

Is intravaginal culture a more economical treatment for lesbian couples?



J. Butler MS, M. Darmer BS, J. Payne MD, T. McCoy MD, E. Tarnawa MD
PREG



ABSTRACT

Lesbian couples with aspirations on creating a family of their own are met with immediate biological and financial obstacles. The first-line treatment for these couples consist of either natural or gonadotropin stimulated with donor sperm intrauterine inseminations (dIUI). Success rates for dIUI are difficult to quantify¹. With the development of the INVO cell device, we investigated the possibility that IVC may be more beneficial in terms of cost for couples dependent on donor sperm.

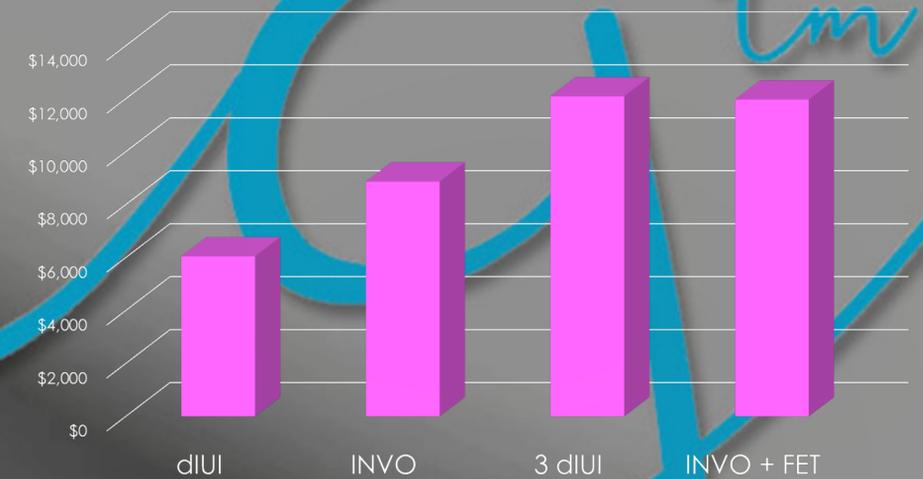
OBJECTIVES

Lesbian couples often do not fall under the definition of infertility, thus creating a financial burden on couples in pursuit of a family. The aim of this study is to determine if an intravaginal culture cycle (IVC) using an INVOcell device is a more cost-effective treatment for lesbian couples compared to standard dIUI cycles.

METHODS

We performed a cost-effective analysis to determine out-of-pocket costs for lesbian couples in fertility treatment. The mean costs for a vial of donor sperm, shipping, and one-time miscellaneous fees (e.g. 6 months of onsite storage, access to donor profiles) were calculated from pricing information available online from three sperm banks: Xytex, California Cryo Bank, and Seattle Sperm Bank². A current clinic cost sheet for self-pay patients was utilized to determine the cost of a dIUI cycle and an INVO cycle. Clinic fees for dIUI included an average of 1.5 monitoring visits (i.e. follicle scans, lab work), medication, sperm preparation, and the insemination. Fees for an INVO cycle included 2 monitoring visits, oocyte retrieval, insemination, sperm preparation, INVOcell device and embryo transfer. Similarly, fees for subsequent FET (frozen embryo transfer) from an INVO cycle and subsequent dIUI cycles were determined.

RESULTS



CONCLUSIONS

An IVC cycle requires more upfront money than standard treatment. However, after 3 dIUI cycles, an IVC cycle appears to be a more cost effective option. Two points for consideration are if the IVC cycle is successful, there is a possibility for a subsequent FET cycle. If the IVC cycle is unsuccessful (i.e. fertilization failure, nothing to transfer) patients can move quickly to a more aggressive therapy. More research is needed in the efficacy of IVC treatments when using donor sperm. However, pregnancy rates for dIUI compared to published IVC cycle rates should strongly be considered³. Clinicians should evaluate cost-effectiveness along with pregnancy success when treating lesbian couples.

REFERENCES

1. Cocharane Data Syst Review. 2018 Jan 25
2. Xytex.com, cryobank.com seattlespermbank.com,
3. Comparing blast quality and live birth rates using IINVOcell to traditional in vitro incubation in a randomized open label prospective controlled trial. J.AssistReprod Genet.

	vial cost	shipping	Clinic fees	medication	# cycles	Misc. Fees x1	Total Cost
dIUI	\$761.67	\$208.33	\$915.00	\$150.00	3	\$386.83	\$6,041.83
INVO	\$521.00	\$208.33	\$6,500.00	\$1,500.00	1	\$132.50	\$8,861.83
Subsequent FET	\$0.00	\$0.00	\$3,100.00	\$0.00	n/a	\$0.00	\$3,100.00
Subsequent dIUI	\$761.67	\$208.33	\$915.00	\$150.00	3	\$386.83	\$6,041.83

Note from INVO Bioscience: INVO incubation period is country specific and is indicated for 3-5 days. In the US, the INVOcell Culture Device and Retention Device is not indicated for incubation periods exceeding 72 hours. FDA has not approved or cleared the product as safe and effective for use for incubation periods exceeding 72 hours (off-label).