

What is the risk of a pregnancy with multiple fetuses or giving birth to multiple infants among ART pregnancies and live births resulting from fresh donor eggs?

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 41 shows that among the 6,561 pregnancies that resulted from ART cycles using fresh embryos from donor eggs, approximately 59% were singleton pregnancies, 34% were twins, and 2% were triplets or more. About 5% 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 36%).

Part B of Figure 41 shows 5,607 live births in 2012 resulted from ART cycles that used fresh embryos from donor eggs. Approximately 34% 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.

Figure 41
Distribution of Multiple-Fetus Pregnancies and Multiple-Infant Live Births Among ART Cycles Using Fresh Embryos from Donor Eggs, 2012

