

The [embryo transfer](#) is the process by which we pass a narrow [catheter](#) through your [cervix](#) to place one or two embryos resulting from your [IVF](#) or [ICSI](#) treatment into your [uterus](#) to allow implantation to occur.

We will have selected the best quality [embryo\(s\)](#) with the highest chances of producing a viable pregnancy. If there are any remaining good quality embryos, we will freeze them so that you can use them in the future if you wish to. Check our sections on [frozen embryo transfer](#) and [embryo freezing](#) for more information.

During your fertility treatment and before we perform your [embryo transfer](#), we will talk about the following things with you:

- Is it suitable for you to transfer on Day 5 after an extended [embryo](#) culture ?
- Would an elective [embryo transfer](#) ([eSET](#)) be beneficial for you ?

Not every case is the same. For that reason, we will adapt to your particular situation to make the best decision for your [embryo transfer](#). We are committed to give you the highest chances of having a baby.

Transfer on Day 3 or 5 ?

According to the HFEA "In the UK, roughly three quarters of women have a [blastocyst](#) transfer ([Day 5](#)) and a quarter have a cleavage stage transfer (Day 3)."

In our lab, we aim to culture embryos for a longer period of time and transfer them on Day 5 whenever possible. Here are the main reasons:

- It is safe to keep embryos for that long in culture. Currently available [embryo](#) culture techniques are well established and simulate the natural environment to allow [blastocyst](#) formation.
- Extended culture provides more information about the development. We can detect those embryos who, despite being good quality on Day 3, do not follow a correct development or arrest afterwards. Therefore, we can do a better [embryo](#) selection and have higher live rates per [embryo transfer](#). Check [here](#) for our success rates.
- Embryos that develop to blastocysts on Day 5 are more likely to result in a pregnancy as they have undergone essential gene activation, cell specialisation and differentiation.
- Day 5 is the moment in which the [embryo](#) would naturally enter the [uterus](#). For implantation to happen, the [embryo](#) needs to be on [blastocyst](#) stage.

It is important to know that not all the embryos will reach the [blastocyst](#) stage. Around 30-50% of embryos will survive till this point of development. Because of this, an extended culture and transfer on Day 5 is not suitable for everyone.

If you have a low number of embryos on your IVF or ICSI [cycle](#), it may be likely that very few or none make it to Day 5 and we will consider a transfer on [Day 3](#). We will always discuss this with you during your treatment [cycle](#).

Elective Single [Embryo Transfer](#) ([eSET](#))

All elective single [embryo transfer](#) ([eSET](#)) is the transfer of only one [embryo](#) when there are multiple good quality embryos available for transfer in an IVF or ICSI [cycle](#). Do not worry, eSETs do not reduce success rates. The objective is to have the best chances of pregnancy reducing the chances of it being multiple.

You need to take into account that even if we only transfer one [embryo](#) there is still a small probability of having a multiple pregnancy. This comes from the rare possibility of the [embryo](#) dividing to form twins. According to the HFEA, there is 1-2% risk of a multiple pregnancy with a single [embryo transfer](#).

Although the prospect of a twin pregnancy may sound attractive, you need to be aware of the risks to the developing children ([miscarriage](#), prematurity, birth defects etc) to yourself (gestational high blood pressure, [diabetes](#), anaemia etc) and the long term effects that it could have on you and your family.

We take our commitment to reduce unnecessary multiple births very seriously. With this in mind we look very closely at whether it's appropriate for us to transfer one ([eSET](#)) or two embryos. We will calculate this based on your age, treatment history and the quality of your embryos or blastocysts. We'll always inform you what we believe to be the best strategy for you at the time of your [embryo transfer](#). Please do not hesitate to ask us any questions you may have.

There are two cases in which you can do a [frozen embryo transfer](#).

- If you had surplus embryos frozen during your previous IVF or ICSI [cycle](#).
- If you froze your embryos for fertility preservation.

In either case, we can thaw them and place them in your [uterus](#) exactly as we would in a fresh [cycle](#) to try to establish a pregnancy. Check our section on [FET](#) for more information.

What should I expect on the day ?

You should bring your partner or a friend with you as we would prefer you to have a chaperone and someone to take you home after the procedure.

We will confirm with you the number of embryos we are transferring and let you know the quality. We will then ask you to sign the consent prior to the [embryo transfer](#) taking place. You also have the option of seeing the embryos on the screen before we transfer them if you would like.

Then, you will lay down and one of our Embryologists will bring the [catheter](#) containing the [embryo\(s\)](#) to be transferred. The consultant will introduce the [catheter](#) through your [cervix](#) and place the [embryo\(s\)](#) at the fundus of the [uterus](#) using an [ultrasound](#) to guide him/her.

Finally the [Embryologist](#) will take the [catheter](#) back to the lab to check that the [catheter](#) is clean, meaning that the embryos have been correctly introduced into your [uterus](#) and are not in the [catheter](#). If any [embryo](#) is found on the [catheter](#), the process will be repeated.

What should I do after ?

You do not need to rest after the transfer. Lying on your back for days afterwards will not help the [embryo\(s\)](#) implant and in truth may do more harm than good. We recommend you take things easy, so no parachute jumping or horse riding, but just try to carry on with your life as normal otherwise.

You can have your pregnancy test on the date established by your consultant. This is usually done 15 days after your transfer.

If you would like more information, please [contact us](#).

