



- Hong Kong Today
- Personal Development & Interpersonal Relationships
- Energy, Technology & the Environment

- Globalisation
- Modern China
- Public Health

- This article enables students to:
1. understand important issues facing their own society, country and the world;
  2. apply critical thinking skills and adopt multiple perspectives in making decisions and judgments regarding social issues and problems

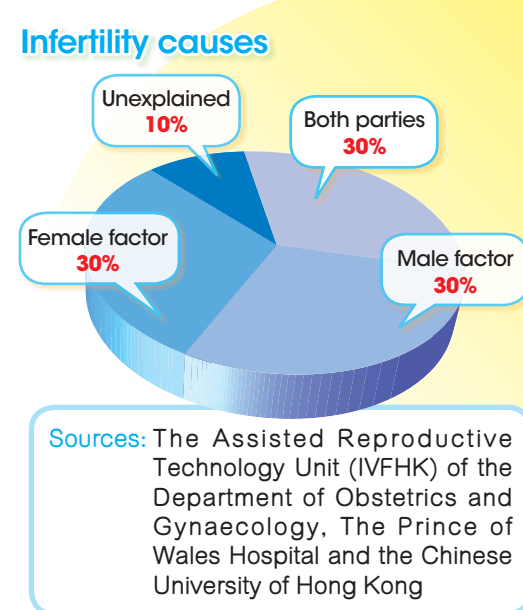
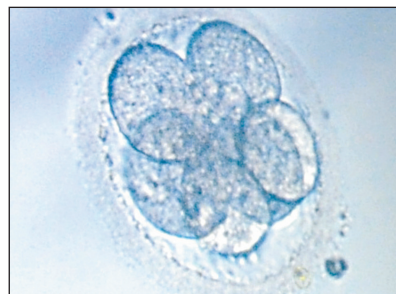
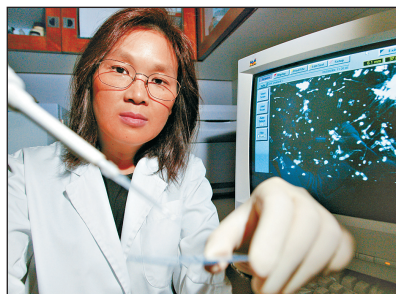
# Infertility solutions

A significant imbalance between maternity service in China and Hong Kong is paving the way for more sterile mainland couples seeking artificial fertilisation in the SAR, amidst concerns over quality

It seems mainlanders have a special preference for medical service in Hong Kong. There is a series of measures implemented by the Hong Kong government to ban babies born in Hong Kong to mainland mothers whose spouses are not Hong Kong

permanent residents (officially known as Type II births and colloquially 'double no'). But 'births' resulting from artificial insemination in Hong Kong from mainlanders are increasing. Is there an imbalance between the SAR and the mainland's birth-giving conditions?

If fertilisation, pregnancy and delivery are described as the birth **trilogy**, pregnancy and delivery have been the focus of the sequence. Now with measures like 'zero quota' births, fertilisation – the **prerequisite** of giving birth – has become a sought-after solution for sterile couples.



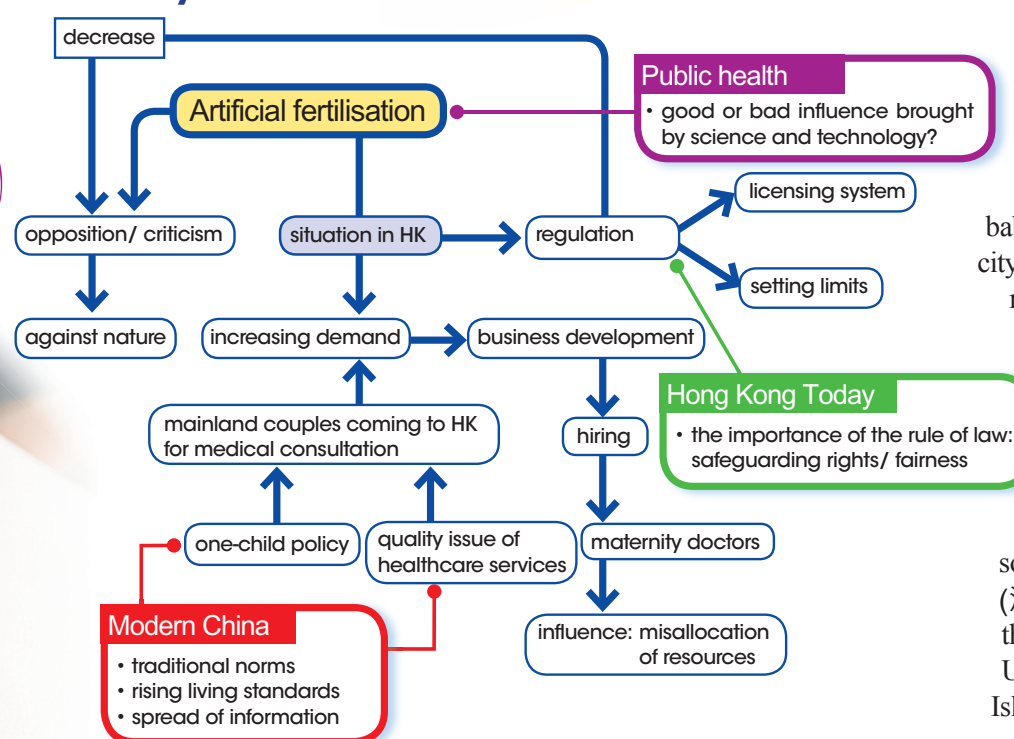
## Push and pull

ACCORDING to a Sing Tao news report dated November 15, 2012, private maternity hospitals have recorded an average of 2,000 cases of mainland couples seeking artificial

fertilisation in Hong Kong yearly. Statistics for artificial fertilisation requests in the mainland have seen a 10-20 percent increase every year.

Comparisons of quality for the same product or service between two locations can create 'push and pull factors'. What exactly are the factors that push sterile couples from the mainland and pull them to Hong Kong?

## Infertility



## Push factors – the mainland

- Policy: because of the strictly enforced 'one-child policy' in the mainland, many couples choose to get sterilised after giving birth to one child to avoid **breaching** the policy. Using artificial fertilisation to have a second baby is strictly **prohibited**. Couples may have to use underhand means to access the service.
- Quality concerns: only China-made artificial fertilisation equipment and medicine are available in mainland hospitals. Couples have doubts about the quality.
- Costs: hospitals in the mainland charge between 30,000 and 100,000 renminbi (HK\$36,874-\$122,914), excluding the additional 30-40,000 renminbi worth of red packets offered to doctors.
- Service: it is not common practice in mainland hospitals for one doctor to follow each case all the way through. Therefore, it is harder to study the competence of individual doctors, as well as plans to achieve a higher success rate.



## The industry's impact

MAINLAND mothers rushing into Hong Kong to give birth to 'double-no' kids has raised concerns over the allocation of resources for maternity services, healthcare and school places. Will sterile couples coming to Hong Kong for artificial fertilisation generate similar disputes?

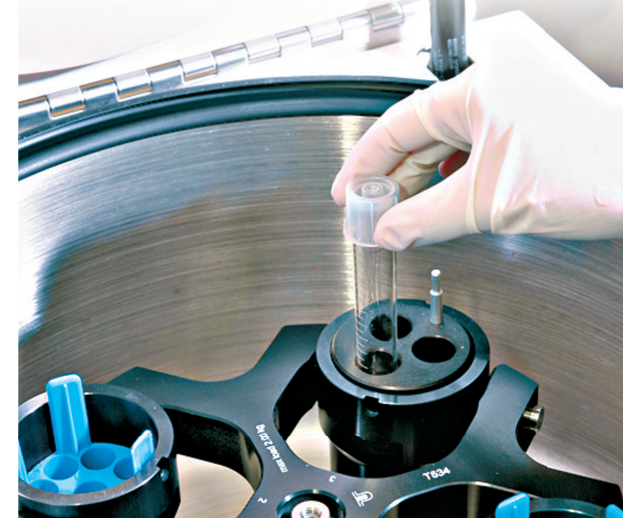
## Replacing 'double-no' services

HK-made artificially fertilised **embryos** and babies have no right of abode in Hong Kong. The city is therefore less likely to be burdened in the long run.

On the contrary, it could help open up a new market for a private healthcare system. As the 'zero quota' on type II births will pose a threat to the business of private hospitals and doctors, artificial fertilisation has been developed and promoted as a compensatory source of business. For example, Baptist Hospital (浸會醫院) will begin a course in infertility in the coming year, and two groups of doctors from Union Hospital (仁安醫院) and Hong Kong Island will open infertility centres in Kowloon.

## Pull factors – Hong Kong

- Policy: there are no policy restrictions on mainland Chinese nationals receiving artificial fertilisation.
- Quality concerns: artificial fertilisation equipment and medicine available in Hong Kong are foreign-made. With the advanced embryo development technology, the success rate of 30-45 percent is comparable to that of European countries and the US. Operation of artificial fertilisation centres in Hong Kong is regulated by law and is relatively safe.
- Costs: normally between HK\$80,000 and HK\$100,000 with no hidden charges.
- Service: embryo experts and fertility specialists are formally trained and assessed before obtaining professional qualifications. Each case is followed through by the same doctor.



## Shift in specialist healthcare services

Among developing equipment, technologies and experienced professionals needed to achieve artificial fertilisation, the training of specialists takes the longest. With the vanishing 'double-no' business, maternity specialists switching to the realm of artificial fertilisation is well-reasoned and guarantees work for industry professionals. But there are concerns that more and more will turn to business opportunities in the mainland, thus affecting regular local maternity services.



## Key ideas

Cutting down on type II births does not stop would-be mainland mothers from coming to Hong Kong. They come to Hong Kong for artificial fertilisation instead, suggesting new business opportunities for local private hospitals.

## Did you know?

Infertility is a common condition, affecting one in every six couples. There are many different causes of infertility. Statistically, about 30 percent of infertility cases are related to combined problems, 30 percent are related to male factors, 30 percent are related to female factors, and 10 percent of cases are unexplained.

## Critical questions

1. With the new market of artificial fertilisation, do you think healthcare services will favour mainlanders eventually?
2. There is a religious belief that artificial fertilisation is against nature. Do you agree?

## References

[www.chrt.org.hk/tc\\_chi/publications/publications\\_rep.html](http://www.chrt.org.hk/tc_chi/publications/publications_rep.html)  
[www.cmac.org.hk/chi/kiu\\_html/92.html](http://www.cmac.org.hk/chi/kiu_html/92.html)

## Common fertility treatments

Fertility treatments	IUI (Intrauterine insemination)	IVF (In vitro fertilisation)	ICSI (Intracytoplasmic sperm injection)
Methods	The deliberate introduction of semen into the vagina or oviduct for the purpose of fertilisation by means other than ejaculation	By collecting contents from fallopian tubes or the uterus after natural ovulation, mixing it with semen, and reinserting into the uterus	A procedure in which a single sperm is injected into an egg
Cases	5,129 (reported in 2010)	4,016 (reported in 2010)	—
Success rate	8.5 percent (reported in 2009)	25.9 percent (reported in 2009)	Success rate: up to 100%

Source: Council on Human Reproductive Technology