contact Wales coordinator Alice Matthews: alice@fertilitynetworkuk.org 075563 734 808.

#ProudToBeMe

Were you at PrideCymru this summer? Fertility Network was proud to be there for the very first time. The wonderful #ProudToBeMe celebration attracted over 40,000 people, and Fertility Network were kept busy on our stall sharing information and support. See you again next year. ■



Wales coordinator Catherine Dunn (right) with Lynda Mizen, fertility counsellor, Wales Fertility Institute on the Fertility Network Wales stall at PrideCymru 2018

MTL: A MUTUALLY UNDERSTANDING COMMUNITY

Heather Whiffin is More To Life's new coordinator – she takes a look at what's in store in the coming months

Many adults find themselves facing the fact that parenthood is not a choice available to them. Fertility Network's More to Life (MTL) offers an inclusive community for them

It has been an exciting time to become the new MTL coordinator. This community increasingly recognizes the power of sharing experiences and insights as they come to terms with their status.

There are two areas of main focus as 2019 approaches: maintaining the success to date of the 2018 webinar series and extending the MTL meet-ups to meet increasing demand and serve more members.

2018 saw our webinar series cement itself as a popular event. Bringing expert speakers into members' homes every month, these webinars offer anonymous interaction and a chance to watch recordings on demand if live sessions are missed.

In July, we were lucky enough to host Jody Day of Gateway Women as she explored the grief that childlessness can bring. In August, Stephanie Phillips prepared us for World Childless Week in September 2018. In the coming months our guest speakers include Jessica Hepburn and Lesley Pyne.

For many years MTL meet-ups have played a key role in helping members enjoy social interaction. They provide solace from uncomfortable situations, questions and conversations that our childless community can be exposed to in wider social circles.

We have a small group of local contact volunteers who have taken on the mantle of organising these vital social meet-ups in key areas. Many have been involved since the very first meet-up, and have a wealth of experience in creating a welcoming and inclusive ethos.

MTL continues to offer its core support services. These allow members to choose both the type of service and level of engagement that they require. Those with busy lives can access our 24/7 online support forum, while our support line can give direct access to a trained nurse.

Our MTL volunteers are trained to receive calls and listen to concerns and frustrations. Our monthly e-news continues to provide features about significant events and any other pertinent information via email for those who have subscribed.

We understand the importance of choice about our member's level of personal engagement with our

materials. When first trying to accept one's childless status, some prefer to quietly read about the experiences of others. Others may instantly feel at ease about openly sharing their personal journey. Our community is underpinned with a mutual understanding that each unique experience and situation will provoke a different reaction and sense of ease in participation.

As MTL grows and develops to meet the needs of members, there is one thing that is certain. Every effort will be made to continue to select the best type and highest standard of support for our members. ■



Heather Whiffin, More To Life's new coordinator

INTRODUCING THE FERTILITY EDUCATION INITIATIVE

The Fertility Education Initiative (FEI) is committed to increasing awareness of fertility and reproductive health in people in the UK and was formed by a group of people who came together to recognise that education focused on fertility must be improved. part of the charity's focus on fertility education. Fertility Network's Natalie Aminoff finds out more

Jessica Hepburn, founder of Fertility Fest is one of the FEI's members (others include Fertility Network and the British Fertility Society). She talked to us about the FEI's Modern Families project – a collaboration between Fertility Fest, University College London's Institute for Women and Cardiff University's school of psychology.

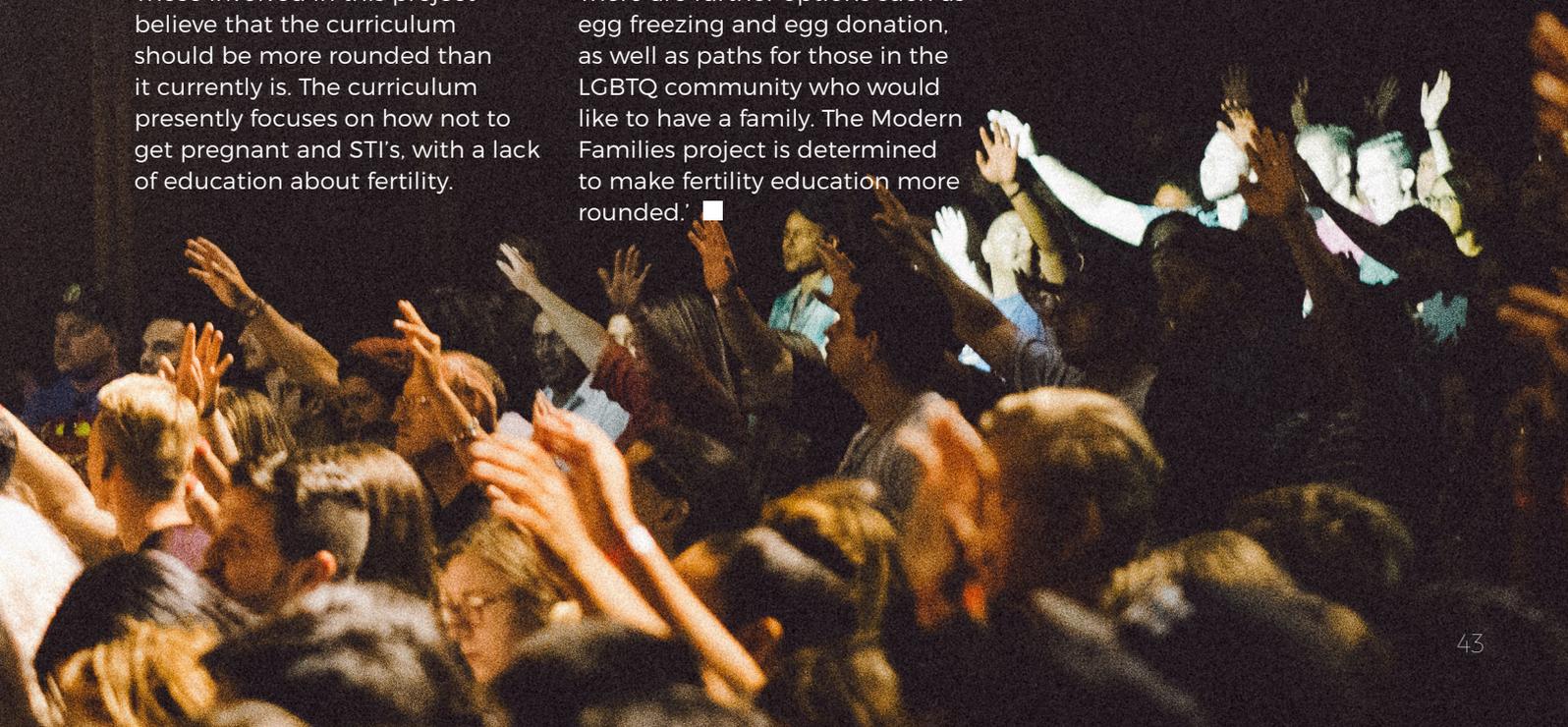
'The Modern Families education project is focused on improving fertility education among young people, particularly through school. Relationship and sex education have become compulsory within schools, and the government are currently consulting on the curriculum.

Those involved in this project believe that the curriculum should be more rounded than it currently is. The curriculum presently focuses on how not to get pregnant and STI's, with a lack of education about fertility.

Results have shown that many young people do not understand that their fertility is declining all the time, starting in their late 20s. One of the implications of the lack of fertility education is that young people are not aware that IVF does not work all the time or for everyone.

It is true that times are changing, and more and more women who haven't met the right partner are able to embark on alternative fertility routes such as single parenthood with sperm donation. It is so important that there are conversations for young people such as this, so they have the option to plan for their future.

There are further options such as egg freezing and egg donation, as well as paths for those in the LGBTQ community who would like to have a family. The Modern Families project is determined to make fertility education more rounded. ■



THANK YOU TO ALL OUR CORPORATE & CLINIC PARTNERS



University of Aberdeen

Voted 'Scottish University of the Year 2019', the University of Aberdeen's multidisciplinary research centres and institutes bring together experts at the cutting-edge of their fields to work with colleagues across the UK and beyond

* (The Times and Sunday Times Good University Guide)



GCRM - Belfast

GCRM-BELFAST is an independent fertility clinic which can provide patients with access to the very latest fertility treatments. Patients will also benefit from the sharing of best practice and scientific resources across an experienced scientific and clinical team.



IVF Spain

IVF Spain is a leading fertility clinic in Spain with some of the highest success rates. Your fertility journey can be a challenging, lonely and sometimes a distressing one – throughout your journey we are committed to reducing unnecessary stress by providing a consistent, high level of care, treatment and support.



Barcelona IVF

Barcelona IVF is a fertility clinic led by professionals with broad experience in assisted reproduction. We work with the latest technologies and advances in the field to offer an effective and bespoke service for our patients.



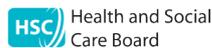
The Fertility Show

The Fertility Show has been created solely for people who need information and advice on fertility. The show is a safe and discreet environment in which to learn and listen to experts, with a speaker programme that offers unparalleled access to the best minds in fertility.



Lister (HCA Healthcare)

The Lister Fertility Clinic is widely recognised as one of the leading fertility treatment centres in the UK. Established in 1988 under the leadership of our clinical director, Mr Hossam Abdalla, it has maintained its reputation for success with over 16,000 'Lister' babies born.



The Health and Social Care Board

The Health and Social Care Board (HSCB) is a statutory organisation. We arrange or 'commission' health and social care services for the population of Northern Ireland.



IVI

IVI employs over 2,000 health professionals providing care across 60 plus clinics in 11 countries worldwide. Founded in Valencia, Spain in 1990, IVI has delivered more than 126,000 births over the past 26 years. IVI is now available at its clinic on Wimpole Street in London.



Ovusense

Ovusense is an ovulation monitor which has been proven in independent clinical trials and over 10,000 cycles. With 99% accuracy, Ovusense detects and confirms ovulation, even with irregular cycles or PCOS.



Pharmasure

Pharmasure is a UK company that provides fertility treatments for people wanting to build their own family. We think of ourselves as a family of experts with an in-depth, specialist knowledge of the therapeutic area of reproductive medicine.



Vitabiotics Pregnacare

The UK's No.1 pregnancy supplement brand, providing nutritional care from conception throughout pregnancy and beyond. Pregnacare Conception has been specifically designed to support the nutritional requirements of women trying to conceive.



Sheffield Teaching Hospitals

Sheffield Teaching Hospitals NHS Foundation Trust is one of the UK's largest, busiest and most successful NHS foundation trusts. We provide a full range of hospital and community services for people in Sheffield, as well as specialist care for patients from further afield.

The Corporate Partnership scheme brings together Fertility Network UK and businesses working in the field of fertility and beyond. We develop close, effective relationships and work together in our role in the provision of care, treatment and support of those experiencing fertility problems.

We would like to thank all of our supporters including our Gold, Silver, Bronze and Friend Level Partners.



Access Fertility

Access Fertility works with top UK clinics to provide IVF payment programmes and treatment plans. Our programmes will help you manage costs, improve your chances of success by committing to more than one cycle of IVF and give you the peace of mind that you have a plan in place.



Agora Clinics

The Agora Gynaecology & Fertility Centre in Hove is a state of the art clinic offering individualised expert fertility, early pregnancy and female health care within a unique caring and supportive environment.



BioMaternity

Biomaternity specialises in therapeutic techniques of infertility treatment with high-tech laboratory equipment. Start your journey with us today by sending us an email quoting 'Fertility Network UK' for a free consultation.



Casméd International

Casméd International has been producing high quality devices for use in all aspects of infertility and is now considered a world leader in this field. We have worked closely with infertility centres to design and develop a growing range of products that are relevant and of high quality.



Stork (Ceutah Health Care)

The Stork home conception kit can help you optimise your chances of conceiving naturally. Based on the cervical cap insemination technique, it is designed to help couples with common fertility difficulties by placing semen closer to the cervix for longer.



Egg Donation Friends (IVF Media)

EggDonationFriends is an online platform created for fertility patients interested in IVF with donor eggs or surrogacy. Its purpose is to assist patients in making well-informed decisions when selecting fertility treatment abroad. Our services are free and always will be.



Embryolab

Embryolab is a Greek Fertility Clinic, operating in Thessaloniki, in the northern part of Greece, since 2004. Embryolab's team consists of highly specialized doctors, embryologists, and scientists of various specialties with great expertise and experience in the assisted reproduction.



Fertility Clinics Abroad

Fertility Clinics Abroad can help find the best IVF clinic abroad to suit your needs. Our website has lots of facts and figures on clinics in Europe which enables patients to compare features and costs in order to make informed decisions about treatment.



NewLife IVF Greece

We are one of the leading IVF clinics in Greece providing the full range of fertility investigations and treatments, including a highly successful egg donation programme. Our superior experience with international patients as well as our high pregnancy rates make us one of the most popular IVF clinics abroad.



Fertility Podcast

The Fertility Podcast was launched in September 2014 by Natalie Silverman, an established UK broadcaster, who wanted to give a voice to infertility. The podcast provides a safe place for men and women to understand more about their route to parenthood and realise they aren't alone in their struggles.



FIV Marbella

FIV Marbella represents new concept of fertility clinic, a multidisciplinary group of professionals united with one aim, to achieve your maternity. Formed by a team that brings together medical professionals with over 20 years' experience in assisted reproduction, embryology and infertility treatment.



Irema

Established in Beniarbeig in 2005, our highly skilled and experienced medical team are supported by the most up-to-date technology and scientific advances in assisted reproduction. We offer treatments from conventional IVF to fertility preservation, or egg and sperm donation.



IVF Matters

IVF Matters was the UK's 1st Online Fertility Clinic set up by a multidisciplinary team of specialists in Fertility, Urology, Endocrinology, Haematology, Genetics, Nutrition and Counselling. We offer face to face consultation in the comfort of your home by way of a Skype call or telephone call.



My Bee hive

Our purpose is to provide a hub of information for anyone going through the roller coaster that is baby making, whether it's through natural conception and you just need a little help and support, or through a highly monitored and medicated fertility program in a clinic.

THANK YOU TO ALL OUR CLINIC OUTREACH PARTNERS

We are committed to working closely with all clinics in the UK. Working together we can show our joint commitment to patients and to ensure they have all the help, support and information they need to help them through the difficult journey that comes with having fertility problems.

*We would like to thank all of our Clinic Outreach partners who have supported us to date. Going forward the Clinic Outreach programme will be phased out and replaced by **The Patient Pledge**. We look forward to introducing you to this new partnership soon.*

Aberdeen ARU
Bath Fertility Centre
Cambridge IVF
City Fertility
Complete Fertility Centre Southampton
Concept Fertility Clinic
Edinburgh ACU
Glasgow Centre for Reproductive Medicine
Glasgow Nuffield
Glasgow Royal Infirmary, ACU
Homerton University Hospital
Jessop Fertility, Sheffield
Newlife Clinic
Ninewells Hospital, Dundee
Nuffield Health Woking Hospital ACU

Nurture Fertility, Nottingham
Oxford Fertility Unit
Poundbury Fertility
Regional Fertility Centre, Belfast
The Bridge Centre, London
The Hull IVF Unit
The Leeds Centre for Reproductive
Medicine
Wessex Fertility

Thank
you! 

Has your clinic taken the pledge?



The Fertility Network UK is introducing The Patient Pledge to help all fertility clinics to support, and show their commitment to, the emotional wellbeing of their patients.

LOOK FOR THE LOGO AT YOUR CLINIC

Birth rates are important, but what makes a great clinic is about more than just statistics. It's about being cared for by compassionate staff, feeling like you are part of the conversation about how to progress your treatment and receiving exceptional emotional support.*

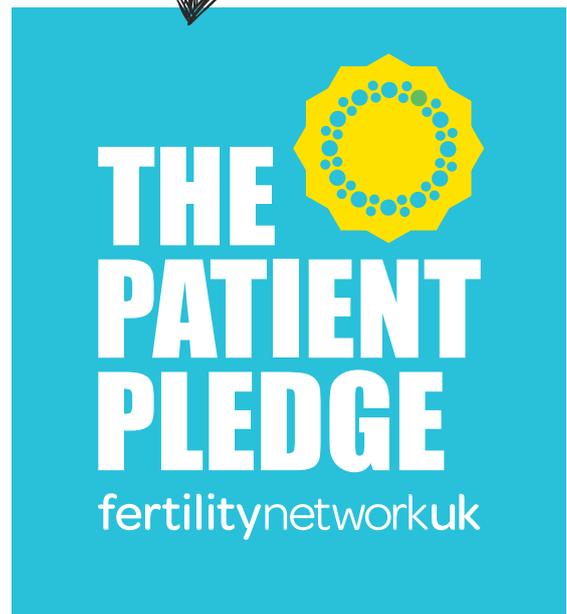
Fertility Network UK is the patient charity offering free, impartial support and advice to anyone facing fertility issues. Fertility awareness has increased significantly over the last few years, together with the understanding of the devastating and long-lasting impact infertility can have on an individual's emotional and mental health. This is encouraging; however Fertility Network wants to do more because we believe greater support for patients throughout their fertility journey is a positive step for their wellbeing.

Fertility Network aims to work with fertility clinics so that together we can provide exceptional emotional support for patients at all stages of their journey.

If you are a fertility clinic and would like to take The Patient Pledge please contact cat@fertilitynetworkuk.org or call 07960 537156.

Are you a fertility patient? Has your clinic taken The Patient Pledge? If you haven't seen the certificate in the waiting room make sure you ask them to contact us to find out more.

* hfea.gov.uk



The Patient Pledge launch clinics

*Bourn Hall
(Cambridge, Colchester, Norwich, Wickford)
CARE Fertility
(Nottingham, Birmingham, London, Manchester,
Northampton, Sheffield, Tunbridge Wells)
CRGH Fertility Clinic (London)
Fertility Plus
Herts & Essex Fertility
London IVF and Genetics
London Women's Clinic (London)*

We'll be welcoming more clinics soon!



**find the time
to drink
more tea***

*** and help us make a difference.**

Fertili-Tea is Fertility Network's fundraising event in support of those facing fertility challenges. Everything seems better after a cup of tea so we're asking people all over the UK to host their own Fertili-Tea afternoon, selling with tea and cakes to your friends, family and colleagues. All the donations will go towards the charity's activities and helping to fund research into infertility and its impact on people's lives. Start planning your Fertili-Tea today.

www.fertilitynetworkuk.org/fertilitea

FERTILI 
MAKE TEA AND MAKE A DIFFERENCE