

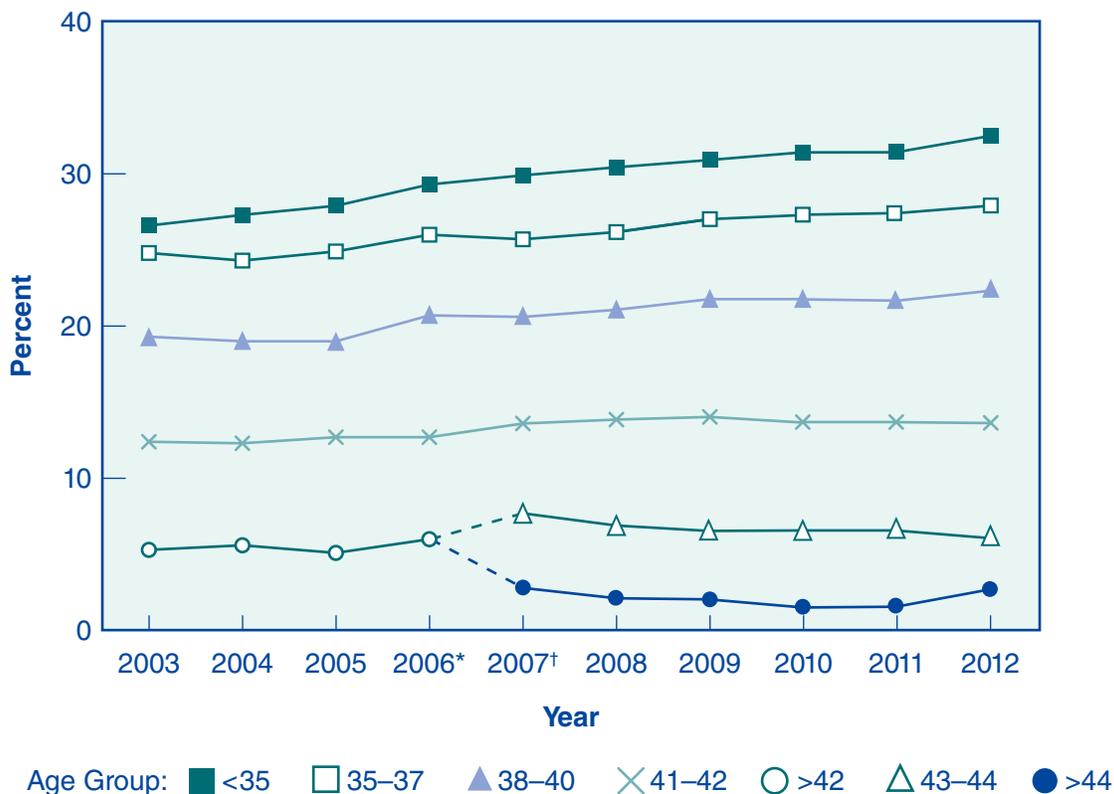
Has the percentage of transfers that resulted in singleton live births for all ART patients changed or only for those in particular age groups?

Singleton live births have a much lower risk than multiple-infant births for adverse infant health outcomes, including prematurity, low birth weight, disability, and death. Figure 49 presents percentages of transfers using fresh nondonor eggs or embryos that resulted in singleton live births, by the age of the woman.

From 2003 through 2012, the percentage of transfers that resulted in singleton live births for women younger than age 35 increased from 27% in 2003 to 32% in 2012. During the same period, the percentage of transfers that resulted in singleton live births increased from 25% to 28% for women aged 35–37, from 19% to 22% for women aged 38–40, and from 12% to 14% for women aged 41–42.

Figure 49

Percentages of Transfers Using Fresh Nondonor Eggs or Embryos That Resulted in Singleton Live Births, by Age Group, 2003–2012



* 2006 was the last year in which data were reported together for women older than age 42.

† 2007 was the first year in which data for women older than age 42 were subdivided into ages 43–44 and >44.