


[Home](#) > [Journal](#) > [Medicine & Healthcare](#) > [OJOG](#)
[Indexing](#) | [View Papers](#) | [Aims & Scope](#) | [Editorial Board](#) | [Guideline](#) | [Article Processing Charges](#)
[OJOG](#) > Vol.3 No.1, January 2013



Social and psychological assessment of women undergoing elective oocyte cryopreservation: A 7-year analysis

PDF (Size: 226KB) PP. 1-7 DOI: 10.4236/ojog.2013.31001

Author(s)

Victoria Vallejo, Joseph A. Lee, Lisa Schuman, Georgia Witkin, Enrique Cervantes, Benjamin Sandler, Alan B. Copperman

ABSTRACT

Our study focused on a retrospective analysis from 2004-2011 of patients considering elective oocyte cryopreservation (OC). We investigated the psychological and social aspects related to women who electively cryopreserve oocytes. Over seven years, consulted patients (n = 315) considering non-medical OC were interviewed by the staff therapists. Social, demographic, motivational impetus, psychological factors and local to national economy were analyzed in association with trends in elective OC. Patient disclosure, fertility assessment and receptivity to potential single motherhood were other aspects examined. Statistical analysis was performed with Student's t-test, Pearson's correlation and Chi-square analysis. Advanced technology, decreased age (<35), annual per capita income, levels of follicular stimulant hormone (FSH) and basal antral follicular count (BAFC) were demonstrated to be the most influential factors of elective OC. The mean age of elective OC patients was 38.6 ± 1.83 with nearly 80% of these patients disclosing their decisions either with family and/or friends. Clinical perception has increasingly improved the availability and efficacy of elective oocyte cryopreservation, albeit minimal publications have studied the social and epidemiological aspects of such patients. We identified these patients are often motivated by a key life event such as a birthday, are educated and professional, and often disclose their treatment to close friends and family. Understanding the psychological aspects of egg freezing patients will engender clinicians the ability to meet patients' needs and appropriately counsel them.

KEYWORDS

Elective Oocyte Cryopreservation; Basal Antral Follicle Count (BAFC); Psychological Counseling; Modern Society; Motherhood.

Cite this paper

Vallejo, V. , Lee, J. , Schuman, L. , Witkin, G. , Cervantes, E. , Sandler, B. and Copperman, A. (2013) Social and psychological assessment of women undergoing elective oocyte cryopreservation: A 7-year analysis. *Open Journal of Obstetrics and Gynecology*, 3, 1-7. doi: 10.4236/ojog.2013.31001.

References

- [1] Mertes, H. and Pennings, G. (2011) Social egg freezing: For better, not for worse. *Reproductive BioMedicine Online*, 23, 824-829. doi:10.1016/j.rbmo.2011.09.010
- [2] Soliman, H.H., Khaki, A.A., Al-Azawi, T. and Al-Harani, S. (2012) Oocyte cryopreservation, will it be a real social choice and family solution? *Middle East Fertility Society Journal*, 17, 8-11. doi:10.1016/j.mefs.2012.01.003
- [3] Dondorp, W., de Wert, G., Pennings, G., Shenfield, F., Devroey, P., et al. (2012) Oocyte cryopreservation for age-related fertility loss. *Human Reproduction*, 27, 1231-1237. doi:10.1093/humrep/des029
- [4] Goold, I. and Savulescu, J. (2009) In favor of freezing eggs for non-medical reasons. *Bioethics*, 23, 47-58. doi:10.1111/j.1467-8519.2008.00679.x
- [5] Rodriguez-Wallberg, K. and Oktay, K. (2012) Recent advances in oocyte and ovarian tissue

- [Open Special Issues](#)
- [Published Special Issues](#)
- [Special Issues Guideline](#)

[OJOG Subscription](#)
[Most popular papers in OJOG](#)
[About OJOG News](#)
[Frequently Asked Questions](#)
[Recommend to Peers](#)
[Recommend to Library](#)
[Contact Us](#)

| | |
|------------|---------|
| Downloads: | 56,420 |
| Visits: | 137,982 |

Sponsors, Associates, and Links >>

cryopreservation and transplantation. *Best Practice & Research Clinical Obstetrics and Gynaecology*, 26, 391-405. doi:10.1016/j.bpobgyn.2012.01.001

- [6] Dondorp, W.J. and De Wert, G.M.W.R. (2009) Fertility preservation for healthy women: Ethical aspects. *Human Reproduction*, 24, 1779-1785.
- [7] Hirshfeld, J., Grobman, W. and Milad, M.P. (2012) Fertility preservation for social indications: A cost-based decision analysis. *Fertility and Sterility*, 97, 665-670. doi:10.1016/j.fertnstert.2011.12.029
- [8] Dondorp, W., et al. (2012) Oocyte cryopreservation for age-related fertility loss. *Human Reproduction*, 27, 1231-1237. doi:10.1093/humrep/des029
- [9] Cousineau, T.M. and Domar, A.D. (2007) Psychological impact of infertility. *Best Practice & Research Clinical Obstetrics and Gynecology*, 21, 293-308. doi:10.1016/j.bpobgyn.2006.12.003
- [10] (2008) Essential elements of informed consent for elective oocyte. The Practice Committee of the Society for Assisted Reproductive Technology and the Practice Committee of the American Society for Reproductive Medicine.
- [11] Mills, M., Rindfuss, R., McDonald, P. and Te Velde, E. (2011) Why do people postpone parenthood? Reasons and social policy incentives. *Human Reproduction*, 17, 848-860. doi:10.1093/humupd/dmr026
- [12] Dhont, M. (2010) History of oral contraception. *The European Journal of Contraception and Reproductive Health Care*, 15, S12-S18. doi:10.3109/13625187.2010.513071
- [13] Kuliev, A., Cieslak, J. and Verlinsky, Y. (2005) Frequency and distribution of chromosome abnormalities in human oocytes. *Cytogenetic and Genome Research*, 111, 193-198. doi:10.1159/000086889
- [14] Dudzinski, D. (2004) Ethical issues in fertility preservation for adolescent cancer survivors: oocyte and ovarian tissue cryopreservation. *Journal of Pediatric and Adolescent Gynecology*, 17, 97-102. doi:10.1016/j.jpag.2004.01.004
- [15] Marhohm, E. and Cohen, I. (2007) Fertility preservation options for women with malignancies. *Obstetrical and Gynecological Survey*, 62, 58-72. doi:10.1097/01.ogx.0000251029.93792.5d
- [16] Stoop, D., Nekkebroeck, J. and Devroey, P. (2011) A survey on the intentions and attitudes towards oocyte cryopreservation for non-medical reasons among women of reproductive age. *Human Reproduction*, 26, 655-661. doi:10.1093/humrep/deq367