I have remaining embryos

What are my options?
If you have embryos in storage that you no longer need for your own treatment you may find it difficult to decide what to do next. Whether or not your treatment was successful, letting go of your frozen embryos can be hard to do. This leaflet guides you through the options for your remaining embryos, and where you can find more information and support to help you when making your choice.

**Where do I start?**

If you decide that you no longer need your embryos for your own treatment, you might be given the option to donate them to research, training or to other patients for their treatment. However, if these choices aren’t right for you, you might decide that it’s time to allow your embryos to perish. This could be a difficult decision for you to make and you may need to consider all your options very carefully.

If you feel you’d like extra support, counselling could help and your clinic may offer this to you. Alternatively, you can organise this yourself. Your GP can give you advice about getting counselling on the NHS or if you’d prefer to go private, the British Infertility Counselling Association (BICA) has a directory of accredited therapists with various options including telephone and Skype counselling. Or, you can contact a patient organisation, such as Fertility Network UK, for support.

**What are my options?**

The options for you to consider will depend on what your clinic is able to offer, and could be to:

- **donate your embryos to a research project.** Embryo research is crucial for developing fertility treatments, and without this IVF would not have been possible. Embryos can only be used for medical research that addresses specific purposes and that we have authorised. This option may only be possible if your clinic has a link with a research project.

- **donate your embryos for training purposes.** Training is vital for all embryologists to improve or learn new techniques.

- **donate your embryos to another person or couple for treatment.** This option will help realise others’ dreams of becoming parents. If this is something you would like to do your clinic can talk you through the process, including meeting the eligibility criteria for being a donor.

- **allow the embryos to perish.** If you decide to take this option, the embryologist will complete this process with respect and sensitivity.
Who decides what happens to my embryos?

This depends upon how your embryos were created. If they were created using both your eggs and sperm then it’s the decision of you and your partner. However, if your embryos were created using donor sperm or eggs, the consent of those donors would be needed.

How long can I keep my frozen embryos for?

You can keep your embryos frozen for up to 10 years (although if you or your partner have premature infertility, you can store them for longer).

However, your embryos can only be frozen for the length of time you consented to, which could be less than the maximum of 10 years. Once they reach the end of their storage period, they will be allowed to perish. So, if you do decide to donate your embryos, let your clinic know as soon as possible, so there is time to use them.

What happens if I don’t make a decision?

If you are unable to reach a decision, or feel you don’t wish to donate your embryos, they will be kept for the period agreed with your clinic. After this, your embryos will be allowed to perish.

Can I change my mind?

Yes, you are free to change your decision to donate your embryos at any stage up until they have been used. You can withdraw your consent via your clinic.

For more information about embryo donation options and support, go to

https://www.hfea.gov.uk/donation/donors/donating-your-embryos/
https://www.hfea.gov.uk/donation/donors/donating-to-research/
https://www.hfea.gov.uk/treatments/explore-all-treatments/getting-emotional-support/
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Did you find this leaflet useful? Could it be improved? Please let us know by emailing enquiriesteam@hfea.gov.uk.

You can also email us if you’d like to know more about our evidence sources.