Template Policy

Template Policy:	**2013-03: Assisted conception treatments (ACTs) using donated genetic materials**
Issue Date:	**October 2015**
Review Date:	**October 2017**

Recommendation:

The Brighton & Hove Assisted Reproductive Technologies Policy & Commissioning Group (ARTPCG) has considered up to date information on current guidance and legislation, a review of the literature, an assessment of the baseline position, views and opinions of stakeholders, equality assessment, and the impact of policy changes on patients and the wider population. Taking these into account, the Group recommends that:

- Procedures involving donor genetic materials are not funded within the local NHS for any patient group
- Funding of procedures involving donor genetic materials abroad will not be reimbursed by the local NHS

See overleaf for details of supporting evidence and rationale.

NHS Brighton & Hove Clinical Commissioning Group will always consider appropriate individual funding requests (IFRs) through its IFR process.

Supporting documents

KMCS Health Policy Support Unit (2013) *Assisted reproductive technologies – Final report*

NICE (2013) *Clinical guideline 156 – Fertility: Assessment and treatment for people with fertility problems*, Online: http://www.nice.org.uk/cg156

Key findings and rationale

What assisted conception treatments (ACTs) are carried out using donated genetic materials?
Assisted conception treatments such as intra-uterine insemination (IUI), in vitro fertilisation (IVF) and intra-cytoplasmic sperm injection (ICSI) can be undertaken using donated sperm, oocytes (eggs) or embryos.

What are the indications for ACT using donated genetic materials?
Donor conception can be an option for patients:

- who are not producing eggs / sperm
- whose own sperm or eggs are unlikely to result in the conception of a baby
- where there is a high risk of passing on an inherited disease
- who are single or in same sex relationships

What national guidance exists on fertility?
In February 2013 NICE issued Clinical Guideline 156 (CG156), *Fertility: assessment and treatment for people with fertility problems*. This replaces Clinical Guideline 11 (CG11), which was issued in February 2004. The aim of updating NICE guidelines was to revise recommendations on selected topics in the light of new evidence and, where appropriate, make new recommendations. In addition, the scope of CG156 was wider in terms of the patient groups considered.

What does NICE currently recommend with regard to NHS provision of ACT using donated genetic materials?
NICE recommends donor insemination and use of donor oocytes should be considered for managing a range of fertility problems. NICE CG156 also recommends consideration of unstimulated IUI as a treatment option, as an alternative to vaginal sexual intercourse, for patients in same sex relationships; this would necessitate the use of donated genetic materials. The above were not considered by NICE to be key priorities for implementation. NICE does not address use of donated embryos or funding of assisted reproductive technologies (ART) using surrogates.

Why are ACTs using donated genetic materials, not available on the NHS for Brighton & Hove patients?
When making resource allocation decisions in this context, Clinical Commissioning Groups (CCGs) need to take into account the needs of the populations suitable for assisted reproductive technologies, and their wider population. In general resources are focused on groups of patients most likely to have successful outcomes. NHS Brighton & Hove CCG has concluded that extending provision of ART to include treatments involving donated genetic materials is currently unaffordable in the context of local priorities.

What about NHS funded treatment abroad?
In the UK, donated genetic materials are in short supply, with demand commonly exceeding supply. An unintended consequence of any policy making ACT using donated genetic materials available on the NHS locally may be that patients could seek NHS funded treatments abroad. This is undesirable as clinics may be unregulated and treatments undertaken could pose significant health risks to patients.