The impact of the cost-of-living crisis on UK fertility patients (2023), a report from Fertility Network UK

Introduction

Infertility affects 1 in 6 people and has a wide-ranging impact on those affected – 40% report suicidal feelings, two-thirds say relationships are negatively affected and a third report their careers are damaged (Fertility Network UK: Impact of infertility and its treatment, 2022 survey).

Adding to this, a lack of access to NHS-funded fertility treatment means the majority (63%) of fertility patients in the UK pay privately for fertility treatment. However, private fertility treatment is financially crippling costing thousands of pounds per IVF cycle. Fertility Network UK’s 2022 survey revealed patients pay on average £13,750, with 12% of couples paying more than £30,000.

In summer 2023, Fertility Network UK conducted a survey of fertility patients to assess the impact on them of the current cost-of-living crisis. We were concerned that with prices rising across the board, fertility patients – the majority of whom are forced to pay for their own medical care because of a lack of NHS-funding for fertility treatment – would be impacted massively. With many people in the UK struggling to make ends meet for basics like food, energy and mortgage costs, what does this mean for exorbitantly expensive medical care like IVF and ICSI?

The results are shocking – people are having to choose between the chance to be parents or being able to pay their bills and eat. The survey also raises deep concerns that fertility patients may be forced into making unwanted choices about their medical care or be putting their health and their potential babies’ health at risk by cutting corners in their fertility treatment, in order to reduce steep fertility treatment costs.

Who responded?

A total of 174 people responded to the survey during July-September 2023. Most were female (97%), white (85%) and in a heterosexual relationship (79%). 5% were of Asian background, 5% Black and 5% mixed or multiple ethnic groups. 14% were in same-sex relationships and 7% were hoping to become solo parents.

The age of respondents ranged from 18 to over 40. Most (38%) were between 36-40, 36% between 31-35, 16% over 40; 9% between 26-30 and 1% between 18-25.

Over two-thirds (70%) of respondents were based in England; 11% in Wales, 10% in Northern Ireland and 9% in Scotland.

The majority of respondents were in employment (96%). Nearly two-thirds (65%) working for large organisations; a quarter (26%) for SMEs, with 3% self-employed and 3% freelance.

Most respondents (81%) were paying for private treatment. Half (49%) were paying for private fertility treatment and had no NHS help. A third (32%) were paying for private
treatment as well as accessing NHS help, and 19% were accessing only NHS-funded treatment.

Of those respondents paying for private treatment, the majority (85%) were having treatment in the UK. 9% had chosen to go overseas, and 6% were having or had had treatment both overseas and in the UK. Spain was the most popular destination, followed by Cyprus and Greece.

**Respondents were at the following stages of their fertility journey:**

In between treatments 27%
Currently undergoing fertility treatment 22%
Childless not through choice 9%
About to begin fertility treatment 8%
Secondary fertility treatment 8%
Pregnant following fertility treatment 7%
No longer having treatment following a successful outcome 7%
Undergoing fertility investigations 5%
Single person trying to conceive via home insemination 5%
Trying to conceive naturally 4%
Thinking about conceiving but not yet started trying 2%
Same sex couple trying to conceive via home insemination 1%

**The questions and results**

1. Are you experiencing, or have you experienced financial worries or problems in relation to fertility treatment?

The majority of respondents (95%) said they were experiencing or had experienced financial worries or problems in relation to fertility treatment.

**Comments on the nature of these worries included:**

‘Two years ago, to be able to start our treatment we had to re-mortgage our house, and borrow an additional £15K from an external credit company (through IVF clinic) to afford our treatment. The repayments for this, alongside the recent interest-rate increases on our mortgage mean we are having to find an additional £800+ per month. We haven’t taken a holiday in three years which has left me burned out at my job. We have four remaining embryos frozen, which are our last hope of our own children, and we cannot currently afford to have them transferred into me, which is devastating. If our treatment fails, we will still be paying off the debt for the next 10 years at least.’
‘We need to fully fund our treatment privately so it’s impacted the entirety of the rest of our lives in terms of what we can afford to do/eat.’

‘I worry we are ploughing money into something with no guarantee of success and we are sacrificing so much to do it. It just adds to the already high stakes in this journey.’

‘how many rounds can I afford? Will I have to skip some testing because of cost?’

‘By the time I’ve managed to save the money for a full IVF round I’ll be over the age of 40 and then there’s a chance it won’t happen.’

‘Husband has lost his job, had to borrow money at the last minute to pay for treatment, have taken out loan to pay & cashed in pension!’

‘We do not have enough money after paying bills/mortgage to save for fertility treatment.’

‘I have frozen sperm. I’m stressing about storage fees.’

‘I cannot afford to go private and now worrying that I won’t be able to have a child.’

‘We are struggling financially to pay for fertility treatment. We have already spent £5,000 and have not become pregnant. Same sex couples must self-fund 6 IUI cycles – that equates to around £25,000. Heterosexual couples do not have to pay this in order to access NHS fertility treatment. We are not sure how long we will be able to continue due to money constraints and may not be able to have a family.’

‘If our next IVF cycle fails, we will have to stop and never have a child because of the rise in mortgage costs.’

2. Are these financial worries/problems (in relation to fertility treatment) being or have been exacerbated by the current cost-of-living crisis?

The majority of respondents (92%) said these financial worries/problems in relation to fertility treatment were being or had been exacerbated by the current cost-of-living crisis.

The following were named as contributing factors:

Rising energy bills

Increased mortgage payments

Pay increase below inflation

Increased food costs

Rising cost of fuel/transport

Increased IVF medication costs

Rising fertility clinic fees

Steeper insurance costs
Rising nursing home expenses

Comments included:

‘Unable to start treatment as savings have been wiped out due to rising bills.’

‘we have nothing to show for the 10.5k we’ve spent. We don’t have enough savings left for another round and can’t save for it because everything has shot up in price. Our food shops, car insurance, home insurance to name a few, have MORE than doubled. I am worried I will never be able to conceive because I can no longer afford it.’

‘I need egg donation. The costs are excruciating. Pre cost of living crisis I was able to save. Now I cannot save anymore, mortgage payments, energy prices nothing left.’

‘EVERYTHING is costing more. Our mortgage is about to increase by £1500 per month, partner lost his job, we are now selling our house.’

‘Rising food, energy bills, insurance costs, you name it. They have already more than doubled and just keep going up. We are crippled by the rises.’

‘Our mortgage term is due to end soon and we cannot know whether we will be able to afford the roof over our heads, let alone pay for an embryo transfer. This is absolutely unmanageable and the fertility industry must do something to keep treatment affordable in these trying times.’

‘We actually put a halt to our IUI and knew that we couldn’t afford IVF.’

‘Our mortgage has gone up by nearly £409 per month. With all our other bills rising constantly we have had at least an extra £1000 added to our monthly bills. This makes it impossible to pay for fertility treatment.’

‘Rising energy bills and mortgage payments have meant that we have needed to use the ‘baby fund’ savings in order to live.’

‘Rising costs of everything! Our mortgage is going up by £400 per month in January, our general bills are much higher, we probably couldn’t afford to survive on one salary during a maternity leave, let alone the costs of fertility treatment.’

3. How have financial worries/problems due to the cost-of-living crisis impacted your fertility journey?

Half of patients (49%) are currently unable to move forward with fertility treatment:

Paused fertility treatment indefinitely 17%

Delayed/cancelled a fresh IVF/ICSI cycle 12%

Delayed/cancelled a frozen embryo transfer 8%

Not been able to afford embryo storage fees 6%
Delayed/cancelled an IUI cycle 3%
Stopped fertility treatment permanently 2%
Delayed or cancelled gamete (egg or sperm preservation) 1%

Over a third of patients (37%) have chosen a different treatment option in a bid to cut costs:
Chosen not to have fertility add-on treatments 16%
Chosen not to have your preferred treatment due to cost 15%
Chosen to donate eggs or sperm to reduce cost of fertility treatment 1%
Gone overseas for fertility treatment 5%
Other 13%

Comments on currently being unable to move forward with fertility treatment included:
‘We have one frozen embryo left from our private IVF that we spent 2 years saving for. We now cannot afford to have that embryo transferred. Next month the year’s freezing expires so we will have to try and find the money to pay for another year’s freezing or our embryo will be destroyed.’

‘We have had to pause everything until circumstances change. It’s very frightening and worrying. Having to have counselling to help. Family have had to help us.’

‘Since the cost-of-living crisis we have had to put our treatment on hold. We are trying to downsize our house to help with paying for treatment but with the current mortgage rates we aren’t getting any luck with selling ours. We are now in a situation where we cannot continue with any treatment as we are struggling with the month-to-month costs of living.’

‘We have had to pause our 4th round of IVF as we can’t afford the treatment due to the cost of living.’

‘Costs of treatment prohibitive. Having to discard embryos following a successful pregnancy through IVF (and therefore give up on the idea of any siblings) because we can’t justify the cost of keeping the embryos or of having another transfer.’

‘We currently have a frozen embryo which we planned to transfer in June but cannot afford £1800 plus meds. We run our own business and our main problem is that corporate clients have not been paying us on time (over 60 days) which led to us having to use our IVF savings to survive.’

‘Worries about having to delay treatment due to saving up, worrying about how much we can save. Also the clinic want the money up front.’
‘We have two more embryos in the freezer but I’m worried about using them due to costs... But I’m also getting older so we feel a pressure to make a decision soon but with costs of everything now, it feels like such a conundrum.’

Comments on choosing not to have your preferred treatment option in order to cut costs:

‘We have gone for lower cost treatment at a clinic that has lower IVF success rates.’

‘Cost of frozen embryo transfer increased so had a double embryo transfer instead of single to reduce costs.’

‘We wouldn’t be egg sharing if it wasn’t for the cost-of-living crisis.’

‘Extra pre-treatment scans have had to go, alongside PGT [pre-implantation genetic testing] for an inheritable genetic condition.’

‘Asked to opt out of monitoring scans (on letrozole) as they add in about £500 a month for just a scan or two.’

‘We wanted to know as much about our donor as possible – pen picture, voice notes, the full genetic testing. For this reason we preferred the sperm banks from abroad but they came with costs of transfer and higher rates than our local clinic, so we had to choose local and live with knowing less.’

‘We had 3 embryos after successful IVF. Ideally we would have tested them. At the cost of £400 a year to store the embryos, and £5000 for a transfer and drugs. Then £3k for testing!’

‘We wanted to do shared motherhood (same sex couple) but it costs so much more and we just can’t afford it.’

‘Seeking known donors.’

‘If we could save we would have had sperm retrieval surgery privately but the wait on the NHS is too long so we have no choice but to use a sperm donor since the NHS do fund this in our area.’

‘I would have liked to have gone to clinic in London with better outcomes in older women but cost of accommodation and transport is too much.’

‘Trying to look for cheaper online (sometimes dodgy ways to get the meds.’

Comments on choosing not to have fertility add-on treatments in order to cut costs:

‘We have been thinking about embryo glue but our clinic quoted us an extra £350 on top of the £20k we have spent so far. After our first round we wanted to do the 3 round package but couldn’t afford the monthly payment. We want to be able to pay it back in a year as it’s 0% interest, after that we have to pay back a lot more.’
‘There are additional tests, such as genetic screening, and auto-immune screening tests that may have benefitted us, and even prevented a baby loss, that we could not afford. There is also a surgical procedure that could potentially help me conceive without IVF, that we could not afford as it’s not offered on the NHS.’

‘Chosen not to take extra costly options such as endometrial scratch, additional sperm testing, chose IVF instead of ICSI.’

‘I have chosen not to have add-ons that would cost extra due to the already increase costs of a fresh cycle, which increased by £500 in the space of 3 months.’

‘We’ve avoided additional tests such as DNA fragmentation.’

‘Embryo testing is supposed to increase the chance of success but was prohibitively expensive. I asked my clinic not to monitor embryos by video (“embryoscope”) as this was an additional cost I could not afford.’

‘There are a number of tests you can have, which we just couldn’t afford. I sometimes feel like these are used to weaponise the elitism of the IVF world. For X amount of money you can find out if your embryo will stick, what genetic issues it could have etc etc.’

‘We couldn’t afford the embryo glue suggested. We also couldn’t afford to pay extra for immune testing and tests for NK killer cells or genetic testing of our embryos.’

‘Any additional tests that may be beneficial to understand our position.’

‘Not paid for extra screenings, ie blood tests following miscarriage, and not been able to afford additional add-ons, ie endo scratch.’

Other tests patients mentioned that they could not now afford: HyCoSy scan, reciprocal IVF, and endometrial receptivity array tests.

4. What actions are you taking/have you taken to help fund your fertility treatment as a result of the cost-of-living crisis?

Using life savings 28%
Seeking help from family of friends 19%
Using credit cards 16%
Selling personal belongings 14%
Financial package at a fertility clinic 8%
Securing a bank loan 7%
Remortgaging home 4%
Other 4%
Comments for what action are you taking/have you taken to fund fertility treatment included:

‘Cashing in pension, used bonus.’

‘Since our first fertility appointment, we were informed of the extortionate costs we would need to face in order to have a family. I subsequently changed jobs to work from home and try to reduce costs like the daily commute.’

‘I sold everything to have a baby.’

‘Had to cut down how many meals I have a day and can’t afford the healthier foods so I can try start saving a bit for private care.’

‘We have already got a loan, our credit cards are maxed out and we had to use a finance option to help fund our last private round of IVF. We are trying to downsize our home but it’s impossible to sell with the current interest rates.’

‘gifted money from our wedding instead of going on honeymoon.’

‘Same sex couple not eligible for NHS funding. Self-funded 7 cycles of IUI - unsuccessful. Clinic did not offer any type of payment plan or package deal for IUI. Had to ask both sets of parents for money... We are having a much needed break from treatment at the moment but don’t know how we would self fund further treatment if we had to because our mortgage has just doubled.’

‘Postponing wedding.’

‘Selling my dream house... it’s very upsetting.’

‘We were living pay cheque to pay cheque anyway and have taken a loan for the cost of two cycles of treatment and meds, but we’re still worried about the extra petrol to our clinic (75min drive each way as we’re rural) and what happens if we need round 3. It’s heartbreaking.’

‘We have had to take on overtime work alongside full time work and use a credit card to ensure we had the funds to pay.’

5. What other areas have you had to cut back on, in relation to your fertility journey, because of the cost-of-living crisis?

Complementary therapies (eg acupuncture) 33%

Eating a healthier diet 23%

Vitamins or supplements 24%

Sport or exercise 17%
Other 4%

Responses on what other areas of your life have you had to cut back on in relation to your fertility journey, included:

‘No acupuncture, no extra vitamins, no reiki, less exercise classes – which just completely adds to the anxiety because these are all things you hear you ‘should’ be doing!’

‘We can’t afford to do as much as we’d like to help improve our egg and sperm quality.’

‘Cut back on anything not directly benefiting fertility. Prioritised getting and staying pregnant over EVERYTHING.’

‘I’ve had to really prioritise what it is that I need. This unfortunately means compromising on the things I know help support my mental health, such as counselling and acupuncture, as I just can’t afford them.’

‘Cut back on fruit & veg/meals. Missed acupuncture for the last 2 months.’

‘Socialising even though it kept me sane.’

‘I had to cancel my gym membership, I cannot afford the vitamins and preconception tablets that cost over £40 a month and trying to eat wholesome organic food is nearly impossible with the cost of everything.’

‘I used to book holidays or trips away around my cycles in order to take my mind off things, but unable to do so due to costs.’

‘I have cancelled my gym membership as it was £70pm, we have had to change some of our meals as the cost of fresh veg, fruit and meat have gone up, the vitamins recommended by the doctor costs £50-£100 pm which we decided we couldn’t afford, I would have liked to do acupuncture this round but can’t afford the add on. I did have a meditation session for £40 but we cannot afford the next one during treatment.’

‘Being able to afford private prescriptions for letrazole was a worry. Taking all the supplements recommended by doctors ended up being around to 20 tablets a day and were costing so much I had to decide to cut some out.’

‘Can’t afford anything. Living on basics. Would love more supplements such as inositol but is so expensive.’

6. What personal cutbacks are you making/have you made to support how you fund fertility treatment during the cost-of-living crisis?

Responses included:

‘No holidays – no travel, no new clothes, no treats like restaurants, concerts.’

‘Not going on holidays, not going out for dinner, not meeting friends, not treating yourself to something nice; basically not living.’
‘Budget food, taken a lodger in.’

‘no holidays. no takeaway food, no going out to restaurants, no socialising. have my brother-in-law living with us. unable to move house. stopped gym membership and going to classes that I really enjoyed.’

‘Selling flat to live with parents.’

‘Not going on holiday. Limiting car use. Less days out. Limiting certain food consumption due to cost. Cancelling memberships such as gyms and tv providers.’

‘We try to live on £5 a day and no more. We don’t go out to events. We haven’t end on holiday for five years, we never buy items brand new – all of our possessions are second hand/charity shop.’

‘Changing jobs - reducing my ability to develop professionally in the NHS in favour of having a short term increase in pay. Not going on holiday, wearing clothes and shoes with holes in to cut down on buying new clothes, not visiting immediate family across the UK.’

‘No holidays, cancelled home renovations planned, gave up hobbies.’

‘Choosing food that costs less but is not as healthy. Stopped gym membership, no holidays.’

‘We cut each other’s hair.’

‘All discretionary spend has reduced – I don’t eat out, don’t buy new clothes, don’t go to cinema, don’t go on nights out.’

‘Neither of us have had a haircut in the last two-three years. We can’t afford gym memberships. Our house needs repairs we can’t afford. We’d like to upgrade our insulation to help our energy bills but can’t afford it.’

‘Not going on holiday, cut down food bill, going without gas, stopped trips out, self care has stopped (hair, spa).’

‘Not getting haircut, no holiday, not getting nails done, buying cheaper food, doing more hours at work.’

‘Buying essentials only. Cancelled wedding.’

7. Is there, or has there been, an emotional impact on you because of the cost-of living crisis impact on fertility treatment?

Yes 90%

No 10%

Responses regarding what the emotional impact has been include:

‘Struggling severely with mental health (depression and anxiety) as a direct result of cost of living and fertility costs.’
‘Just broken.’

‘Constant worry that I can’t go ahead with more cycles puts more pressure on the one that you are on. Especially when there are good embryos already in storage. Heartbreaking to think they will have to be destroyed.’

‘Unrelenting toll on my mental health, no light at the end of the tunnel and may not be a mum, incredibly hard to deal with.’

‘Huge anxiety that if this keeps going we’ll be priced out of having children.’

‘Depression is much worse because I’m having to come to the realisation I won’t ever be able to have children.’

‘Our mental health is at an all-time low. My husband is working 16 hours a day sometimes to try and keep us afloat. We don’t know if we will ever be able to be parents... It’s a pain you cannot even begin to describe, a constant ache in your heart like no other... we have always tried to remain positive but we are now starting to give up hope.’

‘Stress and worry about how to pay for everything and save for IVF. Increased bickering with my husband due to the stress and worry.’

‘Sharing my eggs is huge... it wouldn’t be my first choice. However, I can’t afford IVF unless I do it, and the NHS won’t fund fertility treatment for lesbians where we live. It’s our choice but ultimately on some level I feel it’s a decision forced on us by the NHS due to lack of funding for couples like us.’

‘This is a health problem and emotionally it’s quite difficult to know you have to pay to solve it.’

‘I feel very low and have isolated myself.’

‘I feel incredibly frustrated and angry that we have to be in this position and fund fertility when so many people fall pregnant naturally.’

‘You feel like you’re missing out on life while your friends who conceived naturally can go on holidays, save for the future etc.’

‘We feel like all of life is on hold and there are no treats or enjoyment to take our mind off things and connect as a couple outside of infertility!’

‘It makes me sad, because now it’s so much harder to do even the most basic elements of self-care. To eat well, exercise, and maintain our home is no longer affordable with the cost of IVF treatment. I wonder if I had been able to stay healthier, had less stressors, whether I would not have lost the only two pregnancies I’ve had.’

8. Has the cost-of-living crisis had an impact on your ability to access counselling or support in regard to fertility treatment?

Yes 42%
No 58%

Responses regarding not being able to access counselling:

‘The impact on both me and my husband’s mental health over the last 6 months has been horrendous and we aren’t even in a position to seek help with coping with our grief.’

‘No counselling offered. Not been offered any support services, felt abandoned. Found Fertility Network via google. No conversation from NHS for myself and partner as a couple. Partner has had pre-treatment on NHS and I was not included in any conversation.’

‘Our clinic offers one free session, we cannot afford further support.’

‘No longer have counselling as I exhausted the sessions offered by NHS and my workplace and private is too expensive.’

‘We have had to choose between saving to access IVF and spending on counselling.’

‘We were only entitled to one free counselling session per IVF cycle and the grief has been awful, so I’ve had to pay for more.’

‘I’ve taken three free sessions from work, but cannot afford more counselling, my husband really needs someone to talk to also but we can’t find the money and his work don’t offer the same.’

‘Not able to access private counselling, counselling with the clinic has a long waiting list.’

‘Clinic provider counselling is often 3 sessions or less. This is not enough or appropriate. Committing to therapy is expensive.’

‘Our clinic offers one free session if your round fails however, I feel most people that I have spoken to need it while undergoing treatment and it’s just an expense people can’t afford to add on during treatment.’

‘My wife is suffering from PTSD from severe OHSS which left her hospitalised for 8 days, needing plasma treatment and in excruciating pain. We are seeking options for therapy but cannot afford most costly therapy options out there.’

9. Has your fertility clinic taken any positive actions to help you navigate the cost-of-living crisis?

No 93%

Yes 7%

Responses for those individuals who answered yes, include:

‘Offering double embryo transfer and holding costs to 2021/22 levels where possible.’

‘It has a payment package which helps spread the cost subject to credit check etc.’
‘My clinic offers a clear package explaining what is included.’

‘I asked if we could add on more medication at the beginning so we can put the cost into our monthly plan and that has helped because last time I had to pay out an extra £500 during treatment for medication and I had to pay that there and then, as I needed it.’

‘Free counselling, as many sessions as we need.’

‘Provided us with financial information.’

10. Has your clinic done anything which has exacerbated the effects of the cost-of-living crisis?

Yes 23%

No 77%

Responses for those individuals who answered yes, include:

‘Increased prices with no advanced warning.’

‘Not clear pricing, no help financially, not offering financial packages or multi cycle due to age - despite good, clear test results.’

‘No payment plan – have to pay outright for everything.’

‘Not providing payment plans. Not refunding the money for cancelled cycles instead just holding it to go towards next cycle. Not automatically cancelling sperm storage direct debit when no longer used.’

‘Repeatedly putting up prices.’

‘Increased cost of frozen embryo storage by £100 per year.’

‘Requesting further money for further tests consultations despite paying for a package.’

‘Not told us about ICSI fee. Extortionate amount paid for meds.’

‘I had a couple of cycles that were cancelled due to the way my body responded to the hormones. They charged me considerable amounts of money for these. I wasn’t always aware of the cost in advance.’

‘Increased the costs. Not offering a finance package. Medical company costs increased too.’

‘Demanding invoices are paid and feeling harassed with communication from them to pay bills. You feel like a number to them, I don’t feel they necessarily recommend the right plan for me, they just see us doing another round or transfer as more money.’

‘Increased all fees for all types of treatment.’
General comments about fertility clinics and the price of treatment included:

‘Private fertility clinics just want your money. They want to charge you ridiculous amounts for tests you don’t need and do not tailor treatment based on your health or history. Just a money-making scheme.’

‘I was quoted £10k+ for basic IVF to be paid in full upfront. All clinics should provide payments plans for IVF and IUI.’

‘We can’t commit to a two cycle (refundable) package as we can’t afford the medicine costs if we were lucky enough to come out with several embryos. We also can’t afford >1 cycle without using a finance package. 1 cycle would wipe out our savings.’

‘HFEA standard add on cost of 85.00 GBP per treatment cycle. Mandatory cost!! Advertised IVF treatment from £3,500 but doesn’t include mandatory embryology work between egg collection and embryo transfer at another 1,500 GBP. FALSE ADVERTISING OF COST.’

‘There is so much uncertainty involved in any financial packages and we feel as though we can’t commit to a two cycle package with the bills from all the medication and an unknown number of transfers heading our way. Refund packages appear to depend on you fully completing a cycle (including all transfers). We feel as though we’d need to get into debt to take the (NICE) recommended three cycles with no certainty of outcome and impact on the quality of life of any subsequent child. Savings were meant to be spent on other things and feel as though they are about to be squandered. I am cutting back on non-essential purchases, going out less and selling unwanted items on Facebook marketplace to try and create some guilt free spend we can use on IVF.’

‘Increasing bills means there is less money available for treatment… We expect the price of treatment to go up in January … we expect it will impact our ability to continue treatment. It adds a time pressure to seeking additional treatment before price rises come in.’

‘We have seen increases in our wages but it does not come close to covering the increases we’ve seen. The cost of medication has also gone up and the fees at the clinic are also increasing.’

‘Storage costs have also gone up which is a nightmare as they are always due before Xmas.’

‘We have less money to save each month and it makes IVF less affordable. The cost of IVF near us is very expensive and I fear that the IVF providers owned by private equity investors have hiked the prices and charge for unnecessary add-ons.’

11. What are your greatest concerns in trying to find fertility treatment during the cost-of-living crisis?

Responses included:

‘Paying out all I have to be unsuccessful.’

‘Not being a mum, going bankrupt. Breakdown.’
‘Not knowing if we will ever be parents.’

‘Not living. We are just existing, working to earn money to fund our treatment with no reward.’

‘That it could be all for nothing and we’re left with lots of debt.’

‘Being able to afford food and fuel at the end of the month.’

‘That we get to a point where we can no longer save up enough money to transfer our remaining embryos. It costs £2200 per embryo transfer. I can’t afford to be as healthy, as there have been weeks where we’ve had to live on pasta and rice. I’m concerned that this may directly impact our chances of success, even if we can find the money.’

‘Not being able to afford it in the long term and getting into financial difficulty.’

‘Never being able to save enough because of soaring living costs and becoming too old as a result of the delay.’

‘That we will run out of money and not have a family.’

‘Sadly we cannot do anything anymore we are broke :(.’

‘I don’t think I’ll be able to afford it in time. I’m 40 with low AMH. Everything is a rush and we’re desperate.’

‘That we will put ourselves into so much debt and that it might never work.’

‘Any impact on my career during fertility treatment and whether this will affect my ability to afford to fund further treatment.’

‘Making it through winter.’

‘Not being able to afford treatment. Being priced out of fertility. Increasing debts we cannot afford.’

‘Debt and being mentally unwell.’

‘I worry about the time lost between cycles as we balance money... All that lost time, the waiting, the heartache is so unfair. This year we have spent £10k and have nothing to show for it which is devastating.’

‘Chances of conception and a successful pregnancy being lower due to increase in stress and being older due to the time spent saving.’

‘Not being able to try again if it fails.’

‘We are not able to try again yet because we don’t have the spare money because everything else is so expensive, and soon I will age out and be too old so the likelihood of it working will be so low it would barely be worth it.’

‘I don’t want to be lumbered with a loan for something that possibly doesn’t work, my partner isn’t happy, and I fear a breakdown of our relationship because of the cost and stress...’
of the process. We feel the UK is ripping off private patients when other countries do it for a fraction of the price.’

12. If you are working for an organisation, does it offer any fertility support/help?

None 56%

Fertility policy 32%

Fertility benefits 2%

Other 9%

Further detail provided included:

‘No fertility support at all.’

‘I work for the NHS and do not know of any current help or support as an employee.’

‘Fertility policy which does not have to be followed and is down to manager discretion.’

‘Poor fertility policy with really ambiguous wording.’

‘Time off for appointments is discretionary in NHS given there are so many appointments. In the past managers have asked that I use time owing and annual leave. Some trusts do not have IVF policies and others are completely irrelevant... Going to work after a negative test result after treatment is so hard, yet when you’ve used your holidays/toil and leniency in sick leave policy no longer applies, you have no other option but to go in... so difficult.’

‘Unfortunately, I had to leave my job as a teacher as there was very little support for fertility treatment after the first round and no flexibility with appointments. There is a huge lack of understanding within education about what fertility treatment entails both physically and emotionally and as a consequence very little support of offered. You are expected to do it in the holidays however it is not as simple as that. Very surprising considering the majority of the workforce are female.’

‘Fertility treatment is mentioned in HR leave arrangement policy however the wording is vague.’

‘Informal some time off may be allowed but very unclear.’

‘Fertility policies, support groups and eLearning but no time off for treatment.’

‘Head teacher is kind and discreet and allows me to go to appointments.’

‘My husband’s organisation (-police) have been particularly disappointing with regard to our treatment. They don’t appear to have a policy in place and have been extremely obstructive toward my husband during our treatments, particularly the day of egg collection and the day after when I was particularly unwell and he needed to look after me and our 3-year-old.’
Conclusion

The toxic combination of cost-of-living price hikes and the lack of access to NHS-funded fertility treatment means many fertility patients are being priced out of the market and may never get the chance to become parents, with potentially serious repercussions for their mental health. Others are facing mountains of debt, and some are being pressured into making unwelcome treatment choices, with potentially harmful consequences for themselves and any future children. Fertility Network is deeply concerned at the short and long-term impact on patients – physically, mentally and financially.

Patients should not be facing the decision to discard much wanted embryos because they can’t afford the costs of transferring them or storing them. Patients should not be swayed into donating their eggs or having a double embryo transfer rather than the recommended single transfer in order to afford necessary medical healthcare. And patients should not be having to forego monitoring scans or genetic testing to avoid inherited conditions in order to be able to continue with treatment.

With half of UK fertility patients unable to afford to move forward with fertility treatment and others considering potentially risky options to be able to access care, this is a crisis point for fertility patients and the sector. It is a scandal for the country that pioneered IVF over 45 years ago and it is rooted in the lack of equitable access to NHS-funded fertility care, and the continuing steep cost of private treatment in the UK.

Fertility Network UK is calling for fertility clinics to do more to support patients during and beyond the cost-of-living crisis. Most patients reported their fertility clinic had not taken any positive action to help them during this time, with nearly a quarter stating their clinic’s actions had exacerbated the effects of the cost-of-living crisis. We urge clinics to consider halting price hikes or providing payment pauses for patients facing their stored embryos being destroyed and, for those who don’t already, to offer payment plan packages.

As Fertility Network UK celebrates 20 years of providing free and impartial information and support, we are also calling on the government to dismantle the cruel and unfair IVF postcode lottery and, as a first step, to honour the commitment it made in the Women’s Health strategy in July 2022 to remove non-clinical barriers to access NHS-funded fertility treatment.