AUSTRALIANS’ UNDERSTANDING OF THE DECLINE IN FERTILITY WITH INCREASING AGE AND ATTITUDES TOWARDS OVARIAN RESERVE SCREENING

1. Thompson A1  
2. De Lacey S2  
3. Tremellen K1

1Department of Obstetrics, Gynaecology and Reproductive Medicine, Flinders University, Bedford Park, South Australia, Australia.  
2School of Nursing & Midwifery, Flinders University, Bedford Park, South Australia, Australia.

Background/Introduction: Over the last four decades, a trend towards older parenthood has developed in the majority of industrialised countries (OECD 2017). Surveys suggest that 57% of childless women over 35 years still intend to have a child, with this being a particularly common trend among professional women (Schmidt et al. 2012). Therefore, the objectives of this study were to determine Australians’ understanding of the decline in fertility with age, social determinants that influence their decision to start a family and attitudes towards ovarian reserve screening as a tool allowing personalised reproductive life planning. In the vast majority of women, there are no warning symptoms for premature aging of the ovaries (Tremellen and Savulescu 2014). Therefore, ovarian reserve screening using tests such as serum Anti-Mullerian hormone may be a useful clinical tool to identify those women with reduced ovarian reserve, as serum Anti-Mullerian hormone levels have been reported to be positively correlated with the amount of residual oocytes within the ovary (Iliodromati and Nelson 2013)(Fleming et al. 2015).

Methods: Online survey of 383 childless Australian men and women, aged 18 to 45 years, using the Survey Monkey platform. Women were recruited voluntarily whereas men were recruited through Q&A Market Research, Queensland.

Results/outcomes: Both sexes overestimated natural and in vitro fertilisation(IVF) assisted fertility potential with increasing age, with the magnitude of overestimation being more pronounced for men and IVF treatment compared with natural conception. The primary determinants for starting a family were a stable relationship, followed by establishment of career; while availability of accessible child care and paid parental leave were considered less important. Finally, the majority of women (74%) would alter their reproductive life planning if they were identified as having low ovarian reserve on screening. Women in a relationship would change their family planning by trying for a family sooner whereas single women were more likely to consider oocyte cryopreservation.

Conclusions: Despite increased education, Australians continue to have a poor understanding of age-related decline in natural and IVF assisted conception, potentially explaining why many delay starting a family. Ovarian reserve screening may help identify individuals at increased risk of premature diminished fertility, giving these women the ability to bring forward their plans for natural conception or undertake fertility preservation (oocyte freezing).

References:  