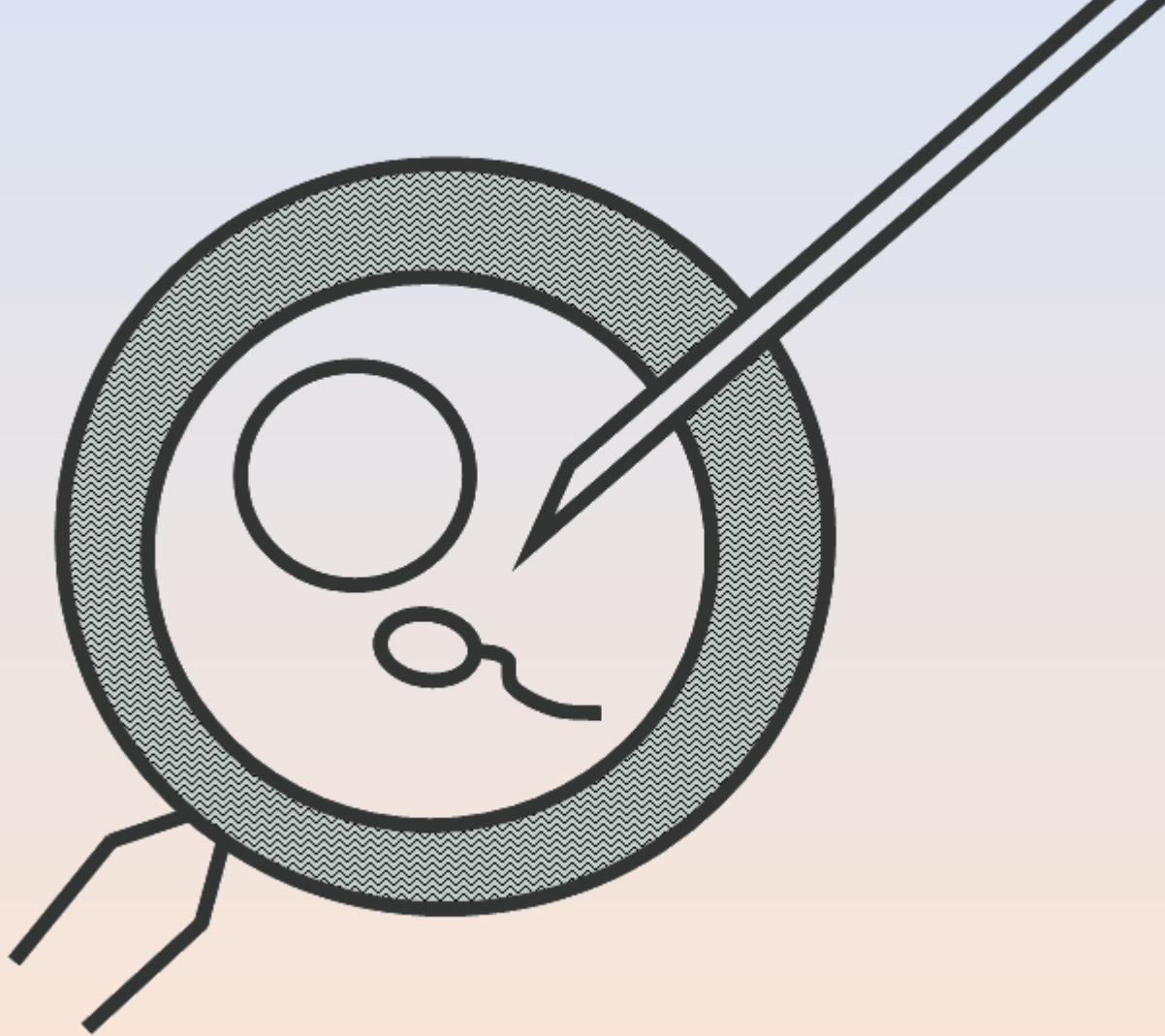




Council on Human Reproductive Technology 2025 Annual Statistics

published in September 2026*

* Statistics on live birth events in relation to reproductive procedures performed in 2025 will be covered in the final version of the Annual Statistics 2025 to be available in 2027.

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Introduction

The Council on Human Reproductive Technology was established under section 4 of the Human Reproductive Technology Ordinance (Cap. 561) (“the Ordinance”) in April 2001 to regulate the provision of reproductive technology (RT) procedures, the conducting of embryo research, the handling, storing or disposing of gametes or embryos used or intended to be used in connection with a RT procedure or embryo research, and surrogacy arrangement.

2. According to section 5(1) of the Ordinance, the Council shall keep under review information about RT activities and publish statistics and summaries concerning relevant activities which have been carried on. To this end, the *Annual Statistics* has been published since 2009.

3. This *2025 Annual Statistics* lists out different RT activities carried out by the licensed centres in operation in the year. It provides graphs, charts and tables that summarize information about the RT activities and its outcomes in 2025. The figures in this publication are based only on RT cycles performed in 2025 and cannot be used to calculate cumulative success rates.

4. As at 31.12.2025, there were a total of 39 valid licences issued by the Council, including 17 Artificial Insemination by Husband (AIH) licences, 19 Treatment licences and 3 Research licences. This publication provides information on the reported outcomes of all RT cycles started in the licensed AIH and treatment centres.

5. RT cycles include any process in which (1) a RT procedure is performed or (2) frozen embryos have been thawed with the intent of transferring them to a woman. For example, an RT cycle could include an embryo transfer. Another cycle could include egg retrieval and storage of embryos.

6. Of the 6,704 non-donor in vitro fertilization (IVF) and frozen-thawed embryo transfer (FET) cycles reported in 2025, a total of 4,026 (60.1%) were started with the intent to transfer at least one embryo. The other 2,678 cycles (39.9%) were banking cycles, where eggs or embryos were cryopreserved (frozen) and stored for potential future use.

7. A patient’s chances of having a pregnancy and live-birth delivery when using RT are influenced by many factors. Some of these factors are patient-related, such as the patient’s age or the cause of infertility. This *Annual Statistics* includes the figures on infertility diagnosis of patients for the reference of readers.

8. This is the interim version of the *2025 Annual Statistics*. The statistics on live birth events in relation to RT procedures performed in 2025 will be covered in the final version of the *Annual Statistics 2025* to be available in 2027.

9. The figures in this report provide data on trends of the types of procedures performed. The figures also include RT cycles that used fresh or frozen oocytes (for non-donor IVF cycles only).

Key Terms used in the Annual Statistics

Terms	Description
Artificial insemination by husband (AIH)	The placing of sperm inside a woman's vagina or uterus (i.e. womb) by means other than sexual intercourse. In artificial insemination by husband (AIH), the husband's sperm is used.
Clinical pregnancy	A pregnancy documented by one or more gestational sacs on ultrasound or the histological confirmation of gestational products in miscarriages or ectopic pregnancies.
Clinical pregnancy rate	Clinical pregnancy rate is expressed as number of clinical pregnancies per 100 treatment cycles started/commenced or per 100 cycles reaching the stage of attempted oocyte recovery/retrieval or embryo transfer (ET).
Donor insemination (DI)	Also known as artificial insemination by donor (AID). DI is an artificial insemination whereby sperm collected from a man who is not the woman's husband is used.
Ectopic pregnancy	A pregnancy in which implantation has taken place outside the uterine cavity.
Heterotopic pregnancy	Simultaneous existence of intrauterine and ectopic pregnancy.
In vitro fertilisation (IVF)	In vitro fertilization (a) means the fertilization of an egg by sperm outside the human body, whether or not the egg was originally removed from the body of that or any other woman; (b) includes any procedure involving the induction or aspiration of an egg, or the culture of an egg for the purposes of any such fertilization. It includes IVF without ICSI and IVF with ICSI.
Intracytoplasmic sperm injection (ICSI)	A method of gamete micromanipulation by which a single sperm is injected into the inner cellular structure of the egg.
Live birth event	For the purposes of the Code of Practice on Reproductive Technology and Embryo Research issued by the Council, live birth event shall mean an event of the birth of one or more than one live child from one single pregnancy. The birth of live twins, triplets and so on will therefore be considered as a single "live birth event".
Live birth event rate	Unless otherwise specified, live birth event (single and multiple live births included) rate is expressed per 100 treatment cycles started, i.e. live birth event rate = Number of live birth events/Number of treatment cycles x 100%
Microsurgical epididymal sperm aspiration/extraction (MESA/MESE)	A surgical procedure performed with the assistance of an operating microscope to retrieve sperm from the epididymis of men with obstructive azoospermia. In the absence of optical magnification, any surgical procedure to retrieve sperm from the epididymis should also be registered as MESE.

Terms	Description
Miscarriage (Spontaneous abortion)	A loss of an intrauterine pregnancy detected clinically or by ultrasound, and less than 24 weeks' gestation (as estimated by the day of embryo transfer or day of ovulation).
Multiple live birth event rate	Unless otherwise specified, multiple live birth event rate is expressed per 100 live birth events (single and multiple live births included), i.e. Multiple live birth event rate = Number of multiple live birth events/Number of live birth events x 100% <i>(Updated definition had been adopted in the Annual Statistics since 2023)</i>
No. of no pregnancy	The number of treatment cycles started and reported by the licensed centre with an outcome of "no pregnancy", including those abandoned and those ending with elective cryopreservation of embryos.
Ongoing pregnancy	Ongoing pregnancy with foetal cardiac activity during the period of the year being reported on.
Ongoing pregnancy rate	Ongoing pregnancy rate is expressed as number of ongoing pregnancies per 100 treatment cycles started /commenced or per 100 cycles reaching the stage of attempted oocyte retrieval or embryo transfer.
Testicular sperm aspiration/extraction (TESA/TESE)	A surgical procedure involving one or more testicular biopsies or needle aspirations to obtain sperm for use in IVF and/or ICSI.
Treatment cycle	The process in which a reproductive technology (RT) procedure is carried out, where a woman has undergone ovarian stimulation or monitoring with the intent of having RT procedure, or frozen embryos have been thawed with the intent of transferring them to a woman. A treatment cycle starts (a) on the day when superovulatory drugs are commenced or (b) from the date of the last menstrual period. This annual statistics only covered treatment cycles that led to (1) Gamete transfer/embryo replacement/insemination, or stopped because of (2) Elective cryopreservation of all embryos or (3) Cycle abandonment.

Key Statistics and Charts

Key Statistics for 2025

A (for non-donor IVF cycles only)

1 Type of RT procedures (%)		2 Patient diagnosis ³ (%)					
(Please refer to Chart A1)		(Please refer to Chart A2)					
IVF ¹ (with ICSI ²)	36.92	Single cause				Multiple causes	
		Endometriosis	2.3	Male factor	19.4	Tubal problem	1.9
		Immunologic problem	0.1	Ovulatory problem	3.6	Other Causes	17.9
IVF (without ICSI)	11.47			Tubo-peritoneal problem	3.3	Unexplained	12.5
Frozen-thawed ET	51.61						

Pregnancy & Live Birth Outcomes		Age Group ⁴						
		25 or below	26-30	31-35	36-40	41-45	46-50	51 or above
3 Fresh embryos from patient couple's own gametes								
a	Number of patients	11	90	806	1321	364	38	1
b	Number of treatment cycles ⁵	13	106	881	1593	571	79	1
c	Number of treatment cycles with embryo transferred	0	15	114	341	99	16	0
d	Average number of embryo transferred	NA	1.00	1.04	1.07	1.36	1.56	NA
e	Clinical pregnancy rate ⁶ (%)	NA	2.8	5.3	6.3	2.3	1.3	NA
4 Frozen embryos from patient couple's own gametes								
a	Number of patients	3	69	707	1337	426	34	1
b	Number of treatment cycles ⁵	5	91	939	1817	566	41	1
c	Number of treatment cycles with embryo transferred	5	91	932	1807	564	41	1
d	Average number of embryo transferred	1.00	1.12	1.08	1.11	1.27	1.59	1.00
e	Clinical pregnancy rate ⁶ (%)	40.0	45.1	53.0	42.6	28.1	7.3	0.0
5 Trends of RT Procedures								
a	Number of patients and treatment cycles	Please refer to Chart A5(a)						
b	Proportion of ICSI cycles (%)	Please refer to Chart A5(b)						

B

1 Storage of Gametes and Embryos	
a	Number of gametes and embryos stored by licensed centres
b	Number of gametes or embryos stored or used for research

Remarks:

NA Not applicable

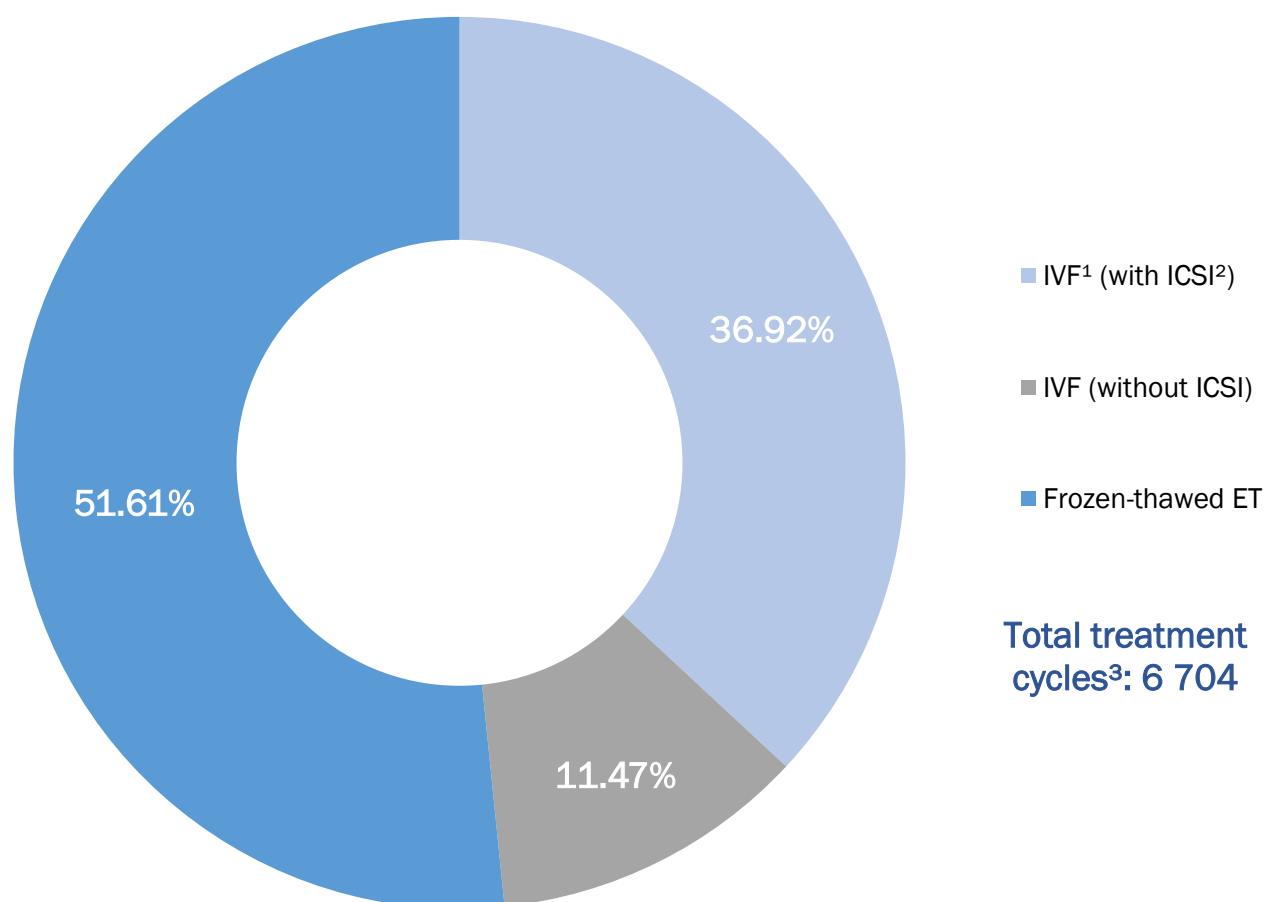
- In vitro fertilization (IVF)** (a) means the fertilization of an egg by sperm outside the human body, whether or not the egg was originally removed from the body of that or any other woman; (b) includes any procedure involving the induction or aspiration of an egg, or the culture of an egg for the purposes of any such fertilization.
It includes Conventional IVF (IVF without ICSI) and IVF with ICSI.
- Intracytoplasmic sperm injection (ICSI)** means a method of gamete micromanipulation by which a single sperm is injected into the inner cellular structure of the egg.
- Total patient diagnosis percentages may be greater than 100% because more than one diagnosis can be reported for each treatment cycle.
- The age of wife has been used in calculating the age of patient.
- (i) **Treatment cycles** refers to the process in which a reproductive technology (RT) procedure is carried out, where a woman has undergone ovarian stimulation or monitoring with the intent of having RT procedure, or frozen embryos have been thawed with the intent of transferring them to a woman. A treatment cycle starts (a) on the day when superovulatory drugs are commenced or (b) from the date of the last menstrual period.

This annual statistics only covered treatment cycles that led to (1) Gamete transfer/embryo replacement/insemination, or stopped because of (2) Elective cryopreservation of all embryos or (3) Cycle abandonment.

- (ii) In this Key Statistics, the treatment cycles for (a) RT procedures involving donated gametes/embryos and (b) involving artificial insemination (i.e. AIH and DI) are excluded in the above table and separately shown in Table 2. To avoid double counting, treatment cycles in which one patient engages in more than one type of RT procedure in one cycle (e.g. IVF and FET) are also excluded in the above table.
- (6) (i) **Clinical pregnancy** means a pregnancy documented by one or more gestational sacs on ultrasound or the histological confirmation of gestational products in miscarriages or ectopic pregnancies.
- (ii) **Clinical pregnancy rate** is expressed as number of clinical pregnancies per 100 treatment cycles started /commenced or per 100 cycles reaching the stage of attempted oocyte retrieval or embryo transfer.
i.e. Clinical pregnancy rate = Number of clinical pregnancies/Number of treatment cycles x 100%
- (7) Licensed centres are required to report the details concerning outcome of pregnancy within 12 months after treatment. Information on live birth for treatment cycles carried out in the later part of 2025 is not yet available.

Charts for selected Key Statistics

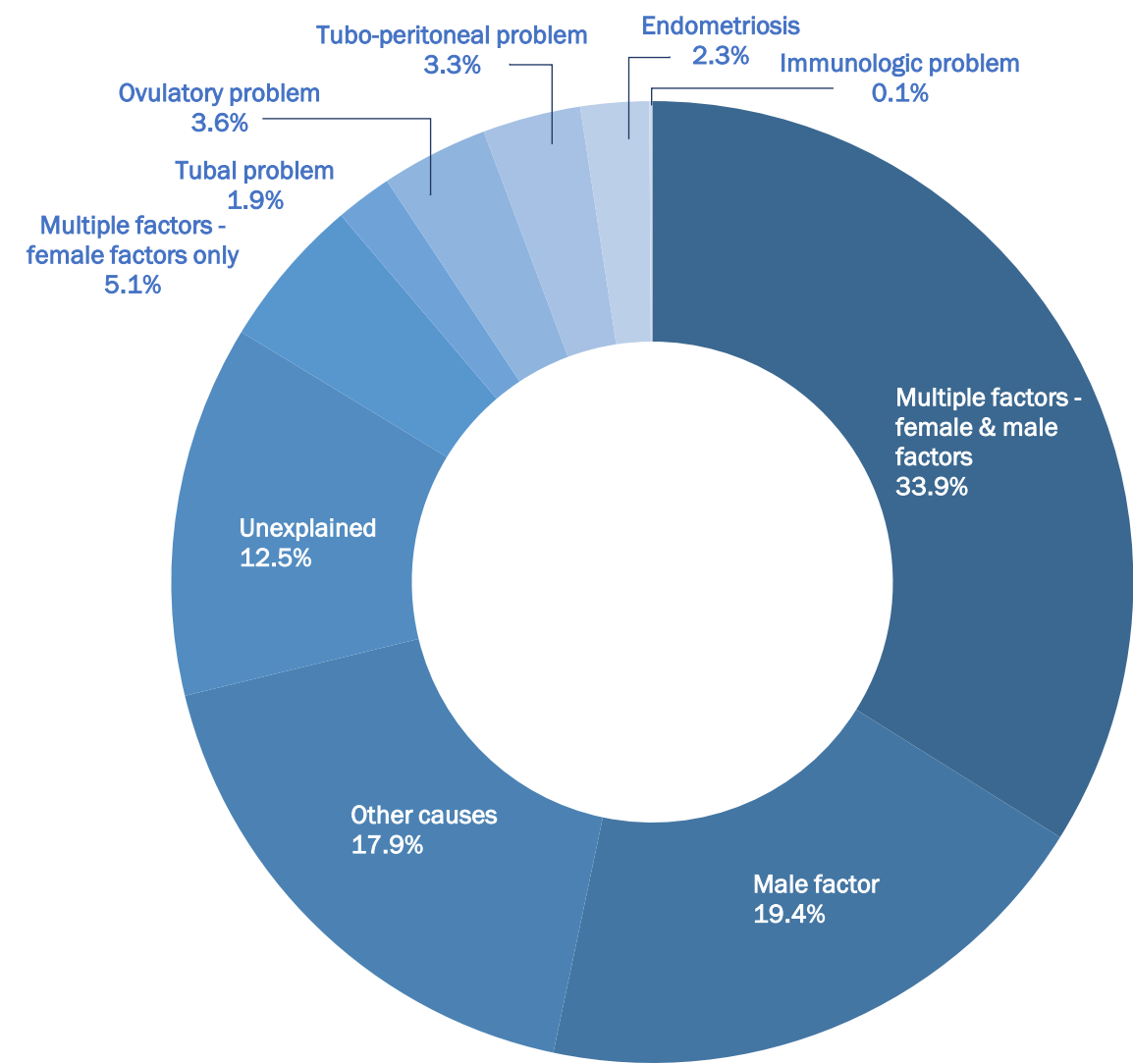
Chart A1 - Type of RT Procedures taken by Patients (%)
(for non-donor IVF cycles only)



Remarks:

- (1) **In vitro fertilization (IVF)** (a) means the fertilization of an egg by sperm outside the human body, whether or not the egg was originally removed from the body of that or any other woman; (b) includes any procedure involving the induction or aspiration of an egg, or the culture of an egg for the purposes of any such fertilization. It includes **IVF without ICSI** and **IVF with ICSI**.
- (2) **Intracytoplasmic sperm injection (ICSI)** means a method of gamete micromanipulation by which a single sperm is injected into the inner cellular structure of the egg.
- (3) (i) **Treatment cycles** refers to the process in which a reproductive technology (RT) procedure is carried out, where a woman has undergone ovarian stimulation or monitoring with the intent of having RT procedure, or frozen embryos have been thawed with the intent of transferring them to a woman. A treatment cycle starts (a) on the day when superovulatory drugs are commenced or (b) from the date of the last menstrual period.
 (ii) In this chart, the treatment cycles for (a) RT procedures involving donated gametes/embryos and (b) involving artificial insemination (i.e. AIH and DI) are excluded in the above chart and separately shown in Table 2. To avoid double counting, treatment cycles in which one patient engages in more than one type of RT procedure in one cycle (e.g. IVF and FET) are also excluded in the above chart.

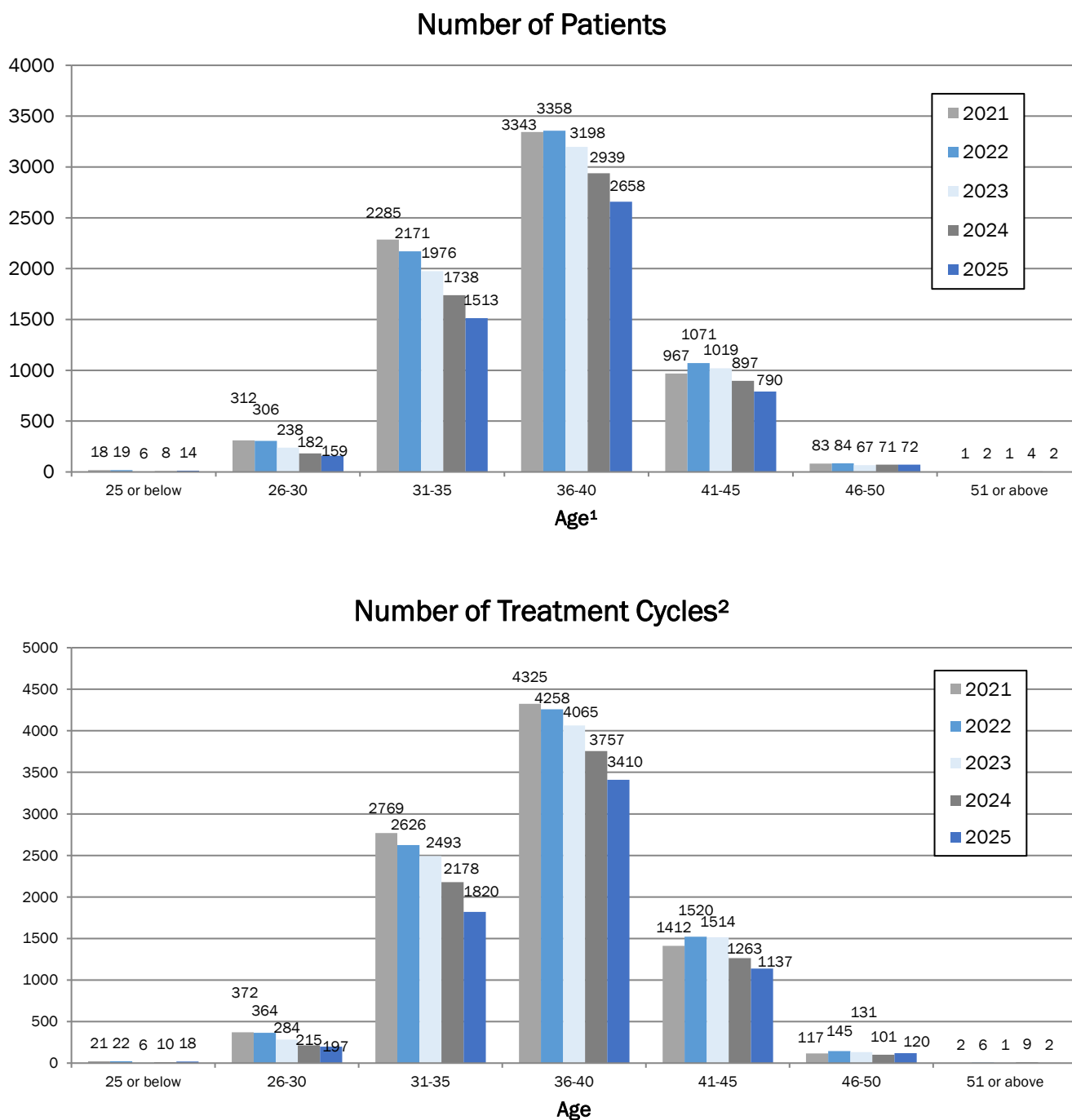
Chart A2 - Patients Diagnosis (%)
(for non-donor IVF cycles only)



Remarks:

(1) “Other causes” of infertility diagnosis reported by licensed centres included advanced maternal age, reduced ovarian reserve, coital problem, polycystic ovary syndrome, etc.

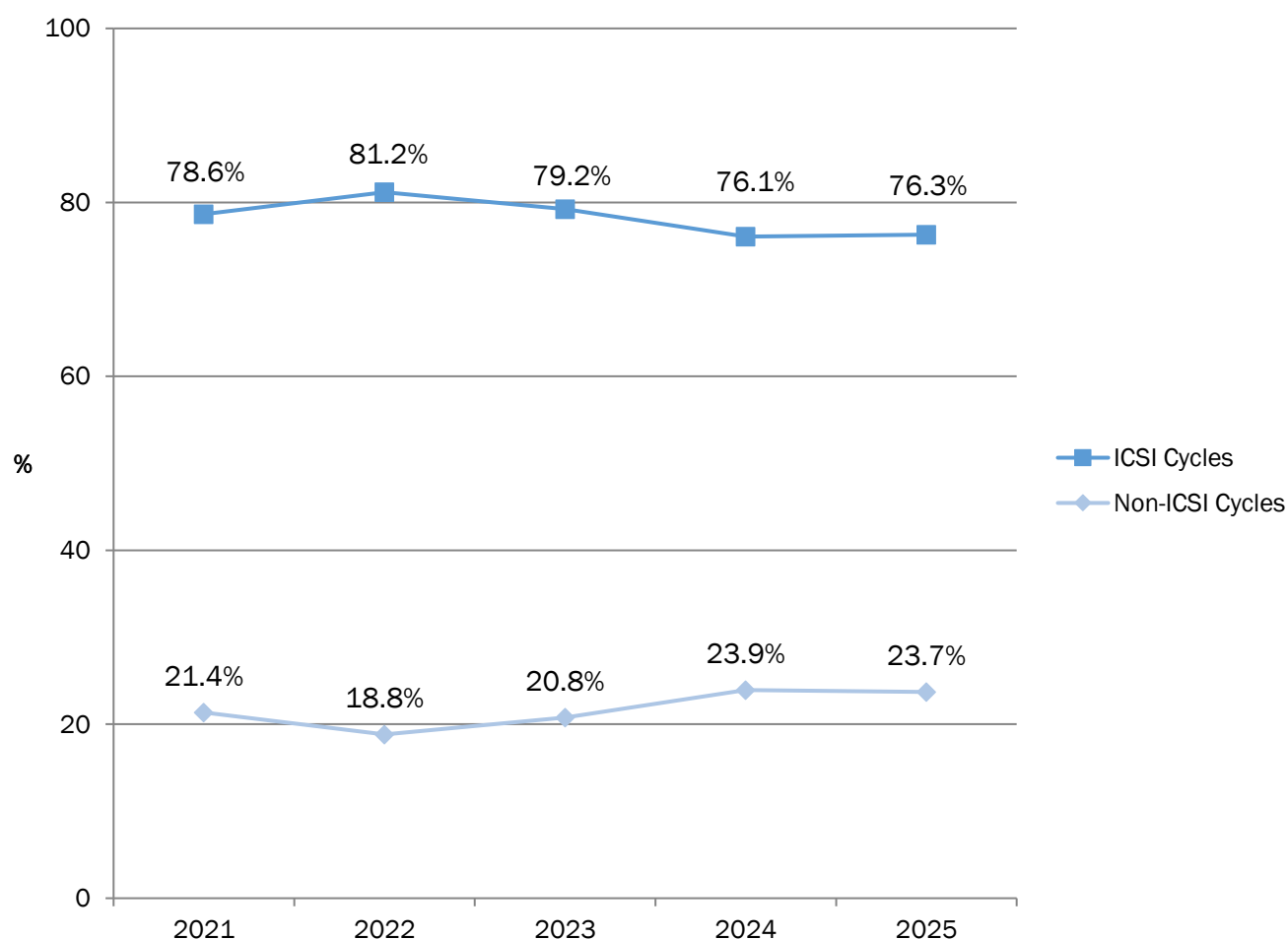
**Chart A5(a) - Number of Patients and Treatment Cycles
(for non-donor IVF cycles only)**



Remarks:

- (1) The age of wife has been used in calculating the age of patient.
- (2) (i) **Treatment cycles** refers to the process in which a reproductive technology (RT) procedure is carried out, where a woman has undergone ovarian stimulation or monitoring with the intent of having RT procedure, or frozen embryos have been thawed with the intent of transferring them to a woman. A treatment cycle starts (a) on the day when superovulatory drugs are commenced or (b) from the date of the last menstrual period.
- (ii) In this chart, the treatment cycles for (a) RT procedures involving donated gametes/embryos and (b) involving artificial insemination (i.e. AIH and DI) are excluded from the above chart and separately shown in Table 2. To avoid double counting, treatment cycles in which one patient engages in more than one type of RT procedure in one cycle (e.g. IVF and FET) are also excluded in the above chart.

Chart A5(b) - Proportion of ICSI¹ Cycles (%)
(amongst all non-donor IVF cycles²)



Remarks:

- (1) **Intracytoplasmic sperm injection (ICSI)** means a method of gamete micromanipulation by which a single sperm is injected into the inner cellular structure of the egg.
- (2) (i) **Treatment cycles** refers to the process in which a reproductive technology (RT) procedure is carried out, where a woman has undergone ovarian stimulation or monitoring with the intent of having RT procedure, or frozen embryos have been thawed with the intent of transferring them to a woman. A treatment cycle starts (a) on the day when superovulatory drugs are commenced or (b) from the date of the last menstrual period.
- (ii) In this chart, the treatment cycles for (a) RT procedures involving donated gametes/embryos and (b) involving artificial insemination (i.e. AIH and DI) are excluded from the above chart and separately shown in Table 2. To avoid double counting, treatment cycles in which one patient engages in more than one type of RT procedure in one cycle (e.g. IVF and FET) are also excluded in the above chart.

Chart B1(a) - Number of Gametes and Embryos Stored by Licensed Centres

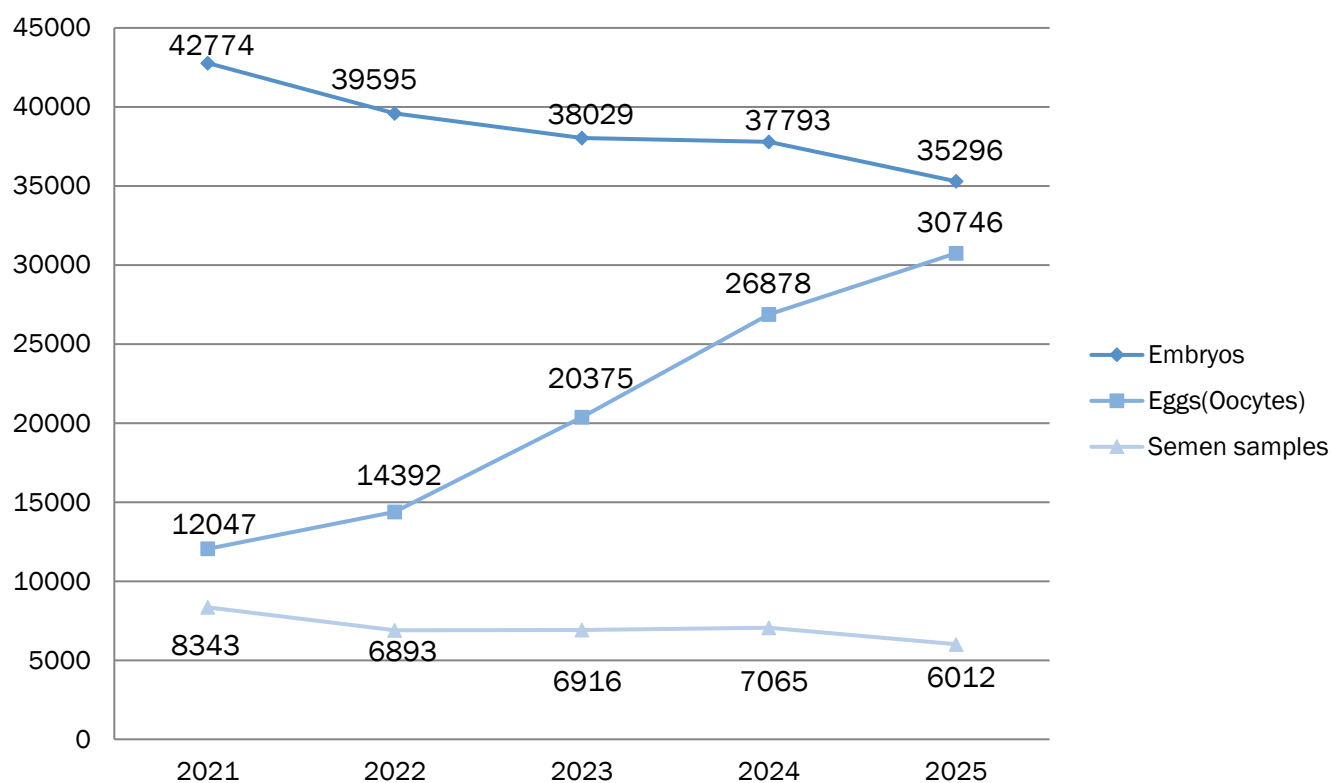
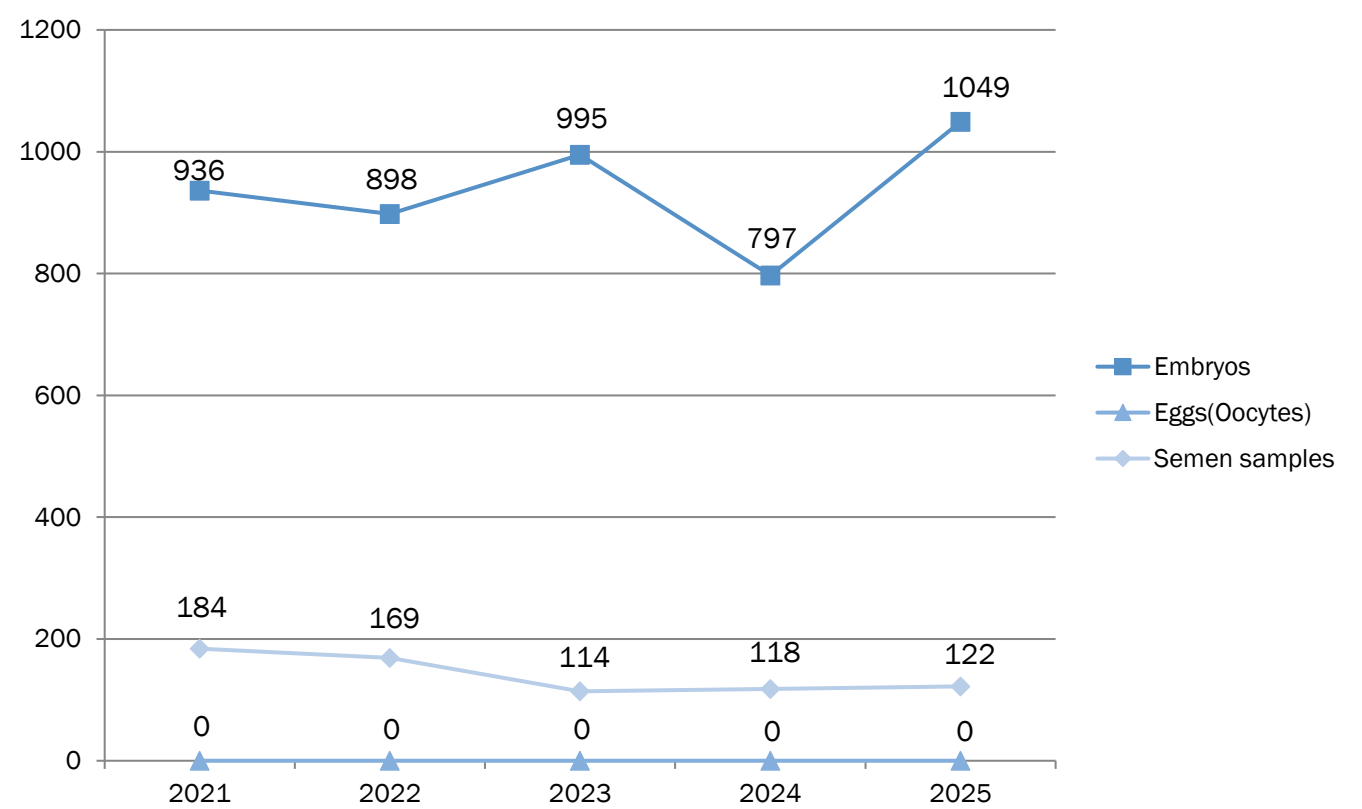


Chart B1(b) - Number of Donated Gametes or Embryos Stored or Used for Research



	Number of Donated Embryos Used for Research				
	2021	2022	2023	2024	2025
Embryos	0	3	0	0	13

Detailed Statistics Tables

Table 1 - Gamete and Embryo Donations Made in 2025

(Based on the information on Annual Statistics Forms received in the calendar year)

a) Gamete and Embryo Donors by Age Group and Sex

	Gamete		Embryo		Total
Age Group	Female Donors	Male Donors	Female Donors	Male Donors	
25 or below	1	2	0	0	3
26-30	2	6	0	0	8
31-35	1	3	0	0	4
36-40	1	3	0	0	4
41-45	0	0	0	0	0
46-50	0	0	0	0	0
51 or above	0	0	0	0	0
Total	5	14	0	0	19

b) Donors and Donated Materials

Donated Materials	Number of Donors	Number of Donations Made
Semen	14	23
Eggs (oocytes)	5	5
Embryos ¹	0	0

Remark:

(1) Both the female and male donors of the couple will be counted for an embryo donation.

Source (for licensed centres) AS Form 8

Table 2 - Pregnancy and Birth Outcomes for Main Types of RT Procedures in 2025

(Based on the information on Data Collection Forms received in the calendar year)

Item		RT procedures <u>involving patients' own gametes/embryos</u>				RT procedures <u>involving donated gametes/embryos</u>	
		IVF ¹		Frozen-thawed ET	AIH ³	DI ³	RT procedures other than DI
		with ICSI ²	without ICSI				
1	Number of patients	1937	694	2577	1286	5	15
2	Number of treatment cycles ⁴	2475	769	3460	2199	6	42
3	Number of treatment cycles with embryo transferred	353	232	3441	NA	NA	32
4	Number of cycles of insemination	NA	NA	NA	2143	6	NA
Treatment Outcome⁵							
5a	Number of clinical pregnancy ⁶⁽ⁱ⁾	88	76	1477	257	1	11
i	Number of ongoing pregnancy ⁷⁽ⁱ⁾	71	66	1253	228	1	9
ii	Number of miscarriage ⁸	16	9	215	23	0	2
iii	Number of hydatidiform mole	0	0	0	0	0	0
iv	Number of ectopic pregnancy ⁹	1	1	8	6	0	0
v	Number of heterotopic pregnancy ¹⁰	0	0	0	0	0	0
vi	Number of termination of pregnancy	0	0	1	0	0	0
5b	Number of no pregnancy ¹¹	2387	693	1981	1926	5	31
5c	Number of lost to follow up ¹²	0	0	2	16	0	0
5d i	Clinical pregnancy rate ⁶⁽ⁱⁱⁱ⁾ (per treatment cycle) (%)	3.6	9.9	42.7	11.7	16.7	26.2
ii	Clinical pregnancy rate (per treatment cycle with embryo transferred) (%)	24.9	32.8	42.9	NA	NA	34.4
iii	Clinical pregnancy rate (per cycle of insemination) (%)	NA	NA	NA	12.0	16.7	NA
5e i	Ongoing pregnancy rate ⁷⁽ⁱⁱ⁾ (per treatment cycle) (%)	2.9	8.6	36.2	10.4	16.7	21.4
ii	Ongoing pregnancy rate (per treatment cycle with embryo transferred) (%)	20.1	28.4	36.4	NA	NA	28.1
iii	Ongoing pregnancy rate (per cycle of insemination) (%)	NA	NA	NA	10.6	16.7	NA

Remarks:

NA Not applicable

- (1) **In vitro fertilization (IVF)** (a) means the fertilization of an egg by sperm outside the human body, whether or not the egg was originally removed from the body of that or any other woman; (b) includes any procedure involving the induction or aspiration of an egg, or the culture of an egg for the purposes of any such fertilization. It includes **IVF without ICSI** and **IVF with ICSI**.
- (2) **Intracytoplasmic sperm injection (ICSI)** means a method of gamete micromanipulation by which a single sperm is injected into the inner cellular structure of the egg.
- (3) **Artificial insemination** refers to the placing of sperm inside a woman's vagina or uterus (i.e. womb) by means other than sexual intercourse. In **artificial insemination by husband (AIH)**, the husband's sperm is used. In **artificial insemination by donor (AID or DI)**, sperm collected from a man who is not the woman's husband is used.

- (4) (i) **Treatment cycles** refers to the process in which a reproductive technology (RT) procedure is carried out, where a woman has undergone ovarian stimulation or monitoring with the intent of having RT procedure, or frozen embryos have been thawed with the intent of transferring them to a woman. A treatment cycle starts (a) on the day when superovulatory drugs are commenced or (b) from the date of the last menstrual period.
- This annual statistics only covered treatment cycles that led to (1) Gamete transfer/embryo replacement/insemination, or stopped because of (2) Elective cryopreservation of all embryos or (3) Cycle abandonment.
- (ii) In this table, the treatment cycles for RT procedures involving donated gametes/embryos and those involving artificial insemination (i.e. AIH and DI) are shown. To avoid double counting, treatment cycles in which one patient engages in more than one type of RT procedure in one cycle (e.g. IVF and FET) are also excluded in the above table.
- (5) Figures on **treatment outcome** reported in the interim statistics will be replaced when outcome of pregnancy is available in the final statistics. Licensed centres are required to report the details concerning **pregnancy outcome** within 12 months after treatment. Information on live birth for treatment cycles carried out in the later part of 2025 is not yet available.
- (6) (i) **Clinical pregnancy** means pregnancy documented by one or more gestational sacs on ultrasound or the histological confirmation of gestational products in miscarriages or ectopic pregnancies.
- (ii) **Clinical pregnancy rate** is expressed as number of clinical pregnancies per 100 treatment cycles started /commenced or per 100 cycles reaching the stage of attempted oocyte retrieval or embryo transfer.
- **Clinical pregnancy rate per treatment cycles** [Item 5d(i)] = Number of clinical pregnancies [Item 5a]/Number of treatment cycles[Item 2] x 100%
 - **Clinical pregnancy rate per treatment cycles with embryo transferred** [Item 5d(ii)] = Number of clinical pregnancies [Item 5a]/Number of treatment cycles with embryo transferred [Item 3] x 100%
 - **Clinical pregnancy rate per cycles of insemination** [Item 5d(iii)] = Number of clinical pregnancies [Item 5a]/Number of cycles of insemination [Item 4] x 100%
- (7) (i) Ongoing pregnancy means ongoing pregnancy with foetal cardiac activity during the period of the year being reported on.
- (ii) **Ongoing pregnancy rate** is expressed as number of ongoing pregnancies per 100 treatment cycles started /commenced or per 100 cycles reaching the stage of attempted oocyte retrieval or embryo transfer.
- **Ongoing pregnancy rate per treatment cycles** [Item 5e(i)] = Number of ongoing pregnancies [Item 5a(i)]/Number of treatment cycles [Item 2] x 100%
 - **Ongoing pregnancy rate per treatment cycles with embryo transferred** [Item 5e(ii)] = Number of ongoing pregnancies [Item 5a(i)]/Number of treatment cycles with embryo transferred [Item 3] x 100%
 - **Ongoing pregnancy rate per cycles of insemination** [Item 5e(iii)] = Number of ongoing pregnancies [Item 5a(i)]/Number of cycles of insemination [Item 4] x 100%
- (8) Miscarriage (Spontaneous abortion) refers to loss of an intrauterine pregnancy detected clinically or by ultrasound, and less than 24 weeks' gestation (as estimated by the day of embryo transfer or day of ovulation).
- (9) Ectopic pregnancy refers to a pregnancy in which implantation has taken place outside the uterine cavity.
- (10) Heterotopic pregnancy refers to simultaneous existence of intrauterine and ectopic pregnancy.
- (11) Number of no pregnancy refers to the number of treatment cycles started and reported by the licensed centre with an outcome of "no pregnancy", including those abandoned and those ending with elective cryopreservation of embryos.
- (12) Figures on number of lost to follow up cases will be reported in the interim statistics and it will be updated when pregnancy outcome is available in the final statistics.

Source (for licensed centres)

DC Form 1, 2, 3 & 7

Table 3 - Pregnancy and Birth Outcomes by Age Group and Main Type of RT Procedures in 2025

(for non-donor treatment cycles only)

(Based on the information on Data Collection Forms received in the calendar year)

IVF¹ (with ICSI²)					
Age Group ⁴	Number of Patients	Number of Treatment Cycles ⁵	Number of Treatment Cycles with Embryo Transferred	Ongoing Pregnancy ⁶	
				n ⁶⁽ⁱ⁾	(%) ⁶⁽ⁱⁱ⁾
25 or below	10	12	0	0	(0.0)
26-30	72	87	10	2	(2.3)
31-35	588	648	57	25	(3.9)
36-40	889	1120	179	37	(3.3)
41-45	344	542	92	6	(1.1)
46-50	33	65	15	1	(1.5)
51 or above	1	1	0	0	(0.0)
Total	1937	2475	353	71	(2.9)
IVF (without ICSI)					
Age Group	Number of Patients	Number of Treatment Cycles	Number of Treatment Cycles with Embryo Transferred	Ongoing Pregnancy	
				n	(%)
25 or below	1	1	0	0	(0.0)
26-30	18	19	5	0	(0.0)
31-35	218	233	57	17	(7.3)
36-40	432	473	162	49	(10.4)
41-45	20	29	7	0	(0.0)
46-50	5	14	1	0	(0.0)
51 or above	0	NA	NA	NA	
Total	694	769	232	66	(8.6)
All IVF (Fresh cycles)					
Age Group	Number of Patients	Number of Treatment Cycles	Number of Treatment Cycles with Embryo Transferred	Ongoing Pregnancy	
				n	(%)
25 or below	11	13	0	0	(0.0)
26-30	90	106	15	2	(1.9)
31-35	806	881	114	42	(4.8)
36-40	1321	1593	341	86	(5.4)
41-45	364	571	99	6	(1.1)
46-50	38	79	16	1	(1.3)
51 or above	1	1	0	0	(0.0)
Total	2631	3244	585	137	(4.2)

Frozen-thawed ET					
Age Group	Number of Patients	Number of Treatment Cycles	Number of Treatment Cycles with Embryo Transferred	Ongoing Pregnancy	
				n	(%)
25 or below	3	5	5	2	(40.0)
26-30	69	91	91	35	(38.5)
31-35	707	939	932	442	(47.1)
36-40	1337	1817	1807	650	(35.8)
41-45	426	566	564	121	(21.4)
46-50	34	41	41	3	(7.3)
51 or above	1	1	1	0	(0.0)
Total	2577	3460	3441	1253	(36.2)
AIH ³					
Age Group	Number of Patients	Number of Treatment Cycles	Number of cycles of insemination	Ongoing Pregnancy	
				n	(%)
25 or below	4	9	9	1	(11.1)
26-30	69	114	112	21	(18.4)
31-35	590	1015	981	100	(9.9)
36-40	502	855	835	95	(11.1)
41-45	108	185	185	11	(5.9)
46-50	13	21	21	0	(0.0)
51 or above	0	NA	NA	NA	
Total	1286	2199	2143	228	(10.4)

Remarks:

NA Not applicable

- (1) **In vitro fertilization (IVF)** (a) means the fertilization of an egg by sperm outside the human body, whether or not the egg was originally removed from the body of that or any other woman; (b) includes any procedure involving the induction or aspiration of an egg, or the culture of an egg for the purposes of any such fertilization. It includes **IVF without ICSI** and **IVF with ICSI**.
- (2) **Intracytoplasmic sperm injection (ICSI)** means a method of gamete micromanipulation by which a single sperm is injected into the inner cellular structure of the egg.
- (3) **Artificial insemination** refers to the placing of sperm inside a woman's vagina or uterus (i.e. womb) by means other than sexual intercourse. In **artificial insemination by husband (AIH)**, the husband's sperm is used. In **artificial insemination by donor (AID or DI)**, sperm collected from a man who is not the woman's husband is used.
- (4) The age of wife has been used in calculating the age of patient.
- (5) (i) **Treatment cycles** refers to the process in which a reproductive technology (RT) procedure is carried out, where a woman has undergone ovarian stimulation or monitoring with the intent of having RT procedure, or frozen embryos have been thawed with the intent of transferring them to a woman. A treatment cycle starts (a) on the day when superovulatory drugs are commenced or (b) from the date of the last menstrual period.

This annual statistics only covered treatment cycles that led to (1) gamete transfer/embryo replacement/insemination, or stopped because of (2) elective cryopreservation of all embryos or (3) cycle abandonment.

- (ii) In this table, the treatment cycles for RT procedures involving donated gametes/embryos are excluded from the above table and separately shown in Table 2. To avoid double counting, treatment cycles in which one patient engages in more than one type of RT procedure in one cycle (e.g. IVF and FET) are also excluded in the above table.
- (6) **Ongoing pregnancy** means ongoing pregnancy with foetal cardiac activity during the period of the year being reported on.
 - (i) n = Number of ongoing pregnancies
 - (ii) **Ongoing pregnancy rate** is expressed as number of ongoing pregnancies per 100 treatment cycles started /commenced or per 100 cycles reaching the stage of attempted oocyte retrieval or embryo transfer. i.e.
Ongoing pregnancy rate = number of ongoing pregnancies [n]/Number of treatment cycles x 100%
- (7) Licensed centres are required to report the details concerning outcome of pregnancy within 12 months after treatment. Information on live birth for treatment cycles carried out in the later part of 2025 is not yet available.

Source (for licensed centres)

DC Form 1 & 7

Table 4 - Effect of One/Two/Three Embryo(s) Transferred (Fresh/Frozen Cycle with or without ICSI¹) on Pregnancy and Birth Outcomes² in 2025 (For non-donor IVF cycles only)

(Based on the information on Data Collection Forms received in the calendar year)

One Embryo Transferred				
Age Group ³	Number of Patients	Number of Treatment Cycles ⁴ with Embryo Transferred	Ongoing Pregnancy ⁵	
			n ⁵⁽ⁱ⁾	(%) ⁵⁽ⁱⁱ⁾
25 or below	3	5	2	(40.0)
26-30	75	95	32	(33.7)
31-35	771	966	441	(45.7)
36-40	1519	1930	660	(34.2)
41-45	389	486	97	(20.0)
46-50	25	28	4	(14.3)
51 or above	1	1	0	(0.0)
Total	2783	3511	1236	(35.2)

Two Embryos Transferred				
Age Group ³	Number of Patients	Number of Treatment Cycles ⁴ with Embryo Transferred	Ongoing Pregnancy ⁵	
			n ⁵⁽ⁱ⁾	(%) ⁵⁽ⁱⁱ⁾
25 or below	0	NA	NA	
26-30	9	11	5	(45.5)
31-35	68	79	43	(54.4)
36-40	190	216	76	(35.2)
41-45	139	165	30	(18.2)
46-50	23	25	0	(0.0)
51 or above	0	NA	NA	
Total	429	496	154	(31.0)

Three Embryos Transferred				
Age Group ³	Number of Patients	Number of Treatment Cycles ⁴ with Embryo Transferred	Ongoing Pregnancy ⁵	
			n ⁵⁽ⁱ⁾	(%) ⁵⁽ⁱⁱ⁾
25 or below	0	NA	NA	
26-30	0	NA	NA	
31-35	1	1	0	(0.0)
36-40	2	2	0	(0.0)
41-45	11	12	0	(0.0)
46-50	4	4	0	(0.0)
51 or above	0	NA	NA	
Total	18	19	0	(0.0)

Remarks:

NA Not applicable

- (1) **Intracytoplasmic sperm injection (ICSI)** means a method of gamete micromanipulation by which a single sperm is injected into the inner cellular structure of the egg.
- (2) Figures on **treatment outcome** reported in the interim statistics will be replaced when pregnancy outcome is available in the final statistics. Licensed centres are required to report the details concerning **pregnancy outcome** within 12 months after treatment. Information on live birth for treatment cycles carried out in the later part of 2025 is not yet available.
- (3) The age of wife has been used in calculating the age of patient.
- (4) (i) **Treatment cycles** refers to the process in which a reproductive technology (RT) procedure is carried out, where a woman has undergone ovarian stimulation or monitoring with the intent of having RT procedure, or frozen embryos have been thawed with the intent of transferring them to a woman. A treatment cycle starts (a) on the day when superovulatory drugs are commenced or (b) from the date of the last menstrual period.
This annual statistics only covered treatment cycles that led to (1) gamete transfer/embryo replacement/insemination, or stopped because of (2) elective cryopreservation of all embryos or (3) cycle abandonment.
(ii) In this table, treatment cycles for (a) RT procedures involving donated gametes/embryos and (b) involving artificial insemination (i.e. AIH and DI) are excluded from the above table and separately shown in Table 2. To avoid double counting, treatment cycles in which one patient engages in more than one type of RT procedure in one cycle (e.g. IVF and FET) are also excluded in the above table.
- (5) **Ongoing pregnancy** means ongoing pregnancy with foetal cardiac activity during the period of the year being reported on.
(i) n = Number of ongoing pregnancies with single foetus and multiple foetuses.
(ii) **Ongoing pregnancy rate** is expressed as number of ongoing pregnancies per 100 treatment cycles started /commenced or per 100 cycles reaching the stage of attempted oocyte retrieval or embryo transfer. i.e. Ongoing pregnancy rate = number of ongoing pregnancies [n]/Number of treatment cycles with embryo transferred x 100%

Source (for licensed centres)

DC Form 1

Table 5 - Pregnancy and Birth Outcomes by Age Group using Fresh/Frozen Oocytes (Fresh Cycles) in 2025
(For non-donor IVF cycles only)

(Based on the information on Data Collection Forms received in the calendar year)

Fresh Cycles using Fresh Oocytes					
Age Group ¹	Number of Patients	Number of Treatment Cycles ²	Number of Treatment Cycles with Embryo Transferred	Ongoing Pregnancy ³	
				n ³⁽ⁱ⁾	(%) ³⁽ⁱⁱ⁾
25 or below	8	10	0	0	(0.0)
26-30	87	100	14	2	(2.0)
31-35	753	820	112	40	(4.9)
36-40	1214	1442	337	85	(5.9)
41-45	328	505	91	6	(1.2)
46-50	27	53	14	0	(0.0)
51 or above	0	NA	NA	NA	
Total	2417	2930	568	133	(4.5)

Fresh Cycles using Frozen Oocytes					
Age Group ¹	Number of Patients	Number of Treatment Cycles ²	Number of Treatment Cycles with Embryo Transferred	Ongoing Pregnancy ³	
				n ³⁽ⁱ⁾	(%) ³⁽ⁱⁱ⁾
25 or below	0	NA	NA	NA	
26-30	1	1	1	0	(0.0)
31-35	5	5	2	2	(40.0)
36-40	13	13	3	1	(7.7)
41-45	14	14	9	1	(7.1)
46-50	5	5	2	0	(0.0)
51 or above	0	NA	NA	NA	
Total	38	38	17	4	(10.5)

Remarks:

NA Not applicable

- (1) The age of wife has been used in calculating the age of patient.
- (2) (i) Treatment cycles refers to the process in which a reproductive technology (RT) procedure is carried out, where a woman has undergone ovarian stimulation or monitoring with the intent of having RT procedure, or frozen embryos have been thawed with the intent of transferring them to a woman. A treatment cycle starts (a) on the day when superovulatory drugs are commenced or (b) from the date of the last menstrual period.
(ii) In this table, treatment cycles for (a) RT procedures involving donated gametes/embryos and (b) involving artificial insemination (i.e. AIH and DI) are excluded from the above table and separately shown in Table 2. To avoid double counting, treatment cycles in which one patient engages in more than one type of RT procedure in one cycle (e.g. IVF and FET) are also excluded in the above table.

- (3) **Ongoing pregnancy** means ongoing pregnancy with foetal cardiac activity during the period of the year being reported on.
- (i) n = Number of ongoing pregnancies
- (ii) **Ongoing pregnancy rate** is expressed as number of ongoing pregnancies per 100 treatment cycles started /commenced or per 100 cycles reaching the stage of attempted oocyte retrieval or embryo transfer.
- i.e. Ongoing pregnancy rate = number of ongoing pregnancies [n]/Number of treatment cycles x 100%
- (4) Licensed centres are required to report the details concerning outcome of pregnancy within 12 months after treatment. Information on live birth for treatment cycles carried out in the later part of 2025 is not yet available.

Source (for licensed centres)

DC Form 1

Table 6 - Infertility Diagnosis of Patients in 2025

(Based on the information on Data Collection Forms received in the calendar year)

A) Infertility Diagnosis by Age of Wives Receiving RT Procedures (other than DI and AIH)								
	Age Group (Number of Patients)							
Diagnosis	25 or below	26-30	31-35	36-40	41-45	46-50	51 or above	All
Male factor	3	29	268	488	71	1	0	860
Tubal problem	0	8	28	39	10	0	0	85
Endometriosis	0	3	34	57	7	0	0	101
Immunologic problem	0	0	1	5	0	0	0	6
Tubo-peritoneal problem	0	8	62	71	6	0	0	147
Ovulatory problem	0	6	58	86	8	0	0	158
Unexplained	1	10	138	328	69	6	0	552
Other causes ³	3	36	224	339	158	32	1	793
Multiple causes - female & male factors	4	45	403	688	318	35	1	1494
Multiple causes - female factors only	1	12	57	119	37	1	0	227
Total	12	157	1273	2220	684	75	2	4423

Remark:

(1) All treatment cycles for RT procedures involving donated gametes/embryos are excluded.

B) Infertility Diagnosis by Age of Wives Receiving AIH								
	Age Group (Number of Patients)							
Diagnosis	25 or below	26-30	31-35	36-40	41-45	46-50	51 or above	All
Male factor	2	20	196	150	19	1	0	388
Endometriosis	1	0	15	7	0	0	0	23
Ovulatory problem	0	4	27	25	1	0	0	57
Unexplained	1	14	144	88	15	5	0	267
Other causes ³	0	8	75	90	38	4	0	215
Multiple causes - female & male factors	0	21	122	119	36	3	0	301
Multiple causes - female factors only	0	3	23	31	0	0	0	57
Total	4	70	602	510	109	13	0	1308

C) Reasons for Treatment by Age of Husbands - DI

Reasons	Age Group (Number of Patients)							
	25 or below	26-30	31-35	36-40	41-45	46-50	51 or above	All
Obstructive azoospermia	0	0	0	0	0	0	0	0
Non-obstructive azoospermia	0	0	1	2	0	0	0	3
Severe deficits in semen quality in couples who do not wish to undergo intracytoplasmic sperm injection	0	0	0	0	1	0	0	1
Genetic	0	0	0	0	0	0	0	0
Infectious disease in the male partner (such as HIV)	0	0	0	0	0	0	0	0
Severe rhesus isoimmunisation	0	0	0	0	0	0	0	0
Others	0	0	0	1	0	0	0	1
Multiple causes	0	0	0	0	0	0	0	0
Total	0	0	1	3	1	0	0	5

Remarks:

- (1) Age of wife is used in calculating the age of patient in Infertility Diagnosis by Age of Patients Receiving RT Procedures (other than DI and AIH) and receiving AIH procedures while the age of husband is used in calculating the age of patient in Reasons for Treatment by Age of Patients - DI.
- (2) One patient may undergo more than one type of RT procedure during the calendar year (e.g. both IVF and AIH).
- (3) "Other causes" of infertility diagnosis reported by licensed centres included advanced maternal age, reduced ovarian reserve, coital problem, polycystic ovary syndrome, etc.

Source (for licensed centres)

DC Form 1, 7 and 3 respectively

Table 7 - Current Research Projects ending December 2025

Name of Licensed Centre	Name of Project	Project Duration (in months)
Assisted Reproductive Technology Unit (IVFHK), Prince of Wales Hospital /The Chinese University of Hong Kong	A case-series study to establish preimplantation genetic testing (PGT) and its clinical application	36
Department of Obstetrics & Gynaecology, HKU	Derivation of pre-Good Manufacturing Practice (pre-GMP) - quality Human Expanded Potential Stem Cells (EPSCs) from Human Preimplantation Embryos	36
Department of Obstetrics & Gynaecology, HKU	The use of in vitro cultured pre-implantation and post-implantation human embryo for studying the developmental potential of human blastoids	36

Remark:

- (1) The full list of all research projects approved by the Council on Human Reproductive Technology ("the Council") could be accessed at the Council's website
https://www.chrt.org.hk/english/embryo/embryo_app.html