

# What is the risk of a pregnancy with multiple fetuses or giving birth to multiple infants among ART pregnancies and live births resulting from frozen nondonor embryos?

Multiple-infant births are associated with greater problems for both mothers and infants, including higher rates of caesarean section, prematurity, low birth weight, and infant disability or death.

Part A of Figure 37 shows that among 16,783 pregnancies that resulted from ART cycles using frozen nondonor embryos, approximately 68% were singleton pregnancies, 21% were twins, and 1% were triplets or more. Approximately 9% of pregnancies ended before the number of fetuses could be accurately determined. Therefore, the percentage of pregnancies with more than one fetus might have been higher than what was reported (approximately 23%).

Part B of Figure 37 shows 13,312 live births in 2012 resulted from ART cycles that used frozen nondonor embryos. Approximately 22% of these live births produced more than one infant. This compares with a multiple-infant birth rate of slightly more than 3% in the general US population.

Although total percentages for multiples were similar for pregnancies and live births, there were more triplet or higher order pregnancies than births. Triplet or higher order pregnancies may be reduced to twins or singletons by the time of birth. This can happen naturally (e.g., fetal death), or a woman and her doctor may decide to reduce the number of fetuses through a procedure called multifetal pregnancy reduction. CDC does not collect information on multifetal pregnancy reductions.

