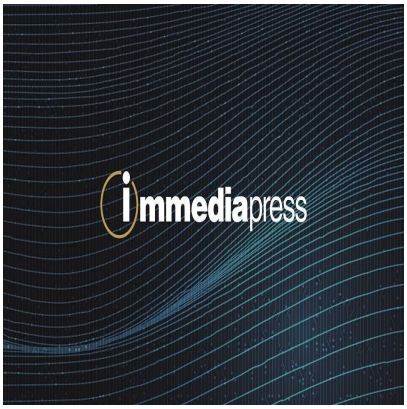


ESHRE 42nd Annual Meeting: Halving fertility treatment costs could more than double births, major global study shows

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A landmark international study has found that halving patient out-of-pocket costs was associated with a 2.67-fold increase in births achieved through assisted reproductive technology (ART).

LONDON, July 6, 2026 /PRNewswire/ â?? Presented at the 42nd Annual Meeting of the European Society of Human Reproduction and Embryology (ESHRE), the study analysed ART registry, economic and demographic data from 22 countries and regions between 2021 and 2023, representing more than 95% of global ART activity, to assess international variations in affordability.

To compare countries/regions consistently, researchers developed a â??cost-to-babyâ?? affordability metric estimating the cost required to achieve one live birth through ART.

Gross cost-to-baby was calculated using average per-cycle treatment costs, including embryo transfer, preimplantation genetic testing where used, and medications, alongside the age-weighted number of cycles required to achieve a live birth. Net out-of-pocket cost-to-baby then accounted for reimbursement programmes, subsidies and tax benefits applicable to each country/region. Both gross and net costs were expressed as a percentage of median after-tax household income.

The results revealed significant international differences in affordability. Gross cost-to-baby varied more than 12-fold across countries and regions, ranging from 66% of median household income in Israel to 833% in Africa (excluding Egypt, Tunisia and South Africa), while net out-of-pocket cost-to-baby ranged from 13% in Israel to 825% in Africa.

Countries/regions with gross cost-to-baby below 100% and net out-of-pocket cost-to-baby below 50% of median household income consistently achieved the highest levels of ART utilisation, including South Korea (11.8% of births via ART), Spain (11.7%) and Japan (9.3%).

Conversely, in countries/regions such as Brazil, India and South-east Asia, where costs approach two or three times the annual median household income, the proportion of ART births plummeted to

between 0.2% and 0.4%.

Lead author Dr Stephanie Kuku of Conceivable Life Sciences said, â??It was genuinely striking to see how much of the variation could be explained by a single affordability metric. Our models explained between 77% and 84% of the variation in ART utilisation.â?•

Looking ahead, Dr Kuku said that the findings provide a clear benchmark for improving access to fertility treatment. â??Our analysis is fundamentally patient-centric: it asks what a typical household actually earns and what they would actually have to spend to have a baby through ART. The 50% threshold isnâ??t a theoretical construct; itâ??s a grounded observation of what top-performing nations have achieved.â?•

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