

Assisted Reproductive Technology

National Summary Report



**Centers for Disease
Control and Prevention**
National Center for Chronic
Disease Prevention and
Health Promotion

Acknowledgments

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For additional information, send an email to artinfo@cdc.gov

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INTRODUCTION TO THE 2017 NATIONAL REPORT

Data from clinics in the United States that use assisted reproductive technology (ART) to treat infertility are a rich source of information about the factors that contribute to a successful ART treatment—the delivery of a healthy live-born infant. Pooling the data from all reporting clinics provides a national picture that could not be obtained by examining data from an individual clinic.

This report is based on ART cycles started in 2017. It provides graphs and charts that use 2017 data related to ART success rates.

The data for this national report come from the 448 US fertility clinics in operation in 2017 that provided and verified data on the outcomes of all ART cycles started in their clinics in the 2017 Assisted Reproductive Technology Fertility Clinic Success Rates Report. Of the 284,385 cycles reported, 196,454 (69%) were started with the intent to transfer at least one embryo. These 196,454 cycles resulted in 68,908 live births (delivery of one or more living infants) and 78,052 infants. The other 87,931 cycles (31%) were banking cycles, where eggs or embryos were cryopreserved (frozen) and stored for potential future use.

The ART cycles reported in 2017 do not include 18 research cycles that were designed to evaluate a new treatment procedure.

A patient's chances of having a pregnancy and a live birth when using ART are influenced by many factors. Some of these factors are patient-related, such as the patient's age or the cause of infertility. Others are clinic-related, such as a clinic's patient selection practices. The national

data include information on many of these factors, which can give potential ART patients an idea of the average chances of success. Average chances, however, do not necessarily apply to a particular individual or couple.

To help patients estimate their chance of having a baby through in vitro fertilization (IVF), the most common type of ART, the Centers for Disease Control and Prevention (CDC) developed the IVF Success Estimator. This online tool uses information about the experiences of women and couples with similar characteristics to estimate a person's chance of having a baby. These estimates are based on the available data and may not be representative of an individual patient's specific experience.

The IVF Success Estimator does not provide medical advice, diagnosis, or treatment. Couples should talk with their doctor about their specific treatment plan and potential for success.

National Summary Figures

The figures in this report provide information about the ages of patients who use ART, their reasons, and the types of procedures performed. They also provide data on pregnancy and infant outcomes and 10-year trends of the types of procedures performed and pregnancy outcomes. The figures include ART cycles that used fresh or frozen embryos from a female patient's own eggs (nondonor eggs) or eggs from another woman (donor eggs).

Figure 1 shows the use of ART in the United States by patient age group. The largest percentage of ART cycles performed in 2017 was among patients younger than age 35. This age group represented 37.6% of all cycles, compared to 22.3% among those aged 35–37, 19.4% among those aged 38–40, 9.4% among those aged 41–42, and 11.3% among those older than age 42. Research cycles are excluded.

Figure 1

ART Use by Age Group—United States, 2017

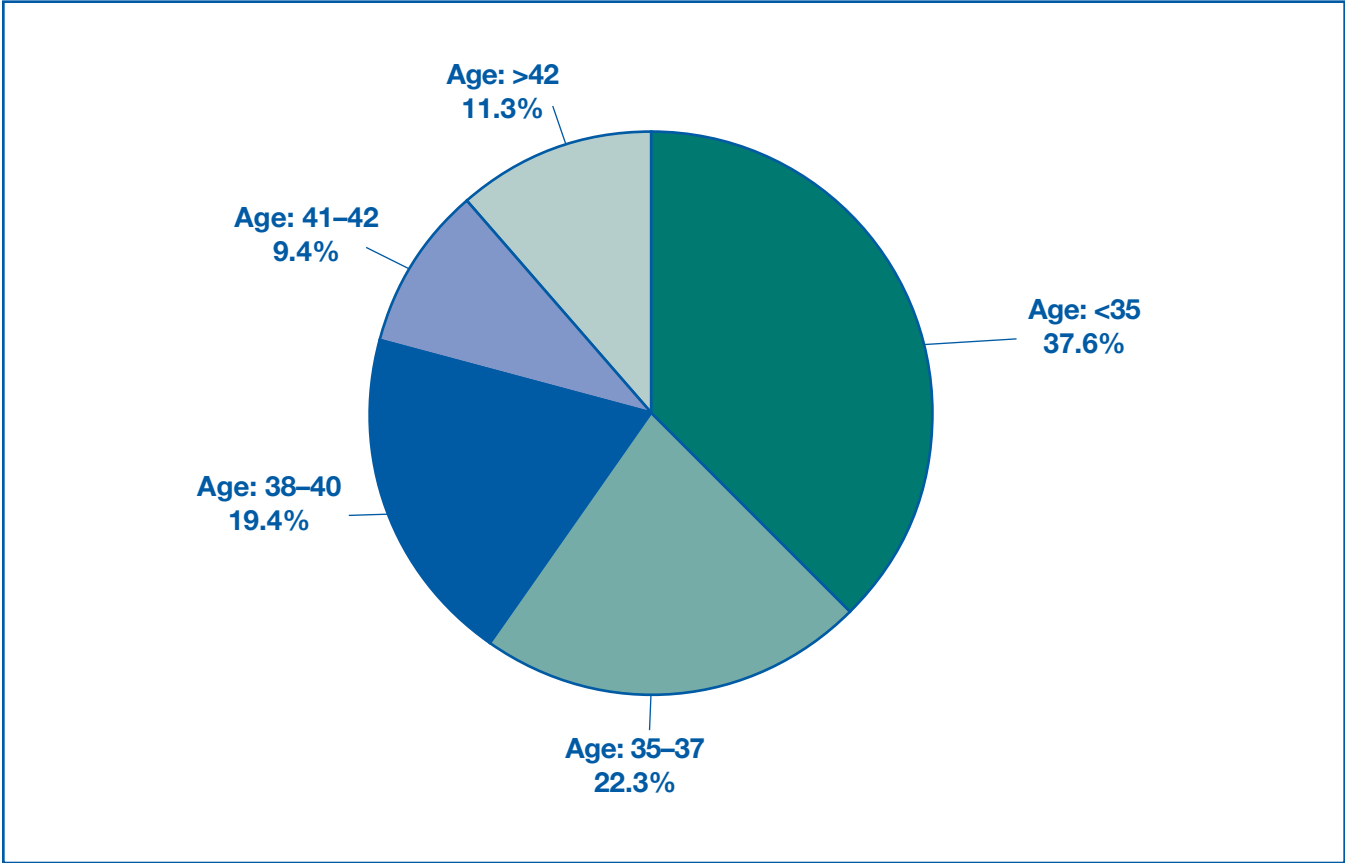


Figure 2 shows the total number of ART cycles performed with an intent to transfer at least one embryo, the number of egg retrievals performed, the number of embryo transfers performed, the number of clinical pregnancies, and the number of live-birth deliveries that occurred using ART in 2017. The cycles displayed (196,454) include fresh or frozen eggs or embryos from patients using their own eggs or embryos or using donor eggs or embryos. Research and banking cycles are excluded.

The number of egg retrievals (146,605) includes cycles that performed an egg retrieval from a donor or a patient using their own eggs with the intent to transfer an embryo within 12 months of cycle start.

The number of embryo transfers (157,499) includes both fresh and frozen eggs and embryos from patients using their own eggs or embryos or using donor eggs or embryos. More embryo transfers occurred than egg retrievals because the number of embryo transfers includes fresh eggs or embryos, as well as those that were previously frozen.

Figure 2

Number of ART Cycles, Egg Retrievals, Embryo Transfers, Pregnancies, and Live-Birth Deliveries—United States, 2017

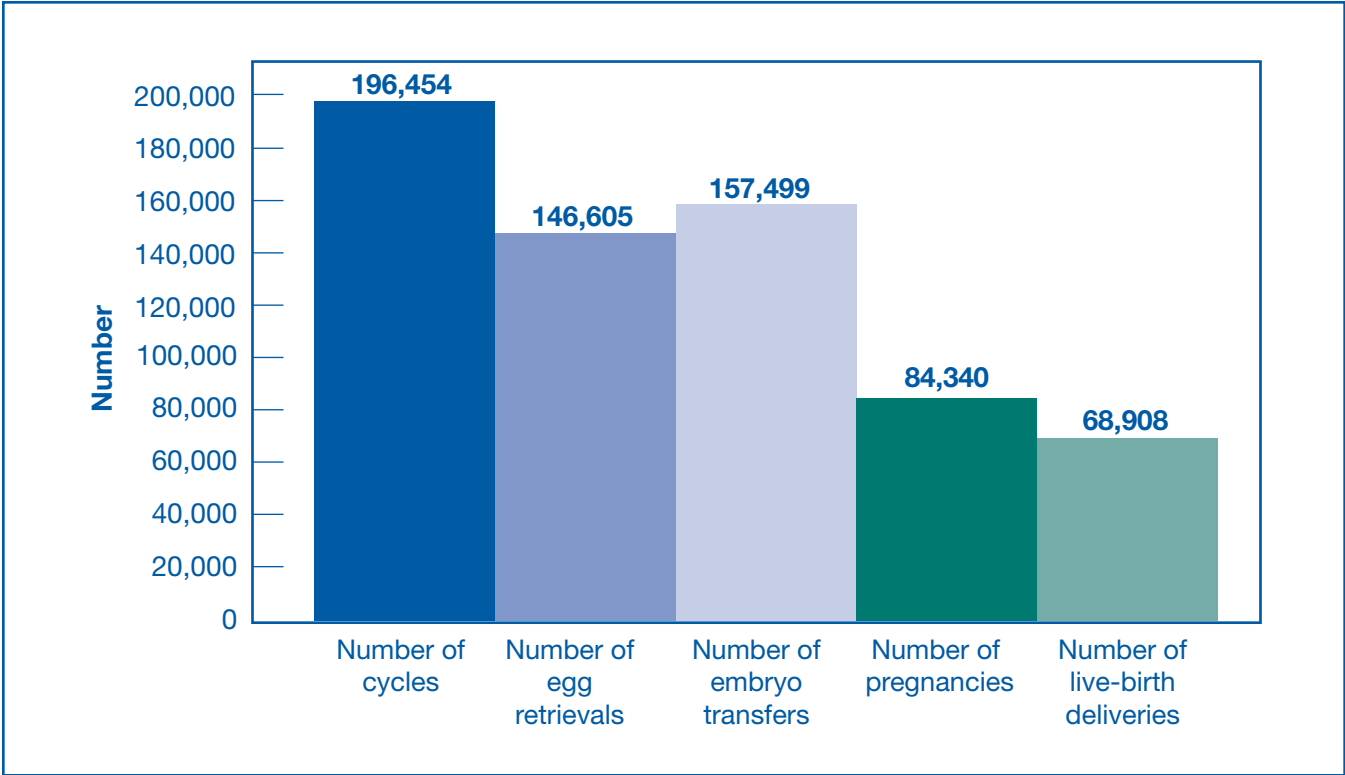


Figure 3 shows the percentage of clinical pregnancies from ART cycles performed in 2017 that used fresh or frozen embryos from patients using their own eggs or embryos or using donor eggs or embryos. Research and banking cycles are excluded.

A clinical pregnancy is a pregnancy that is confirmed by ultrasound. About 82% of clinical pregnancies from ART cycles in 2017 resulted in a live-birth delivery. Of these pregnancies, 71.0% resulted in the birth of a single infant, while 10.7% resulted in the birth of multiple infants. Clinical pregnancies that did not result in a live birth included miscarriage (16.2%) and stillbirth (0.5%). For 1.6% of pregnancies, the outcome was reported as other or unknown.

Both miscarriage and stillbirth describe pregnancy loss, but they are categorized according to when the loss occurs. Miscarriage (also called spontaneous abortion) is a pregnancy ending in the spontaneous loss of the embryo or fetus before 20 weeks of gestation. Stillbirth is pregnancy loss at 20 weeks or more of gestation.

Figure 3
Outcomes of Clinical Pregnancies Resulting From ART—United States, 2017

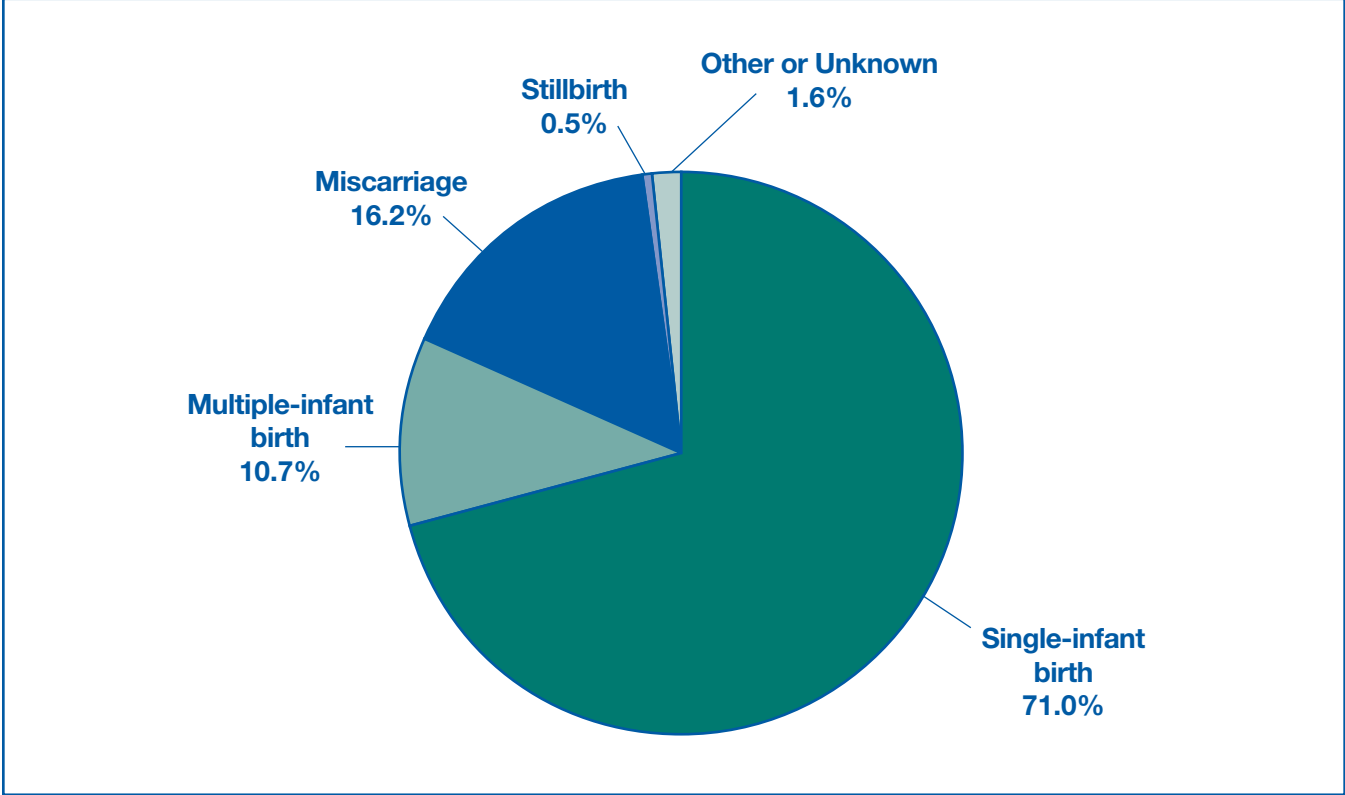


Figure 4 shows the percentage of embryo transfers in which at least one embryo underwent preimplantation genetic testing (PGT), by patient age group and by egg or embryo source (either patients using their own eggs or embryos or using donor eggs or embryos).

PGT is a diagnostic or screening technique performed on embryos before transfer to detect specific genetic conditions and reduce the risk of passing inherited diseases to children. It is also used to screen for an abnormal number of chromosomes, which is of special value for patients with advanced age, recurrent miscarriages, or prior failed IVF.

Patients older than age 42 had the highest percentage of PGT of donor eggs or embryos (31.3%) and the lowest percentage of PGT of patient eggs or embryos (24.6%). Patients aged 38 to 40 had the highest percentage of PGT of patient eggs or embryos (40.3%) and the lowest percentage of PGT of donor eggs or embryos (27.9%).

Figure 4

Percentage of Embryo Transfers That Used Preimplantation Genetic Testing, by Patient Age Group and Egg or Embryo Source—United States, 2017

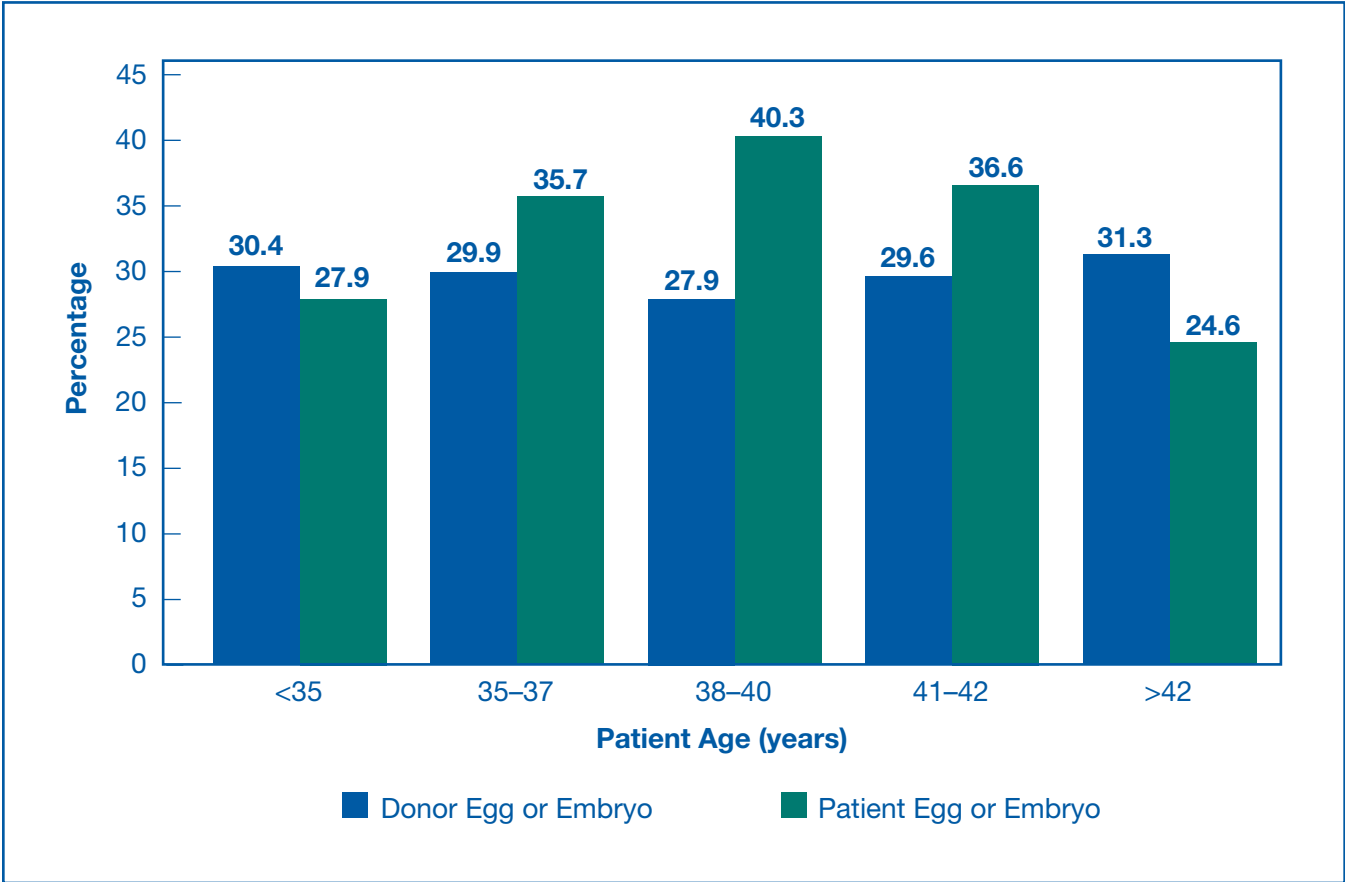


Figure 5 shows the percentage of ART cycles that used fresh or frozen embryos from donor eggs or embryos.

Donor eggs were used in 25,321 ART cycles performed in 2017, of which 2,270 used donated embryos (embryos from another couple that used ART), 3,926 used fresh embryos created from fresh donor eggs, 3,555 used fresh embryos created from frozen donor eggs, and 15,570 used frozen embryos created from donor eggs. Research and banking cycles are excluded.

The use of donated eggs or embryos is most common among women with diminished ovarian reserve, usually as a result of advanced maternal age or premature ovarian insufficiency. Among patients older than age 48, for example, 67.3% of all ART cycles used fresh or frozen donor eggs or embryos; 74.9% of these cycles used frozen embryos created from donor eggs.

Figure 5

Percentage of ART Cycles That Used Donor Eggs or Embryos, by Patient Age—United States, 2017

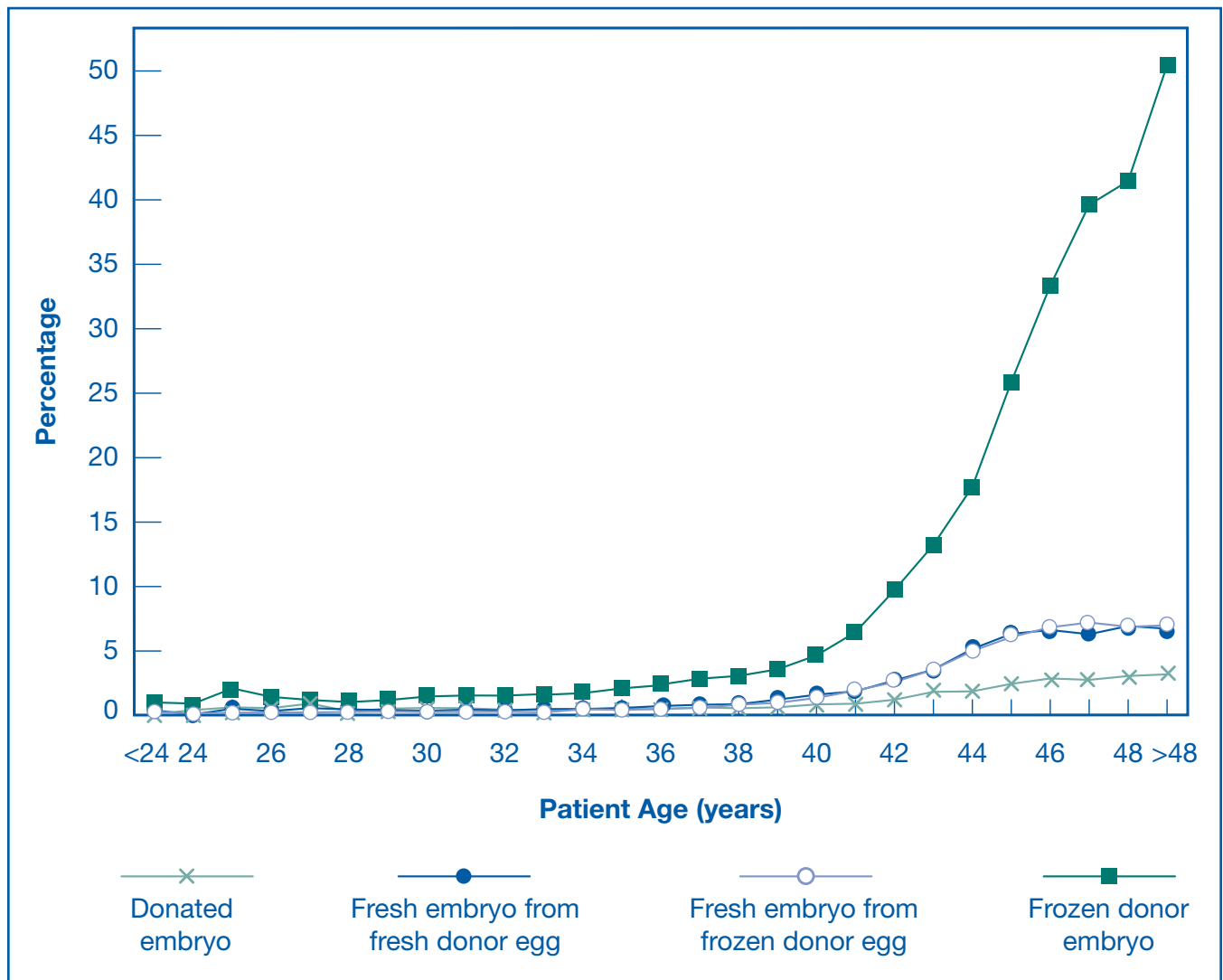


Figure 6 shows the percentage of ART cycles that resulted in live-birth delivery of one or more live infants from one pregnancy. It includes fresh or frozen embryos from patients using their own eggs or embryos or using donor eggs or embryos. Research and banking cycles are excluded.

These percentages reflect individual ART cycles that are based on the initial attempt at egg retrieval or embryo transfer. They do not include multiple egg retrievals or multiple transfers.

The percentage of ART cycles that used patient eggs or embryos and resulted in live-birth deliveries generally decreased as the age of the woman increased (range: 43.0%–2.8%) because the likelihood of a fertilized egg implanting is related to the age of the woman who produced the egg. In contrast, 42.6% (range: 37.2%–57.9%) of ART cycles using donor eggs or embryos resulted in live birth deliveries for women of all ages because egg donors are typically in their 20s or early 30s.

Figure 6

Percentage of ART Cycles That Resulted in Live-Birth Delivery, by Patient Age and Egg or Embryo Source—United States, 2017

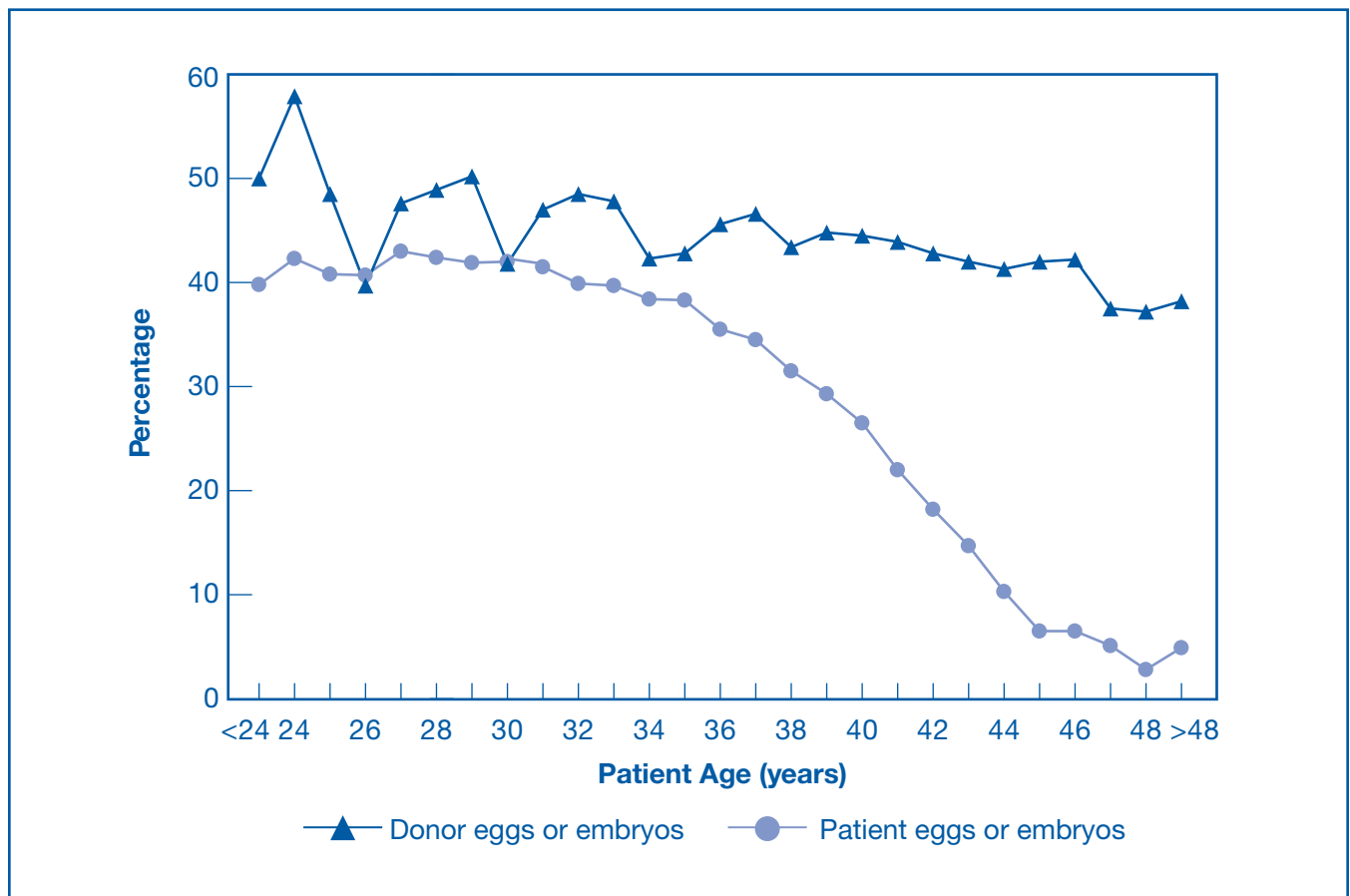


Figure 7 shows the percentage of reported reasons for using ART. Because more than one reason can be reported per cycle, the total percentage adds to more than 100%. The cycles in this figure include fresh or frozen eggs or embryos from patients using their own eggs or embryos or using donor eggs or embryos. Banking cycles are included, but research cycles are excluded.

Diminished ovarian reserve (31.6%) and male factor infertility (28.2%) were the most commonly reported reasons for ART.

Figure 7

Reasons for Using ART—United States, 2017

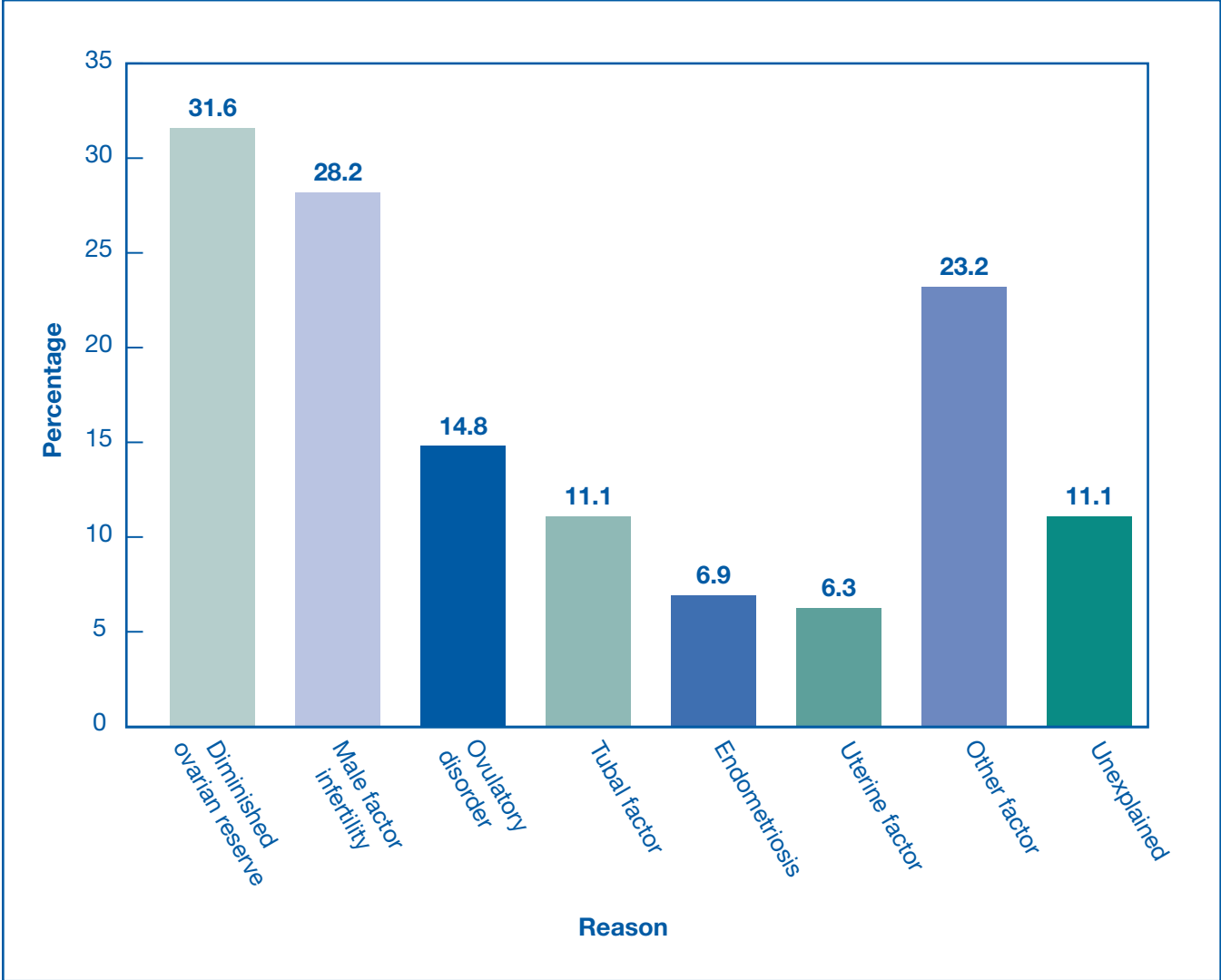


Figure 8 shows the percentage of infants born in 2017 or 2018, from ART procedures performed in 2017, who were born preterm or with low birth weight. It includes patients using their own eggs or embryos or using donor fresh or frozen eggs or embryos. Research and banking cycles are excluded.

Preterm infants are born before 37 full weeks of pregnancy. Low birth weight infants are born weighing less than 2,500 grams (about 5 pounds, 8 ounces). Infants born preterm or with low birth weight are at higher risk of death in the first year of life. They also have a higher risk of other poor health outcomes, including visual and hearing problems, intellectual and learning disabilities, and behavioral and emotional problems throughout life. Preterm and low birth weight infants may also cause considerable emotional and economic burdens for families.

This figure presents percentages for deliveries that resulted in a single live-born infant separately for single-fetus and multiple-fetus pregnancies. Multiple-fetus pregnancies were more likely to result in infants being born preterm or with low birth weight. For example, 11.6% of single infants from single-fetus pregnancies were preterm, compared to 21.8% of single infants from multiple-fetus pregnancies. Percentages of preterm and low birth weight infants increased as plurality (the number of infants born in one delivery) increased. Among triplets, 97.9% were preterm and 95.6% were low birth weight.

Figure 8
Percentage of Infants Born From ART Procedures Performed in 2017 Who Were Preterm or With Low Birth Weight—United States, 2017 or 2018

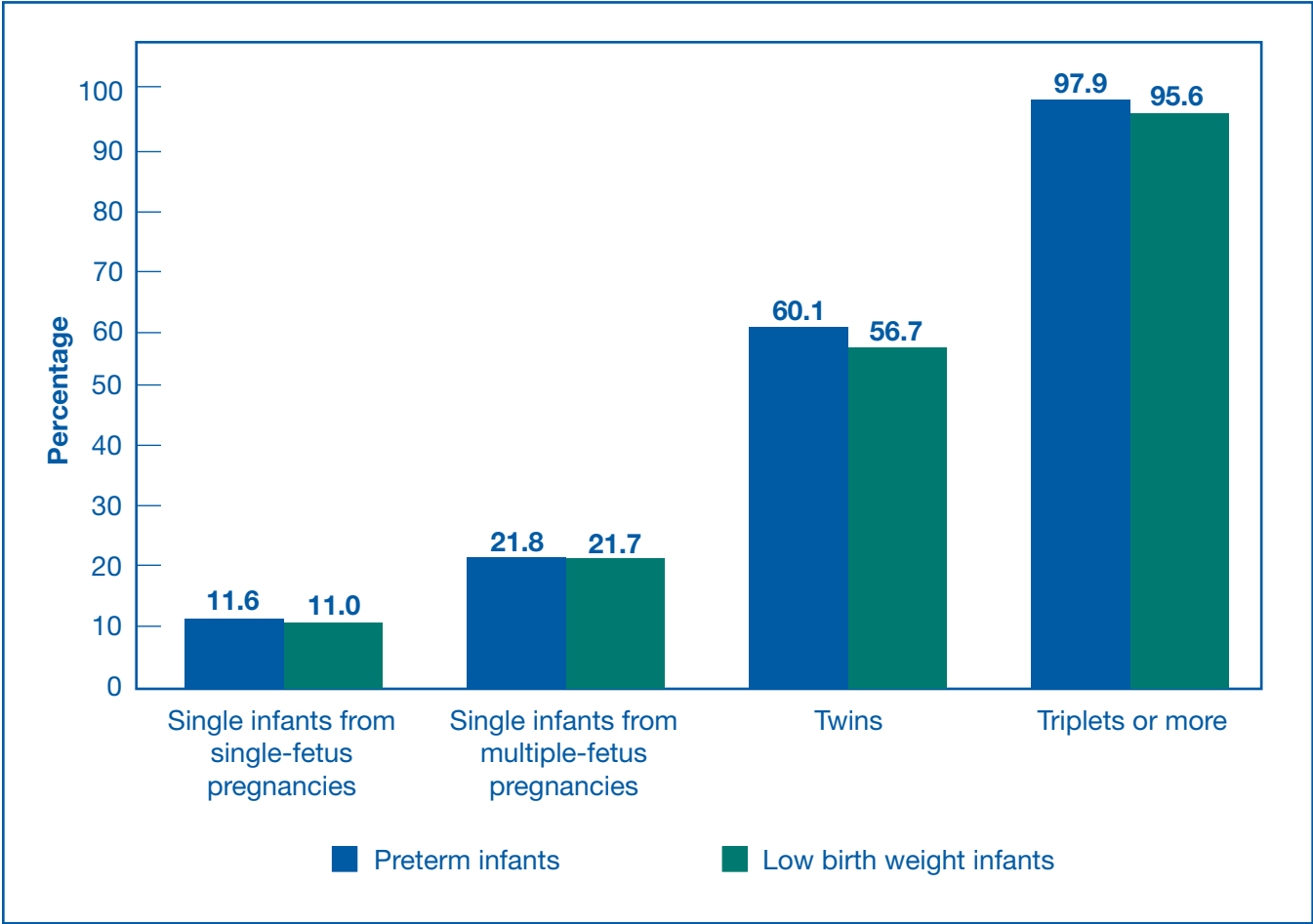


Figure 9 shows the number of ART cycles, embryo transfers, and banking cycles performed and the number of live-birth deliveries that resulted, from 2008 to 2017. It includes fresh or frozen embryos from patients using their own eggs or embryos or using donor eggs or embryos. Research cycles are excluded.

Over the last decade, the number of ART cycles started has increased 87%, from 151,830 cycles in 2008 to 284,385 in 2017. Banking cycles also increased, from 3,773 in 2008 to 87,931 in 2017. The number of embryo transfers in 2017 (157,499) was about 1.3 times higher than in 2008 (125,415). The number of live-birth deliveries in 2017 (68,908) was about 1.5 times higher than in 2008 (46,346).

Figure 9

Number of ART Cycles, Embryo Transfers, and Banking Cycles That Were Performed and Resulted in Live-Birth Deliveries—United States, 2008–2017

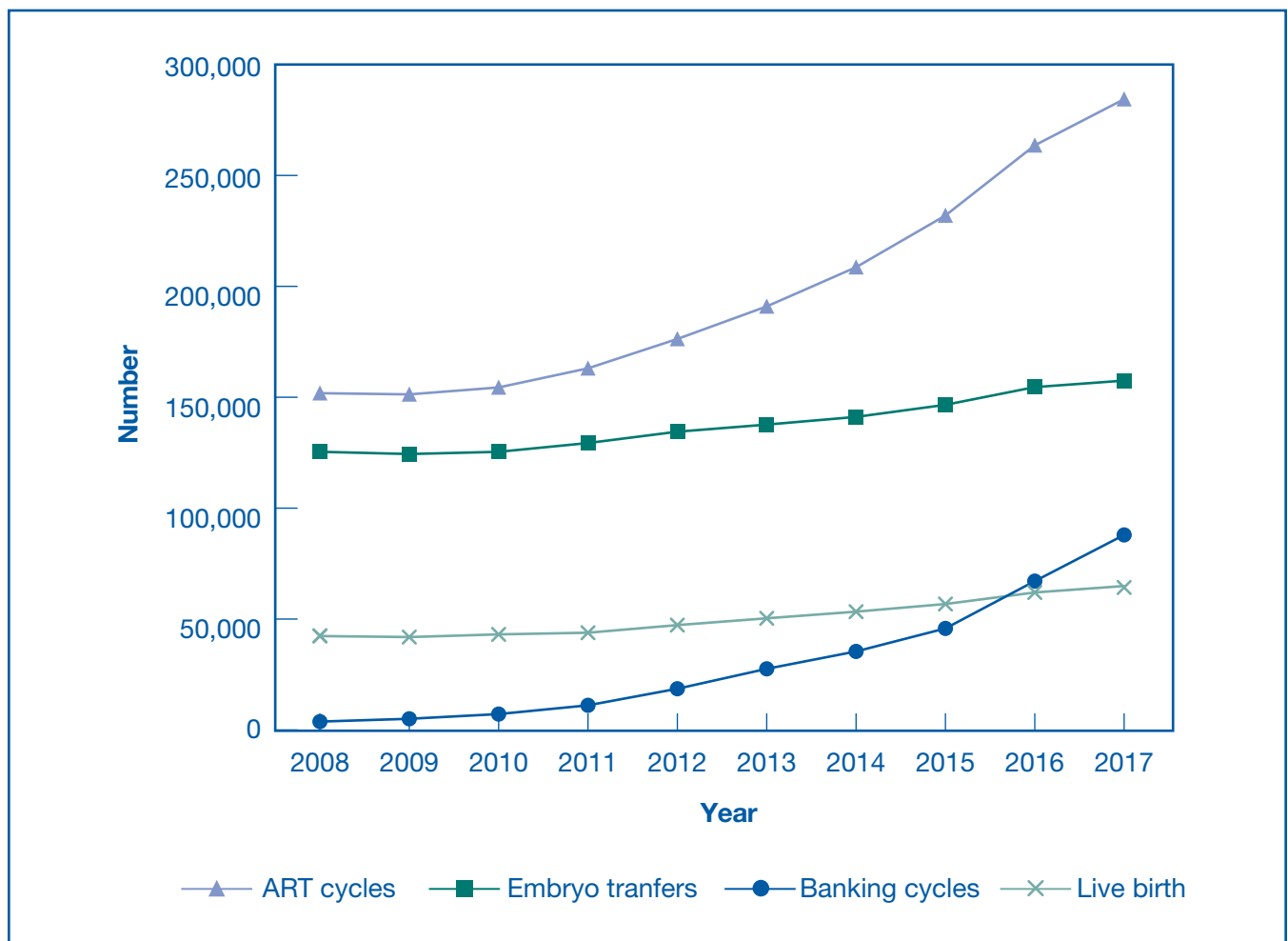


Figure 10 shows the number of ART cycles performed, by egg or embryo source, from 2008 to 2017. It includes fresh or frozen embryos from patients using their own eggs or embryos or using donor eggs or embryos. Research and banking cycles are excluded.

The number of cycles performed using donor eggs or embryos (fresh or frozen) increased from 18,121 in 2008 to 25,321 in 2017. The number of cycles performed using embryos from frozen patient eggs or embryos increased from 25,261 in 2008 to 101,098 in 2017. The number of cycles performed using embryos from fresh patient eggs decreased from 104,673 in 2008 to 70,035 in 2017.

Embryos from fresh patient eggs are fresh patient embryos that were transferred without being frozen from fresh eggs. Embryos from fresh donor eggs are fresh donor embryos that were transferred without being frozen from fresh donor eggs.

Embryos from frozen patient eggs or embryos are patient eggs or embryos that were frozen at some point after retrieval of the egg. They include fresh embryos from frozen eggs or frozen embryos. Embryos from frozen donor eggs or embryos are donor eggs or embryos that were frozen at some point after retrieval of the egg. They include fresh embryos from frozen donor eggs or embryos or from donated embryos.

Figure 10

Number of ART Cycles, by Egg or Embryo Source—United States, 2008–2017

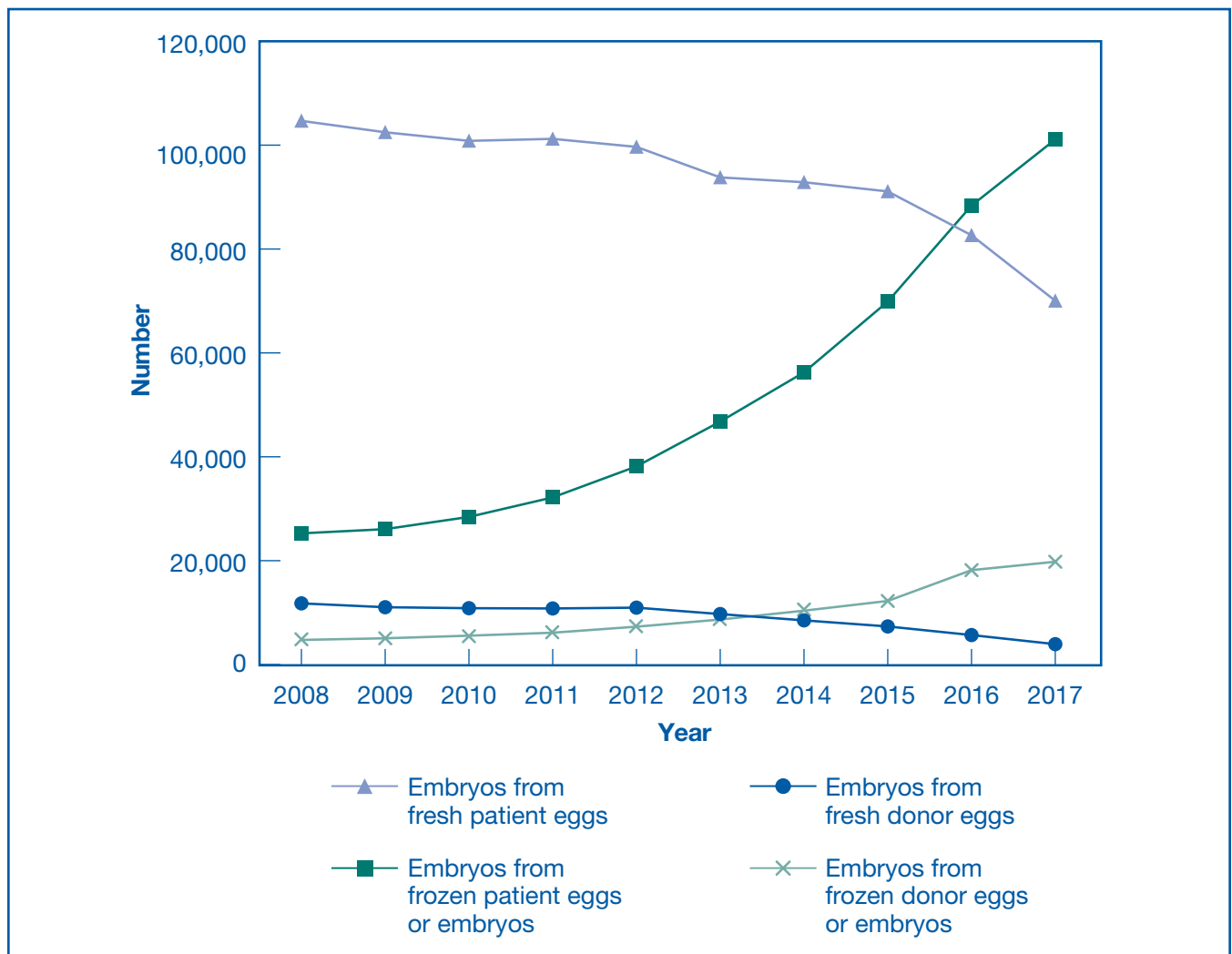


Figure 11 shows the number and percentage of embryo transfers that used a gestational carrier, from 2008 to 2017. It includes fresh or frozen embryos from patients using their own eggs or embryos or using donor eggs or embryos. Research and banking cycles are excluded.

A gestational carrier (also called a gestational surrogate) is a woman who agrees to carry a developing embryo created from another woman’s egg for others.

Over the last decade, the number of embryo transfers for ART cycles that used gestational carriers increased, from 2,589 in 2008 to 6,556 in 2017 (see bars on figure). The percentage of transfers using a gestational carrier also increased, from 2.1% in 2008 to 4.2% in 2017 (see trend line on figure).

Figure 11

Number and Percentage of Embryo Transfers That Used a Gestational Carrier—United States, 2008–2017

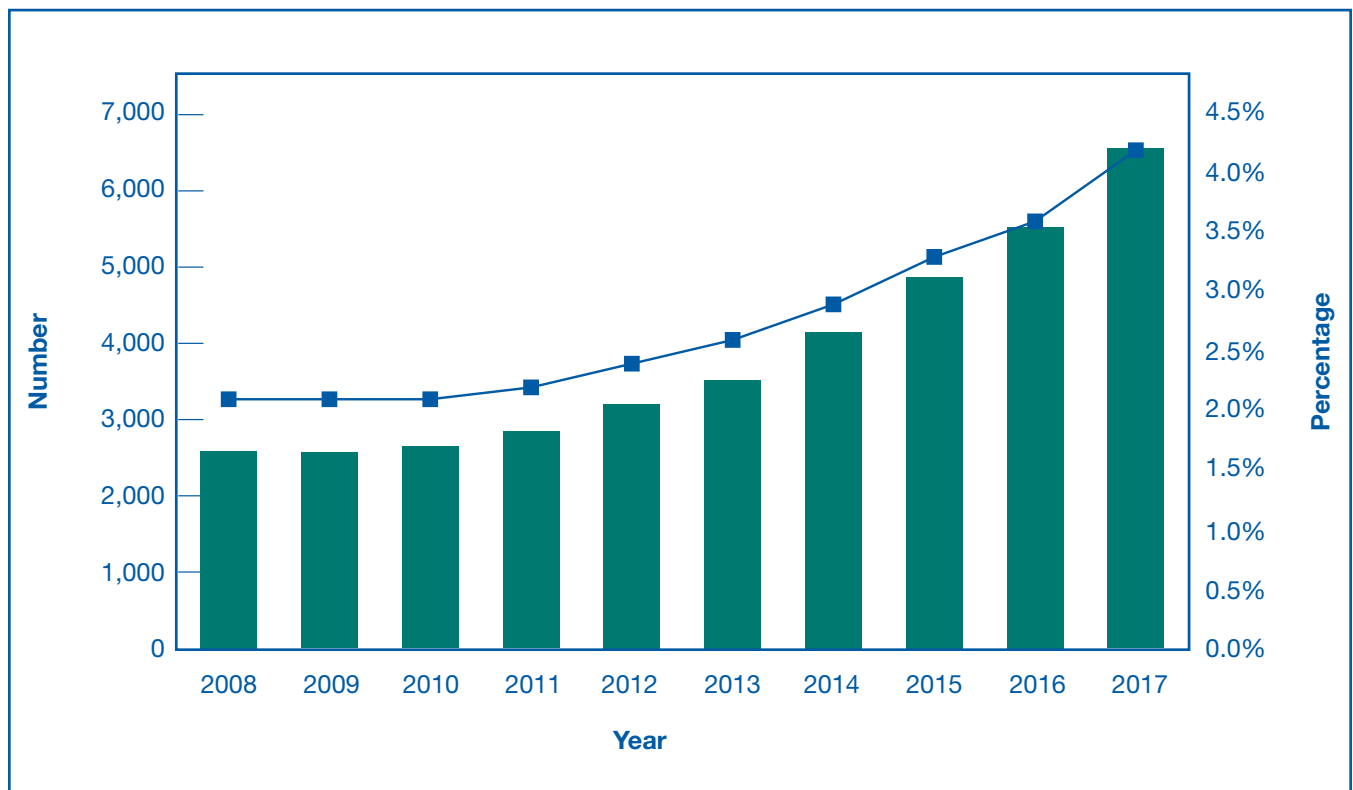


Figure 12 shows the percentage of embryo transfers in which a single embryo was transferred, from 2008 to 2017. It includes fresh and frozen embryos from patients using their own eggs or embryos or using donor eggs or embryos. Research and banking cycles are excluded.

The percentage of single embryo transfer (SET) procedures is the percentage of all embryo transfers in which only one embryo is transferred to the uterus, regardless of the number of embryos available. The use of SET is a strategy to avoid a multiple-fetus pregnancy and reduce the risk of poor health outcomes, such as prematurity and low birth weight, among infants.

Over the last decade, the percentage of SET among all patients increased dramatically, from 13.3% in 2008 to 64.2% in 2017, and this trend was identified among all age groups.

Figure 12

Percentage of Embryo Transfers in Which a Single Embryo Was Transferred—United States, 2008–2017

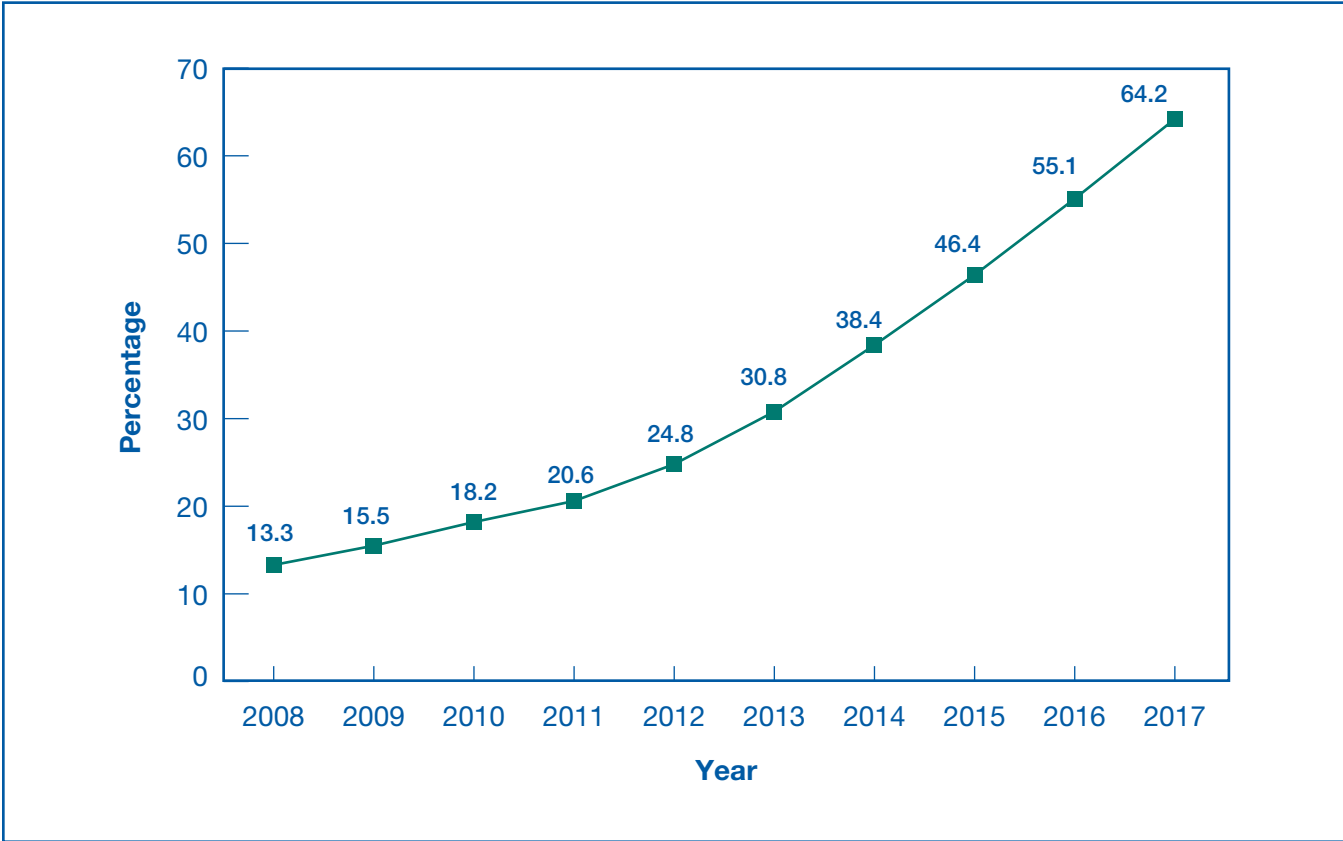


Figure 13 shows the percentage of ART cycles that resulted in live-birth deliveries, by patient age group, from 2008 to 2017. It includes fresh or frozen embryos from patients using their own eggs or embryos or using donor eggs or embryos. Research and banking cycles are excluded.

These percentages are based on individual ART cycles, meaning that cycles that resulted in a live-birth delivery are based on initial intended retrievals or intended transfers. They do not include multiple egg retrievals or multiple transfers.

Over the last decade, the percentage of live-birth deliveries from ART cycles increased among all age groups, from 31.3% in 2008 to 35.1% in 2017. Younger patients had a higher percentage of ART cycles that resulted in live-birth deliveries than older patients.

Figure 13
 Percentage of ART Cycles That Resulted in Live-Birth Deliveries, by Patient Age Group—United States, 2008–2017

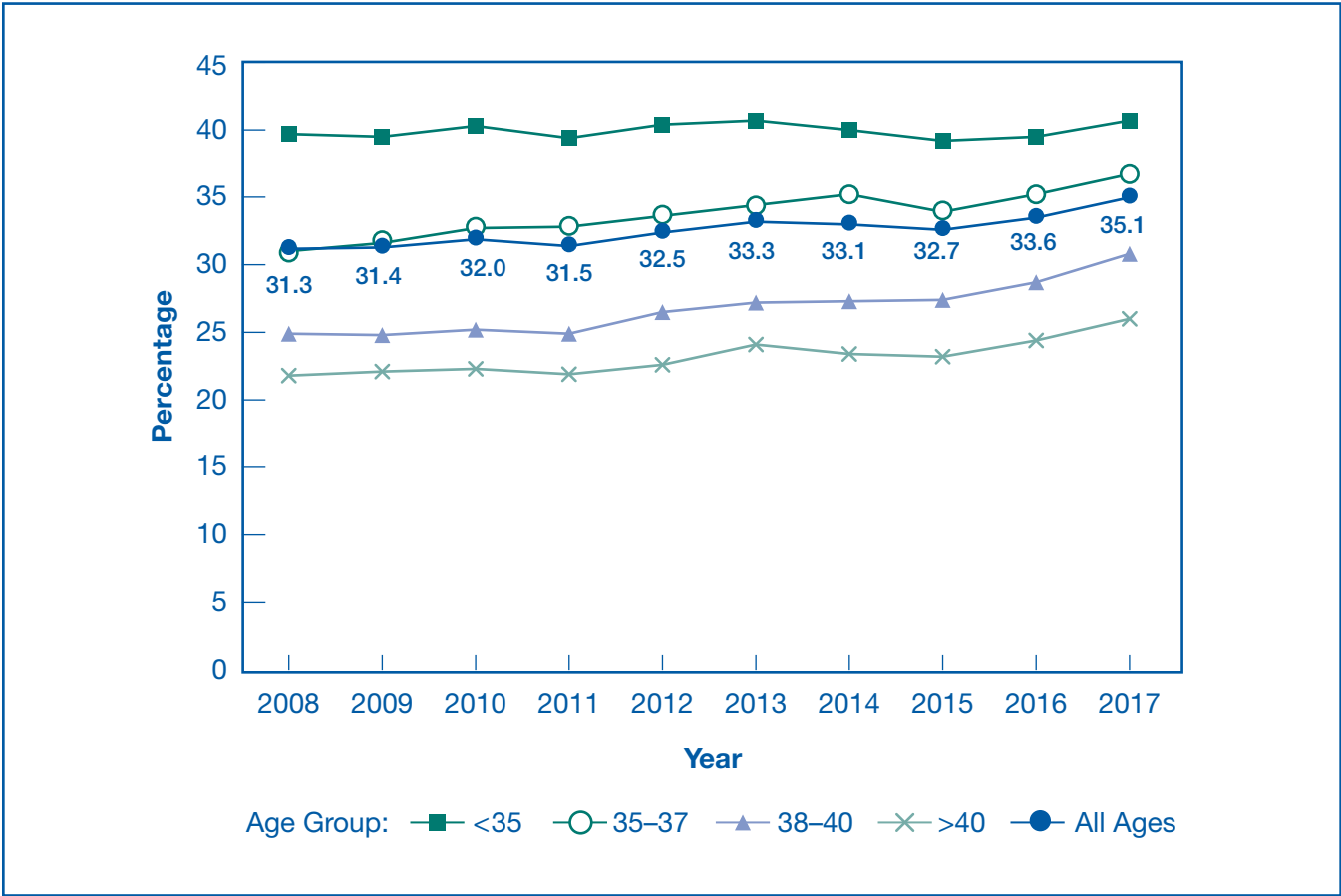


Figure 14 shows the number of infants born from 2008 to 2017 who were conceived using ART. It includes fresh or frozen embryos from patients using their own eggs or embryos or using donor eggs or embryos. Research and banking cycles are excluded.

The number of infants born who were conceived using ART increased from 61,396 in 2008 to 78,052 in 2017. Because more than one infant can be born during a live-birth delivery (for example, twins), the total number of infants born is higher than the number of live-birth deliveries. From 2008 to 2017, the number of ART cycles started and the percentage of ART cycles that resulted in live birth increased.

Figure 14

Number of Infants Born Who Were Conceived Using ART—United States, 2008–2017

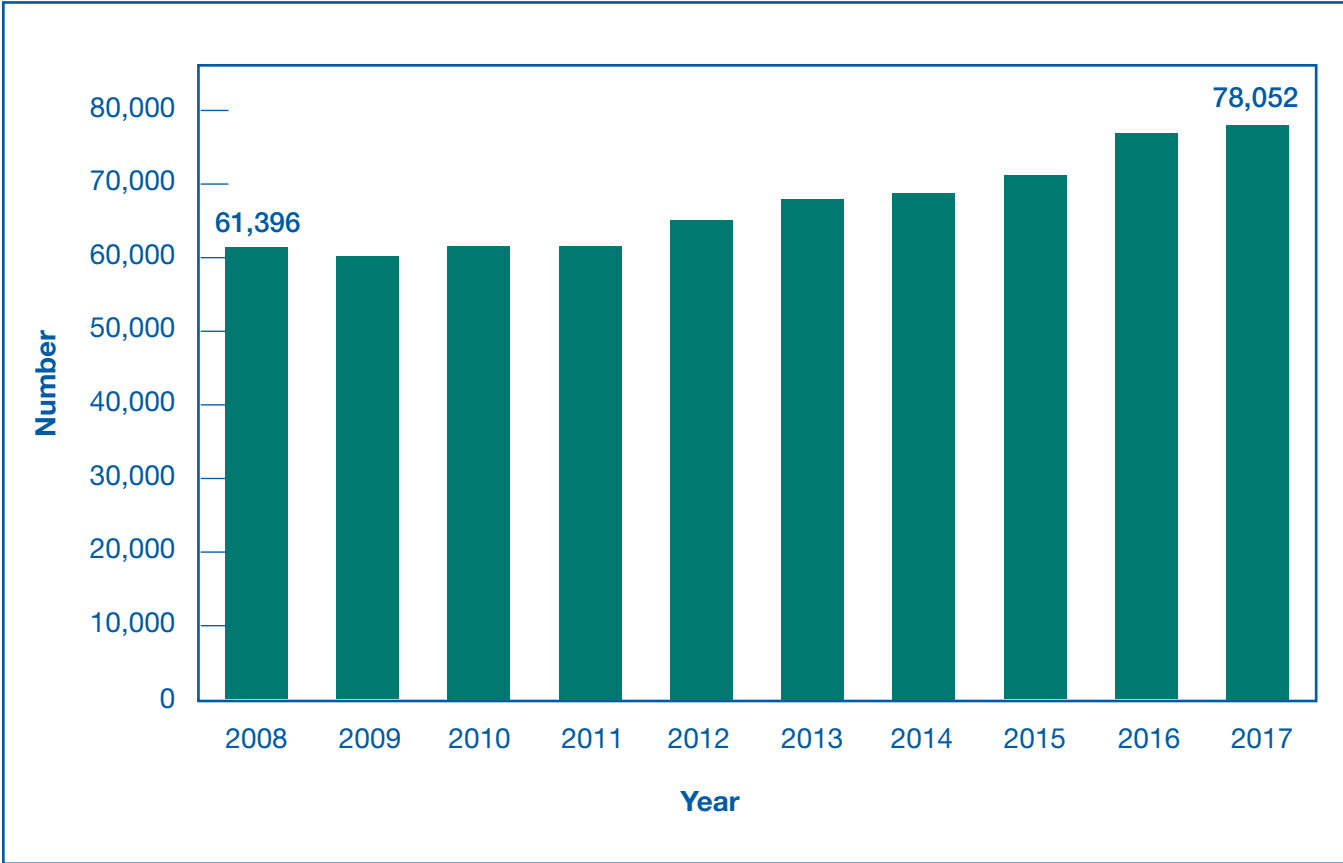


Figure 15 shows the percentage of embryo transfers that resulted in the live birth of singletons, twins, or triplets or more, from 2008 to 2017. It includes fresh or frozen embryos from patients using their own eggs or embryos or using donor eggs or embryos. Research and banking cycles are excluded.

Over the last decade, the percentage of embryo transfers that resulted in singleton births increased from 21.6% in 2008 to 30.5% in 2017, while the percentage that resulted in multiple births decreased. The percentage of twins decreased from 9.1% to 4.5%, while the percentage of triplets or more decreased from 5.3% to 1.0%.

The increased use of single embryo transfer (SET) in recent years has likely contributed to this trend. SET is used to avoid a multiple-fetus pregnancy and reduce the risk of poor health outcomes, such as prematurity and low birth weight, among infants.

Figure 15

Percentage of Embryo Transfers That Resulted in the Live Birth of Singletons, Twins, or Triplets or More—United States, 2008–2017

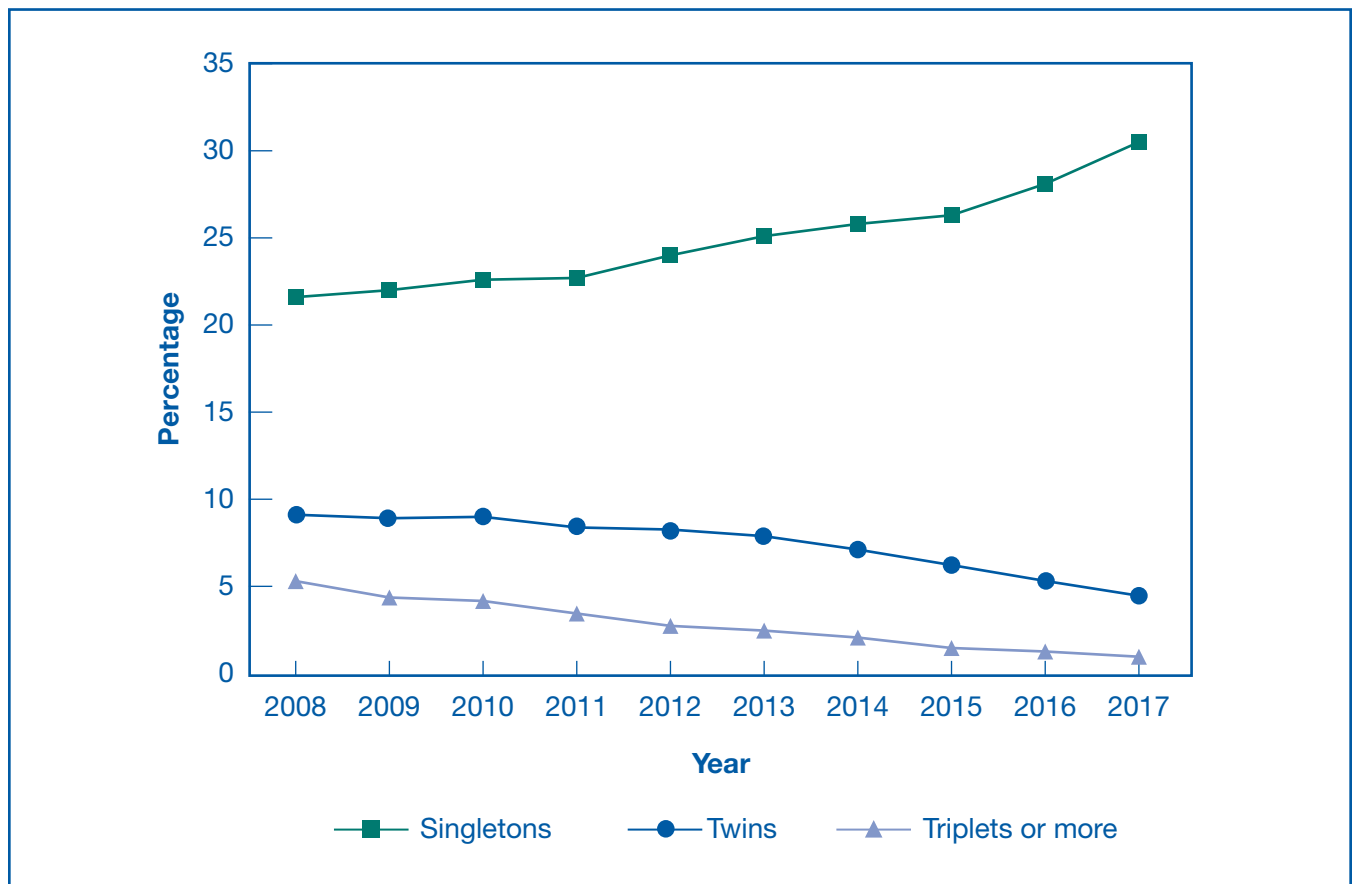
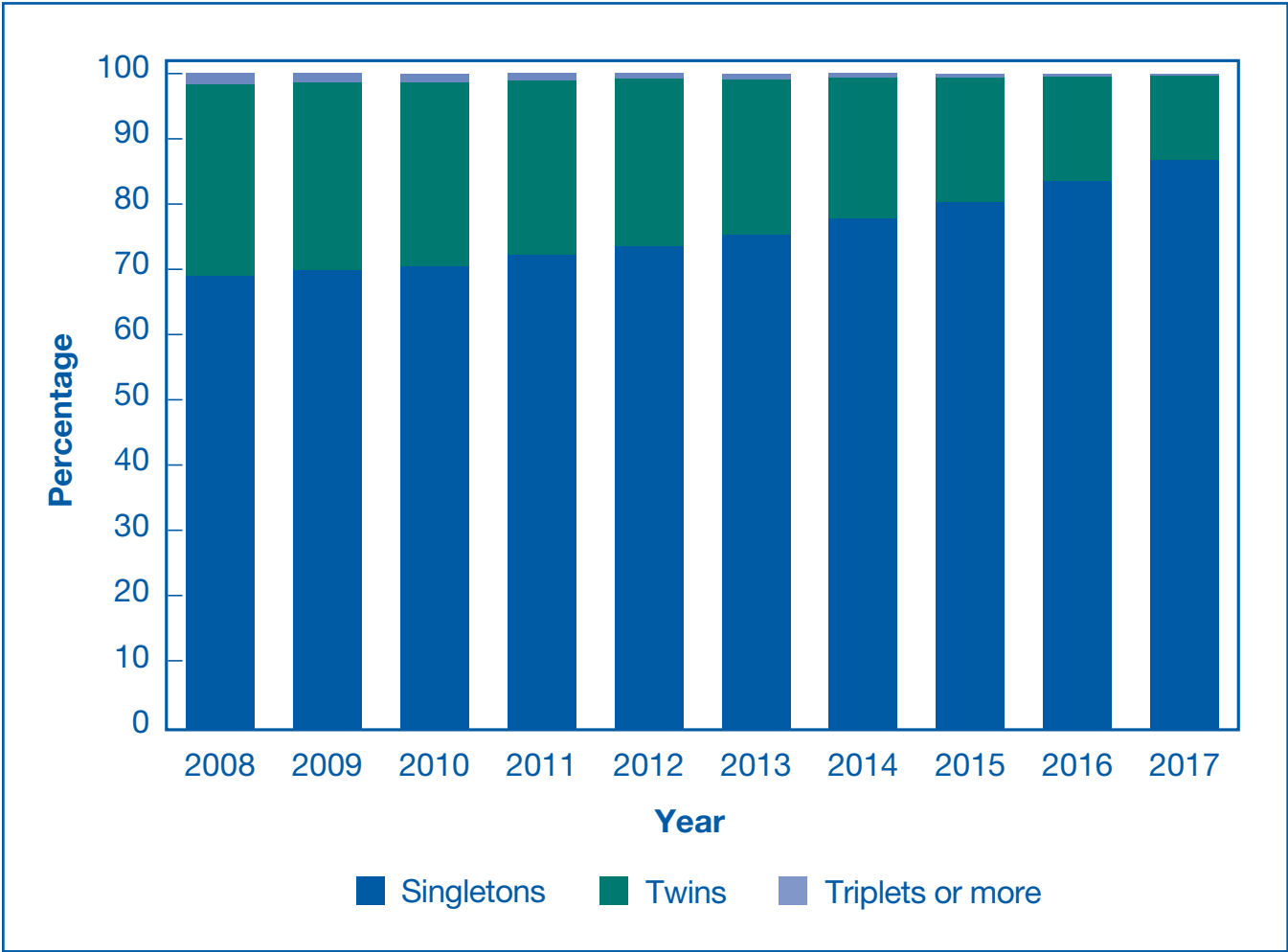


Figure 16 shows the percentage of infants who were conceived using ART cycles that resulted in the live birth of singletons, twins, or triplets or more, from 2008 to 2017. It includes fresh or frozen embryos from patient using their own eggs or embryos or using donor eggs or embryos. Research and banking cycles are excluded.

Over the last decade, the percentage of ART cycles that resulted in single-infant live births increased from 69.2% in 2008 to 87.0% in 2017. The percentage that resulted in twins decreased from 29.1% to 12.7%, while the percentage that resulted in triplets or more decreased from 1.7% to 0.3%.

Figure 16

Percentage of Infants Conceived Using ART and Born as Singletons, Twins, or Triplets or More—United States, 2008–2017



Appendix: Accessible Explanations of Figures

Figure 1. This pie chart shows the distribution of ART use in 2017 by 5 patient age groups. Percentages for each age group are as follows: 37.6% were younger than age 35, 22.3% were aged 35 to 37, 19.4% were aged 38 to 40, 9.4% were aged 41 to 42, and 11.3% were older than 42. ([Page 2](#))

Figure 2. This vertical bar graph shows the total number of ART cycles performed with the intent to transfer an embryo, the number of egg retrievals, the number of embryo transfers, the number of clinical pregnancies, and the number of live-birth deliveries that occurred using ART in 2017. The vertical Y-axis presents numbers from 0 to 200,000 in increments of 20,000. The horizontal X-axis presents the number of cycles, type of procedures, and outcomes. In 2017, there were 196,454 cycles, 146,605 egg retrievals, 157,499 embryo transfers, 84,340 pregnancies, and 68,908 live-birth deliveries. ([Page 3](#))

Figure 3. This pie chart shows the outcomes of clinical pregnancies from ART cycles performed in 2017. Of these pregnancies, 71% resulted in the birth of a single infant, 10.7% resulted in the birth of multiple infants, 16.2% resulted in miscarriage, 0.5% resulted in stillbirth, and 1.6% was reported as other or unknown. ([Page 4](#))

Figure 4. This vertical bar graph shows the percentage of embryo transfers in which at least one embryo underwent preimplantation genetic testing (PGT) in 2017 by patient age. The vertical Y-axis presents percentages from 0% to 45% in increments of 5. The horizontal X-axis presents age groups and whether the cycle used patient eggs or embryos or donor eggs or embryos. For cycles that used patient eggs or embryos, PGT was performed for 27.9% of patients younger than 35, 35.7% of patients aged 35 to 37, 40.3% of patients aged 38 to 40, 36.6% of patients aged 41 to 42, and 24.6% of patients older than 42. For cycles that used donor eggs or embryos, PGT was performed for 30.4% of patients younger than 35, 29.9% of patients aged 35 to 37, 27.9% of patients aged 38 to 40, 29.6% of patients aged 41 to 42, and 31.3% of patients older than 42. ([Page 5](#))

Figure 5. This horizontal line graph shows the percentage of ART cycles that used donor eggs or embryos in 2017 by patient age. The vertical Y-axis presents percentages from 0% to 50% in increments of 5. The horizontal X-axis presents patient age, from younger than 24 to older than 48. The first line shows that the percentage of ART cycles that used frozen donor embryos increased with age from 1% to 50%. The second line shows that the percentage of cycles that

used fresh embryos from frozen donor eggs increased with age from 0.2% to 7%. The third line shows that the percentage of cycles that used fresh donor eggs increased with age from 0.1% to 7%. The fourth line shows that the percentage of cycles that used donated embryos increased with age from 0.1% to 3%. ([Page 6](#))

Figure 6. This horizontal line graph shows the percentage of ART cycles that resulted in live-birth delivery in 2017 by patient age and egg or embryo source. The vertical Y-axis presents percentages from 0% to 60% in increments of 10. The horizontal X-axis presents patient age, from younger than 24 to older than 48. The first line shows that the percentage of ART cycles that used donor eggs or embryos decreased with patient age, from 57.9% to 37.2%. The second line shows that the percentage of ART cycles that used patient eggs or embryos decreased with age, from 43% to 2.8%. ([Page 7](#))

Figure 7. This vertical bar graph shows the reported reasons for using ART in 2017. The vertical Y-axis presents percentages from 0% to 35% in increments of 5. The horizontal X-axis presents 8 reasons for using ART. Percentages for each reason are as follows: 31.6% diminished ovarian reserve, 28.2% male factor infertility, 14.8% ovulatory disorder, 11.1% tubal factor infertility, 6.9% endometriosis, 6.3% uterine factor infertility, 23.2% other factor infertility, and 11.1% unexplained infertility. ([Page 8](#))

Figure 8. This vertical bar graph shows the percentage of infants born in 2017 or 2018 from ART procedures performed in 2017 who were born preterm or with low birth weight. The vertical Y-axis presents percentages from 0% to 100% in increments of 10. The horizontal X-axis presents the type of live-birth delivery. Among single infants born from single-fetus pregnancies, 11.6% were preterm and 11% were low birth weight. Among single infants born from multiple-fetus pregnancies, 21.8% were preterm and 21.7% were low birth weight. Among twin infants, 60.1% were preterm and 56.7% were low birth weight. Among triplet or more infants, 97.9% were preterm and 95.6% were low birth weight. ([Page 9](#))

Figure 9. This horizontal line graph shows the number of ART cycles, embryo transfers, and banking cycles performed and the number of live-birth deliveries that resulted from 2008 to 2017. The vertical Y-axis presents numbers from 0 to 300,000 in increments of 50,000. The horizontal X-axis presents the data reporting year,

from 2008 to 2017. The number of ART cycles started increased from 151,830 in 2008 to 284,385 in 2017. Embryo transfers increased from 125,415 in 2008 to 157,499 in 2017. Banking cycles increased from 3,773 in 2008 to 87,931 in 2017. Live-birth deliveries increased from 46,346 in 2008 to 68,908 in 2017. (Page 10)

Figure 10. This horizontal line graph shows the number of ART cycles performed from 2008 to 2017 by egg or embryo source. The vertical Y-axis presents numbers from 0 to 120,000 in increments of 20,000. The horizontal X-axis presents the data reporting year, from 2008 to 2017. The number of cycles performed using embryos from fresh patient eggs decreased from 104,673 in 2008 to 70,035 in 2017. Cycles performed using embryos from frozen patient eggs or embryos increased from 25,261 in 2008 to 101,098 in 2017. Cycles performed using embryos from fresh donor eggs decreased from 11,777 in 2008 to 3,926 in 2017. Cycles performed using embryos from frozen donor eggs or embryos increased from 6,344 in 2008 to 21,395 in 2017. (Page 11)

Figure 11. This combined vertical bar graph and horizontal line graph shows the number and percentage of embryo transfers that used a gestational carrier from 2008 to 2017. The left vertical Y-axis presents numbers from 0 to 7,000 in increments of 1,000. The right vertical Y-axis presents percentages from 0% to 4.5% in increments of 0.5%. The horizontal X-axis presents the data reporting year, from 2008 to 2017. The number of cycles that used a gestational carrier increased from 2,589 in 2008 to 6,556 in 2017. The percentage of cycles that used a gestational carrier also increased, from 2.1% in 2008 to 4.2% in 2017. (Page 12)

Figure 12. This horizontal line graph shows the percentage of embryo transfers in which a single embryo was transferred from 2008 to 2017. The vertical Y-axis presents percentages from 0% to 70% in increments of 10. The horizontal X-axis presents the data reporting year, from 2008 to 2017. The percentage of embryo transfers that used a single embryo increased from 13.3% in 2008 to 64.2% in 2017. (Page 13)

Figure 13. This horizontal line graph shows the percentage of ART cycles that resulted in live-birth deliveries from 2008 to 2017 by patient age group. The vertical Y-axis presents percentages from 0% to 45% in increments of 5. The horizontal X-axis presents the data reporting year, from 2008 to 2017. For all age groups combined, the percentage of ART cycles that resulted in live-birth deliveries increased from 31.3% in 2008 to 35.1% in 2017. The percentage increased from 39.7% in 2008 to 40.7% in 2017 for patients younger than 35,

from 31% in 2008 to 36.7% in 2017 for patients aged 35 to 37, from 24.9% in 2008 to 30.8% in 2017 for patients aged 38 to 40, and from 21.8% in 2008 to 26% in 2017 for patients older than 40. (Page 14)

Figure 14. This vertical bar graph shows the number of infants born from 2008 to 2017 who were conceived using ART. The vertical Y-axis presents numbers from 0 to 80,000 in increments of 10,000. The horizontal X-axis presents the data reporting year, from 2008 to 2017. The number of infants born was 61,396 in 2008, 60,176 in 2009, 61,556 in 2010, 61,599 in 2011, 65,151 in 2012, 67,996 in 2013, 68,782 in 2014, 71,152 in 2015, 76,892 in 2016, and 78,052 in 2017. (Page 15)

Figure 15. This horizontal line graph shows the percentage of embryo transfers that resulted in the live birth of singletons, twins, or triplets or more from 2008 to 2017. The vertical Y-axis presents percentages from 0% to 35% in increments of 5. The horizontal X-axis presents the data reporting year, from 2008 to 2017. The first line shows that the percentage of embryo transfers that resulted in singletons increased from 21.6% in 2008 to 30.5% in 2017. The second line shows that the percentage of transfers that resulted in twins decreased from 9.1% in 2008 to 4.5% in 2017. The third line shows that the percentage of transfers that resulted in triplets or more decreased from 5.3% in 2008 to 1% in 2017. (Page 16)

Figure 16. This vertical stacked bar graph shows the percentage of infants conceived using ART cycles that resulted in the live birth of singletons, twins, or triplets or more from 2008 to 2017. The vertical Y-axis presents 0% to 100% in increments of 10. The horizontal X-axis presents the data reporting year, from 2008 to 2017. The first stack shows that the percentage of infants who were part of a singleton live-birth delivery increased from 69.2% in 2008 to 87% in 2017. The second stack shows that the percentage of infants who were part of a twin live-birth delivery decreased from 29.1% in 2008 to 12.7% in 2017. The third stack shows that the percentage of infants who were part of a triplet or more live-birth delivery decreased from 1.7% in 2008 to 0.3% in 2017. (Page 17)



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