

# **Information for Trans and Non-binary Fertility Preservation**

## **Egg Freezing**

# Introduction

If you are considering hormone therapy or gender-related surgery, you may have concerns about how these treatments could affect your ability to have biological children. Even if parenthood isn't a priority now, preserving your fertility can provide options for the future. This information outlines how gender-related treatments impact fertility and the available preservation methods.

Dealing with gender dysphoria can be overwhelming, and many trans and non-binary people seek to begin treatment as soon as possible. However, taking the time to explore fertility preservation can help prevent potential regrets later on. If your fertility is not preserved before starting hormone treatment, the medical evidence suggests that your fertility will recover if you stop hormone treatment, but it is possible that it may not, making getting pregnant more difficult.

Speaking with a healthcare professional before starting medical or surgical transition can provide you with a clearer understanding of your fertility options. While starting treatment quickly is important for many, considering all aspects of your future, including fertility, ensures you make an informed decision.

Understanding your choices now allows you to make decisions that align with both your gender journey and potential future family plans.

## What is fertility?

Fertility is the ability to have children. Egg freezing preserves the option to try for biological children in the future.

## How does gender-related treatment affect fertility?

Hormone therapy and surgeries can impact your fertility, sometimes permanently. The impact depends on the type and length of treatment.

- Hormone therapy (testosterone and puberty/hormone blockers) can suppress fertility. While stopping treatment usually restores fertility, this isn't guaranteed.
- Surgical procedures like removing the fallopian tubes and ovaries (salpingo-oophorectomy) or the womb (hysterectomy) will result in permanent infertility. If you're considering these surgeries, it's crucial to discuss fertility preservation options beforehand.

Because the effects of hormone treatment on fertility are often reversible, there are many cases where trans people have stopped hormone treatment and been able to fall pregnant naturally, and have healthy babies.

Freezing your eggs before starting hormone therapy is recommended for those who may want biological children in the future. While fertility preservation might still be possible after starting treatment, you may need to stop hormone therapy for a time, perhaps two to four months.

Planning fertility preservation before transitioning gives you options if you decide to try for biological children later.

# What is fertility preservation?

Fertility preservation allows you to store your eggs so that you have the option to try for children in the future. Certain medical treatments, including gender-related hormone therapy and surgeries, can cause temporary or permanent infertility. Your healthcare team may recommend meeting with a fertility specialist to discuss your options and answer your questions.

If you choose to proceed, you'll be referred to a Fertility Centre closest to you, but this may not be your local hospital. Your gender service and fertility specialists will work together to coordinate your fertility preservation alongside your treatment, ensuring a well-managed and supportive process.

## What is involved in egg freezing?

Egg freezing involves a few steps:

- You'll get hormone injections to encourage your ovaries to produce multiple eggs.
- Your progress will be monitored with ultrasound scans and blood tests.
- When the eggs are mature, they'll be collected during a short surgical procedure during which you will receive sedation.
- The mature eggs are then frozen and stored.

### Are there any side effects?

The younger you are, it is more likely your ovaries will respond well to fertility drugs, but there's a small risk of Ovarian Hyperstimulation Syndrome (OHSS) to all no matter your age. OHSS is a potentially serious reaction to the hormone injections where overstimulated ovaries enlarge and release chemicals that can cause blood vessels to leak.

We minimize this risk by carefully selecting the type and dose of hormone injections. About one in three people experience mild OHSS, which can usually be managed at home with pain relief and prescribed medication for a few days.

### How long will I be in hospital for?

You can normally go home one to two hours after the egg collection procedure. Some light bleeding is normal, and any abdominal discomfort usually subsides within 12 hours with pain relief.

There's no guarantee that all retrieved eggs will be suitable for freezing. Factors like age, previous treatments, or other medical conditions can affect egg quality and quantity. If the retrieved eggs aren't of good enough quality, they might not be able to be frozen. This will only be known after the egg retrieval procedure and lab examination.

If we determine that your eggs cannot be frozen, we will inform you and discuss the possibility of further egg retrieval cycles, if appropriate.

### I've already started hormone therapy or puberty suppressing medication – what are my options?

If you've already started hormone therapy, including puberty blockers or hormone blockers and wish to preserve your fertility, it may still be possible. You should speak with a fertility specialist. They may recommend pausing your medication to reduce how suppressed your ovaries are, and to potentially increase the number of eggs that can be stored.

If pausing hormone therapy for egg retrieval will cause distress to you, you may wish to explore other paths to parenthood, including using donor eggs or adoption

## **I've been undergoing hormone therapy and am about to go for genital reconstructive surgery, what are my options for preserving my fertility?**

If you're undergoing genital reconstructive surgery, your only option for trying for biological children in the future is to preserve your eggs before the procedure. Once surgery is completed, egg production and retrieval may no longer be possible.

## **Who is eligible for NHS-funded egg storage?**

To qualify for NHS-funded egg storage, it does not matter whether you are single or in a relationship, but you must meet specific criteria for fertility preservation. In Scotland, the current eligibility requirements are:

- You must be under 40.
- Your BMI must be under 35.
- You must not have any biological children.
- You must not have undergone sterilisation.

Gender reassignment surgery after fertility preservation does not impact eligibility for NHS fertility treatment. However, separate criteria apply to access NHS-funded fertility treatment to use your stored eggs in the future. These criteria may change over time, and it is not possible to predict what the requirements will be in the years to come.

## **What will happen when I see the fertility specialist?**

During your consultation, a doctor or specialist nurse will explain the egg freezing process and answer any questions you may have.

If you decide to proceed, the specialist will guide you through the process, including the necessary paperwork (which may include recent travel history) and consent forms for treatment and storage. You will also have blood tests to screen for infections. These steps are essential to ensure your eggs can be safely stored, meeting all regulatory requirements for future use.

# What are the legal implications of storing eggs?

In the UK, the use and storage of eggs are regulated by the Human Fertilisation and Embryology Authority (HFEA). You must provide written consent for the following:

- The storage of your eggs
- The duration for which your eggs can be stored
- The purposes for which your eggs can be used
- Your wishes regarding the stored eggs
- What should happen to your eggs in the event of your death or if you become unable to change or withdraw your consent (these are standard questions for all patients considering fertility preservation)

The maximum storage period for your eggs is currently 55 years, but consent must be renewed every 10 years.

Once your eggs are stored, it is crucial to maintain communication with the storage centre. Notify them immediately of any changes to your contact details, such as a new address, to ensure they can stay in touch with you. If the storage centre cannot contact you they may no longer be legally permitted to store your eggs and will be required to discard them.

It is important to let the clinic know about any changes in partnership status or name change as new consents may need to be filled out to continue with storage.

If you wish to allow your partner to use your eggs in the event of your death, you must complete specific consent forms with the storage centre to authorise this.

If you decide to stop storing your eggs, you will need to contact the storage centre to arrange for their disposal.

## Will my gender-related treatment have to be delayed if I choose fertility preservation?

This may take some time, to allow for clinic appointments, completing necessary forms, and undergoing blood tests. These are essential steps before eggs can be frozen.

## What if I don't want to proceed at this stage?

If you decide not to proceed with egg freezing at this stage, that is completely okay. The decision is entirely yours. It's natural to feel uncertain, and taking more time to think things over is perfectly acceptable. If you're unsure, speaking with your healthcare team, fertility specialist, or a counsellor may help you better understand your options.

Opting out of egg freezing will not affect your gender-related care, and you can explore fertility preservation or other options to build a family in the future if you change your mind.

# Are there any alternatives if I cannot have fertility preservation before my treatment starts?

If you decide not to or it is not possible to store eggs before treatment or it is not possible before starting hormone therapy or undergoing gender-related treatment, your fertility options may be limited in the future. Stopping hormone treatment may allow your fertility to recover and for you to try for a natural conception, but do discuss this with your gender clinic team first. There are also alternative ways to build a family:

- **Use of Donor Eggs:** If you are unable to use your own eggs after treatment, using donor eggs for fertility treatments may be an option when you're ready to start a family.
- **Adoption:** Adoption is another way to build a family. This option can be explored at any time and may be a suitable alternative if biological conception is not possible.

It's essential to discuss these alternatives with your fertility specialist and gender care team to ensure you choose the best option based on your medical situation, treatment plan, and personal goals. Each option has different implications, and your healthcare team can provide tailored guidance.

## Who can help me decide what to do?

Your doctors and nurses can provide guidance as you make this decision. Visiting the fertility centre does not mean you have to proceed with fertility preservation, but it will give you the opportunity to fully explore your options.

It's also important to lean on your usual support network, such as family, friends, or community support groups, to help you decide what's best for you. Counsellors, while not directly involved in your medical care, can offer valuable support in helping you decide whether to proceed with fertility preservation and provide additional emotional support throughout the process.

## How can I access fertility counselling?

You will have the opportunity to meet with a fertility counsellor who specializes in supporting trans and non-binary people before proceeding with egg freezing. All of our counsellors are members of the British Infertility Counselling Association (BICA). During your session, the counsellor will discuss your options and help you explore your thoughts and feelings about freezing your eggs. It is also a chance for you to ask any questions you may have.

Please note that counselling is not part of the assessment process and will not affect your treatment. If you would like additional support, further counselling appointments are available before, during, or after your treatment.

## Can I change my mind?

Yes, you can change your mind at any time. It's normal to feel uncertain or anxious about the process, and speaking with a counsellor or fertility doctor can help you work through your feelings. However, having these discussions does not obligate you to proceed with fertility preservation.

# What do I do when I wish to use the stored eggs?

You need to contact your GP to ask for a referral to your local fertility centre, preferably the one where your eggs are stored.

It's also important to note that additional criteria must be met to access NHS fertility treatment using your stored eggs in the future. These criteria may change over time, and it is not possible to predict what the requirements will be in the years to come. Current criteria can be found here – [Access Criteria NHS IVF Treatment Scotland – Fertility Network](#).

## Where to Find Support and Further Information?

Egg freezing can be an emotional journey, and having the right support before, during, and after the process is crucial. We encourage individuals to seek support from family, friends, peer networks, professional organizations, and counselling services. Below are some key resources:

- **HFEA Website: Egg Freezing**  
[Egg freezing | HFEA](#)
- **HFEA Website: Fertility Preservation**  
[Fertility preservation | HFEA](#)
- **HFEA: Information for Trans and Non-Binary People**  
[Information for trans and non-binary people seeking fertility treatment | HFEA](#)
- **Gendered Intelligence**  
[Gendered Intelligence](#) – Supports trans individuals, particularly young people, in navigating gender identity and related challenges.
- **British Infertility Counselling Association (BICA)**  
[BICA: Professional Infertility Counselling Association in the UK](#) – Provides specialised counselling for individuals undergoing fertility treatment and preservation.
- **GIRES (Gender Identity Research & Education Society)**  
[Gender Identity Research & Education Society](#) – Offers guidance and advocacy for trans and gender-diverse individuals and their families.
- **Scots Trans and Equality Network**  
[Scottish Trans](#) – Works to improve gender identity and gender reassignment equality, rights and inclusion in Scotland. Scottish Trans is part of the [Equality Network](#) which works to improve LGBTQI+ equality, rights and inclusion in Scotland.
- **LGBT Health and Wellbeing**  
[LGBT Health and Wellbeing](#) – Works to improve the physical, social, and mental health and wellbeing of LGBTQ+ adults (16+) in Scotland.
- **LGBT Youth Scotland**  
[LGBT Youth Scotland](#) – Scotland's national charity for LGBTQ+ young people, aged 13 to 25.

## Additional Information and Resources

- **The Fertility Alliance**

[The Fertility Alliance](#) – A national fertility charity offering support and accurate information for anyone who wants to know more about their fertility.

- **Fertility Network UK**

[Fertility Network UK](#) – A charity providing support and information on all aspects of fertility, including preservation options.

- **NHS Fertility Services**

[Infertility | NHS inform](#) – Guidance on NHS fertility services and infertility information.

- **British Fertility Society**

[For the public » British Fertility Society](#) – Information on fertility and fertility preservation.



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