







September 2024

# The Market for Hope

## Evidence Challenges, Commercial Pressures and Patient Choices in Fertility Care

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Remaking Fertility Research Digest #4

The rising use of additional fertility treatments with limited evidence supporting their efficacy has ignited significant debate in the field of fertility care. This research explores how a 'hope market' has emerged, capitalising on the promises of these new medical innovations. This brief outlines key challenges that need to be addressed to protect patients in a market that profits from the uncertainties surrounding infertility and medical knowledge.

**Cite brief as:** Perrotta, M. (2024) 'The market for hope: evidence challenges, commercial pressures and patient choices in fertility care', Research Digest #4, Remaking Fertility, Queen Mary University of London. Available at www.qmul.ac.uk/remaking-fertility/research-digests/

#### **Overview**

The growing use of fertility treatment add-ons – additional interventions or procedures with limited evidence, marketed to improve the chances of a successful pregnancy – has generated significant debate in the field of fertility care. While some of these treatments may be appropriate in specific situations, a consensus statement (HFEA, 2023) from key professional bodies advises that these interventions should be used only within research settings until conclusive evidence is established. Despite this guidance and the introduction of an evidence rating from the UK regulator, data show that add-ons are used in approximately two-thirds of IVF cycles (HFEA, 2022).

Although these treatments are commonly used, their inclusion in NHS treatments is based solely on clinical judgement. Criticism has arisen regarding the provision of add-ons in the private sector, driven by concerns over commercial interests and the burden of out-of-pocket expenses on patients.

#### Methodology

The research adopted qualitative and mixed research methods, including:

- interviews with 51 IVF patients and partners
- interviews with 43 fertility professionals
- three focus groups with 17 IVF patients and partners
- three focus groups with 18 fertility professionals
- an online survey with 314 IVF patients and partners
- 250+ hours of ethnographic observation at six fertility clinics
- analysis of policy documents and professional statements

The study received ethical approval from the Health Research Authority, Queen Mary's research ethics committee, and locally at the participating fertility clinics.



I suppose that's what makes me feel so comfortable about having something done on the NHS... They are only doing it if they think it's definitely going to work. Money is tight, resources are tight, they are just going to do the stuff that they know works really well."

– patient 1



## **Key recommendations**



Information and cost transparency should be prioritised to enable patients to make well-informed decisions with clear and accurate details.



When evidence is lacking and transparency on costs and information is uncertain, careful consideration of the range of choices offered to patients is essential.



Clinics should prioritise ethical business practices and responsible marketing, ensuring a balance between commercial interests and their duty of care to patients.

This research examines fertility add-ons as an example of the current approach to biomedical innovation in fertility care, focusing on how the uncertainties within evidence-based medicine can be exploited by commercial healthcare markets.



The research has examined both the widespread lack of evidence supporting fertility interventions and the challenges of generating such evidence in a highly commercialised sector. The tension between the time required to establish strong evidence and the urgent need to provide care drives rapid innovation. This is often supported by the belief that just because evidence is lacking does not mean the intervention is ineffective.



I think we need to be mindful of gaining evidence and we need to be mindful of not misleading patients, but I think we have to be realistic and we have to have the opportunity to try to create the evidence in some way."

- professional 1

The research identifies two main viewpoints among patients. Some are well-informed about the lack of evidence supporting certain fertility treatments and understand the limitations and gaps in current knowledge. Others prefer to disengage from evaluating evidence, opting instead to rely on their doctors' recommendations for their treatment decisions.



#### **Fairness of information**

Several studies have raised concerns about the reliability of information on fertility add-ons and fertility care more broadly, highlighting that the transparency and quality of this information are highly inconsistent and often inaccurate.

This research emphasises patient worries about the misleading and confusing effects of the overwhelming amount of available information, which often lacks clear guidance on its accuracy, especially given the ongoing production of new evidence and information.



Conflicting information is hard sometimes because you just think, right, okay, I've got my head around that and that and then you read something else and it's like oh!

Back to square one again."

- patient 2



## **Commercial strategies**

Despite concerns about how commercial interests might influence the provision of add-ons, the debate around these fertility treatments has primarily centred on their lack of scientific backing. This research shifts the focus from the mere absence of evidence to its exploitation, shedding light on the marketing and pricing strategies used to promote and sell these treatments.

Even when the absence of strong evidence is acknowledged, clinic websites often overemphasise potential benefits while downplaying the associated risks. They frequently use language that suggests the treatments **might work**. This can fuel unrealistic expectations and false hope among patients, who are already in a vulnerable position.

Many fertility professionals interviewed in this study expressed concerns about billing practices. While it is generally seen as acceptable for private clinics to charge extra for add-ons if patients are well informed about the uncertainties, several professionals highlighted the ethical issues of overcharging for treatments that lack robust evidence.



This culture media comes in a 10ml bottle. It is expensive, it's over £100 a bottle, but to charge patients for 5ml like £500 or £600 is just ridiculous if there is no scientific evidence of something."

- professional 2



If it's a means to an end to cover the cost of the machine, fine, but... If you've paid off the machine but you're still charging patients the extra £600, so then you're essentially just making a profit out of those patients."

- professional 3



These commercial strategies significantly impact the final cost of treatment. While the average cost of basic fertility treatment advertised on UK clinic websites ranges from £3,000 to over £7,000, a survey by the Fertility Network UK (2022) found that patients actually pay an average of £13,750.



#### **Hope market**

Understanding patients' perspectives on add-ons requires situating them within the broader context of their IVF experience.

Previous research highlights that, for many patients, IVF is perceived as the only viable path to biological parenthood. The drive to 'try everything' is not solely about achieving a pregnancy but also about reaching a point of reproductive closure, enabling patients to move forward without lingering doubts or regrets (Franklin, 2022). The spread of add-ons complicates this journey by presenting more options to explore before achieving this closure.

Most of the patients interviewed who opted for add-ons were aware of the lack of robust evidence supporting these treatments.

However, they were often driven by the potential benefits these add-ons seemed to offer and the hope they inspired. The **promise of potential success** can overshadow the significant financial, physical and emotional costs, making it challenging for patients to set clear boundaries on which interventions to consider, select, and ultimately, fund.



Do you want this? Do you want that? I just think it's so wrong that they get to ask you when you're so vulnerable with all this money involved, as these tests are not cheap."

– patient 4



### **Patient informed choice**

Most patients and professionals interviewed in this research supported the right of patients to choose optional interventions that they pay for, as long as they are well informed about the lack of conclusive evidence. However, there were differing opinions on how to balance medical recommendations with patient choice, given the implications for both medical outcomes and financial costs.



There's no guarantees with any of those things, but you can very, very easily be swept into paying for things, extra things when you're desperate to have a baby as well."

– patient 3

## **Underpinning research**

Perrotta, M. (2024), Biomedical Innovation in Fertility Care: Evidence Challenges, Commercialization, and the Market for Hope, Bristol University Press, Bristol, UK. Available at https://bristoluniversitypress.co.uk/biomedical-innovation-in-fertility-care

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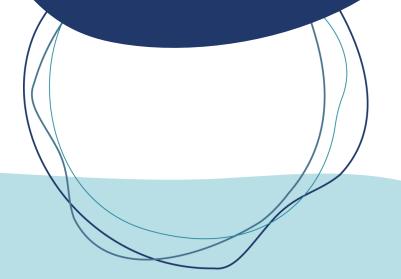
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#### **Acknowledgements**

**Funding bodies:** This research was supported by two grants awarded to Dr Manuela Perrotta: an investigator award from the Wellcome Trust (grant no. 108577/Z/15/Z) and an innovation fellowship from the British Academy (grant no. IF2223\230087).

**Research team and participants:** Special appreciation goes to the research team – Dr Alina Geampana, Dr Josie Hamper, Dr Giulia Zanini and Dr Marcin Smietana – as well as to Sarah Norcross and Sandy Starr from the Progress Educational Trust, for their invaluable support with this research. Sincere thanks to all the fertility patients and professionals who shared their views and insights, which form the foundation of this research.

Edit and design: **Research Retold**