

KKIVF Centre

Risks of Multiple Pregnancies

The aim of IVF/ICSI treatment is to achieve a single, healthy baby born at term. Traditionally, two or three embryos are transferred in order to increase the chance of achieving a pregnancy because the chance of achieving a pregnancy with transferring a single 2 or 3-day old embryo (Cleavage Stage) is low. However, this can result in multiple pregnancies ie twins or triplets. The following table illustrates the chance of carrying a twin pregnancy after IVF in women at different ages:

Table 1: Chance of conceiving twins in women of different age groups undergoing IVF (Double Embryo Transfer) (KKIVF Data)

Maternal Age	Chance of a twin pregnancy if IVF is successful
<30	28 %
30 - 34	25 %
35 - 37	26 %
38 - 39	18%
≥ 40	8%

Multiple pregnancies pose higher risks to both mother and child compared to a singleton pregnancy.

Potential complications in twin pregnancies:

- A) Fetal Risks
 - Late miscarriages
 - Preterm Birth with increased risk of
 - Prolonged ICU stay
 - Death in the newborn period
 - Long term lung, gut and brain injury
 - Blindness
 - Delayed development
 - Neurological impairment such as cerebral palsy

- B) Maternal Risks
 - Pre-eclampsia (High Blood Pressure complicating pregnancy)
 - Diabetes in pregnancy sometimes requiring insulin injections
 - Increased chance of a low lying placenta and bleeding during pregnancy
 - Increased Caesarean section rates
 - Increased nausea and vomiting
 - More discomfort and fatigue in pregnancy
 - Emotional & financial stress

Table 2: Complication rates increased by twin pregnancies (American & Australian Data)

	Risks in twins compared to singletons
Pre- eclampsia	~ 2 X
Gestational Diabetes	~ 2 X
Pre-term Labour	~ 3 X
Delivery < 37 weeks (Premature Delivery)	5 X
Delivery < 32 weeks (Very premature Delivery)	4 X
Risk of fetal death	3X
Cerebral Palsy	~ 5X

Reducing the risk of multiple pregnancies in IVF Treatment

We can reduce the risk of multiple pregnancies in your IVF treatment by replacing a single embryo at the Blastocyst stage. This is most suitable for women who are generally younger and have an adequate number of good quality embryos. In these patients, the transfer of a single Blastocyst (Day 5 embryo) will result in similar pregnancy rates as double day2/3 embryo transfer, with a minimal risk of twins.

If you are concerned about the risk of twins, please speak to your doctor about having a single embryo transfer. This is best done when the final number and quality of embryos are known.