Access Criteria for NHS funded IVF treatment for all NHS Health Boards from 1st July 2013.

Referral for treatment can only be made if all access criteria are fulfilled, as noted below.

### 1 DEFINITION OF INFERTILITY FOR COUPLES

- Infertility with an appropriate cause, of any duration

OR

- Unexplained infertility of two years – heterosexual couples
- Unexplained infertility following six-eight cycles of donor insemination – same sex couples

1.1 **Sterilisation**

Neither partner to have undergone voluntary sterilisation or who have undertaken reversal of sterilisation.

1.2 **Stable Relationship**

Couples must have been cohabiting in a stable relationship for a minimum of two years.

1.3 **Children in the Home**

Couples must have no child living with them in their home.

1.4 **Lifestyle**

There is a responsibility on patients to fulfil the following access criteria in the interests of the welfare of the child and the effectiveness of treatment. The clinic may conduct tests to ensure that patients adhere to these criteria and, in the event of a positive result, patients will be advised that treatment cannot be started.

1.4.1 **Body Mass Index (BMI)**

The female partner must have a BMI above 18.5 and below 30. Couples should be aware that a normal BMI is best for both partners.

1.4.2 **Smoking**

Smoking status must be assessed prior to referral for treatment. Both partners must be non-smoking for at least three months before treatment and couples must continue to be non-smoking during treatment.

1.4.3 **Alcohol and Drugs**

- Both partners must abstain from illegal and abusive substances
- Both partners must be Methadone free for at least one year prior to treatment
- Neither partner should drink alcohol prior to or during the period of treatment

**Couples that are currently waiting for treatment but do not meet this criteria will be placed on a holding list for 12 months.**
1.5 Definition of one full cycle of IVF

One full cycle includes ovulation induction, egg retrieval, fertilisation, transfer of fresh embryos followed by the freezing of suitable embryos and the subsequent replacement of these, provided the couple still fulfil the access criteria. If suitable embryos are frozen these should be transferred before the next stimulated treatment cycle.

No individual (male or female) can access more than the number of NHS funded IVF treatment cycles supported by NHS Scotland under any circumstances, even if they are in a new relationship.

1.6 Number of Cycles initiated by the date of the female’s 40th Birthday

Up to two cycles of IVF/ICSI may be undertaken where there is a reasonable expectation of a live birth. Clinical judgement should be applied to determine this, using an assessment of ovarian reserve before the first cycle. If there has been no or a poor response to ovarian stimulation (<3 eggs retrieved) in the first cycle no further IVF/ICSI treatment will be funded.

Fresh treatment cycles must be initiated by the date of the female partner’s 40th birthday and all subsequent frozen embryo transfers must be completed before the woman’s 41st birthday. Patients should not be placed at the end of the waiting list following an unsuccessful treatment cycle. There could be a gap of 6-11 months between fresh cycles of IVF for patients who remain eligible.

1.7 Number of Cycles if aged 40 to 42 years old

One cycle of treatment may be funded for couples if the female has never previously had IVF treatment, if there is no evidence of poor ovarian reserve and if in the treating clinician’s view it is in the patients’ interest. Discussion regarding the additional implications of IVF and pregnancy at this age should be undertaken.

1.8 Frozen Embryos

Should circumstances change and couples no longer meet the NHS eligibility criteria self funding for any future transfers will be required.

1.9 Number of Cycles for those that have previously self funded

NHS funding may be given to those patients who have previously paid for IVF treatment, if in the treating clinician’s view, the individual clinical circumstances warrant further treatment.