

ITA

INFERTILITY TREATMENT
AUTHORITY

1999

ANNUAL REPORT

CONTENTS

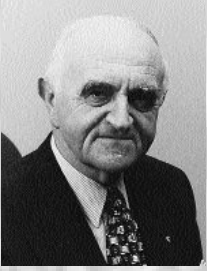
Purposes of this Report	1
Foreword - Chairperson	2
The Year in Review	4
Aim	6
Functions	7
Membership	8
Committees	10
Panel of Advisers	11
Licensing and Approvals	12
<i>Licensed Places for Treatment</i>	
<i>Licensed Places for Approved Research</i>	
<i>Approvals</i>	
Storage and Import / Export of Sperm, Eggs and Embryos	13
Research	14
Registers	15
<i>Central Register</i>	
<i>Donor Treatment Procedure Information Register</i>	
Communications and Public Relations	16
<i>Information to the Public</i>	
<i>Regulators' Meeting</i>	17
<i>Liaison with Other Organisations</i>	
Outcome of Treatment Procedures in Victoria	18
Terminology used in Reporting of Data	19
Data on Services in Victoria	20-25
Statement of Accounts	26-30
Appendix 1 <i>Places Licensed to Provide Treatment</i>	31
Appendix 2 <i>Places Licensed for Approved Research</i>	32
Appendix 3 <i>Counsellors Approved under the Infertility Treatment Act 1995</i>	32
Appendix 4 <i>Clinical Scientists Approved under the Infertility Treatment Act 1995</i>	33
Appendix 5 <i>Doctors Approved under the Infertility Treatment Act 1995</i>	34
Appendix 6 <i>Research Scientists Approved under the Infertility Treatment Act 1995</i>	35

This Annual Report is submitted in compliance with Section 137 of the Infertility Treatment Act 1995 (the Act).

The reporting period for the second Annual Report is:

- *1 July 1998 to 30 June 1999 for the licences, approvals, exemptions and accounts;*
- *1 January 1998 to 31 December 1998 for all other activities.*

FOREWORD – CHAIRPERSON



I am pleased to present the second report, to the Parliament and the public, of the activities of the Infertility Treatment Authority. This report covers the first full year of operation following the proclamation of the *Infertility Treatment Act* 1995 on 1 January 1998. The year posed some particular challenges and some specific questions, which are to be expected, arising from the administration of a new piece of legislation.

Next year will mark the twentieth anniversary of the birth of the first baby born through IVF in Australia. Australia was at the forefront of developments in IVF, and remains a significant contributor to scientific and clinical developments in the field internationally. The operations of the Authority are in the forefront of regulation. The provisions in relation to donor procedures and information, counselling and consent provide an important model of the protection of the interests of children born as a result of the use of assisted reproduction. The requirements of licensing and approval provide an effective means of communication, understanding and monitoring, for the public of Victoria, of initiatives in this area.

Many challenges were posed during 1998, for members of the Authority. The application of the legislation in relation to withdrawal of consent by a donor was raised early in the year. This provided the Authority with the first opportunity to review its operations, and to do so in consultation with the practitioners in the field, and the consumers of services. This review resulted in a revision of the initial interpretation of these provisions, and the satisfactory resolution of a particular case. During 1998 the Authority carried out the task of managing the storage of embryos where a period of five years or more had elapsed since storage began. This requires continual

liaison with licensed places, and facilitation of communications with couples whose embryos were in storage. The Authority used its powers under the Act to extend storage periods in order to ensure that all efforts could be made to notify all couples about stored embryos.

The Authority has also closely monitored the developing discussion in relation to cloning. While the concept of cloning is not new, its application and clarification as encompassing both therapeutic and reproductive cloning has inevitably changed perceptions about the usefulness or otherwise of this procedure. More recent reports on the outcome of the first recorded cloning of a mammal, Dolly the sheep, has further added to the complexity of this debate. This, with other important developments in the field, is closely monitored by the Authority, and when necessary, briefings are sought from its expert advisers.

The year also saw the shift to new premises, following an unsettled period caused by the incremental vacating of the building in which the offices of the Authority were located. I am pleased to say that, thanks to the help of the Departments of Human Services, and of Treasury and Finance, the Authority is now located in a Human Services precinct, where office space is shared by four agencies associated with that Department. This provides a safer and more relevant environment for the operation of a statutory authority such as ours.

Changes have also occurred in the membership of the Authority, with the appointment of Professor Jock Findlay, the reappointment of Professor Coady, Dr McDonald and Dr Wilton, and the retirement of the Rev Dr Francis Harman. The Very Rev Dr Anthony Fisher has been appointed in

place of Rev Dr Harman. Dame Margaret Guilfoyle, the Deputy Chairperson, was appointed for a further three years at the conclusion of 1998. Dame Margaret has presided over the affairs of the Authority during my absence, and has continued to develop the work of the Authority through her vast experience in all areas of public endeavour.

I wish to acknowledge with gratitude the significant contribution of Rev Dr Harman to the work of the Authority, to the work of its predecessor, the Standing Review and Advisory Committee on Infertility, from 1985 to 1997, and as an original member of the Committee to Consider the Social, Ethical and Legal Issues Arising from In Vitro Fertilisation between 1982 and 1984. Rev Dr Harman's wisdom and knowledge have greatly facilitated the processes of understanding and monitoring the development and the use of assisted reproductive services in Victoria. He has worked tirelessly to fulfil his obligations to each of these organisations, and it has been a privilege to work with him since 1982. Rev Dr Harman's term of office ended on 1 January 1999.



*Professor Louis Waller AO
Chairperson*

***The Infertility
Treatment
Authority
embodies this
regulative
interest and is
empowered to
apply the Act
within the
State of
Victoria.***



1998 saw the Authority undertaking the first year of its full operation, following proclamation of the Act on 1 January 1998. The year started with media attention on the issue of storage of embryos, based predominantly on the experiences of the United Kingdom and Western Australia where the statutory time limits imposed on embryo storage resulted in difficulty in locating couples who had placed embryos in storage and, as a consequence, subsequent removal of embryos from storage. This was an important opportunity for the Authority to correct the media impression of the provisions of the legislation and to ensure that couples and the public in general were aware that any embryo in storage is subject to a statutory time limit of five years. That time limit is able to be extended by application to the Authority from the couples.

The issue of storage of embryos and gametes in fact has taken a lot of the time of the Authority during the year and has also included the co-operative effort, with assistance from the State Minister for Health, of the Health Insurance Commission in attempting to locate couples with embryos in storage. It is clear that the decision about the future of embryos which are no longer required for treatment is a very important one for the couples involved and the options of either removal from storage, maintenance of the embryos for further treatment or the possibility of donation of embryos to another couple are decisions which are not taken lightly. The additional work undertaken by the clinics and particularly by the approved counsellors in helping couples make decisions in this regard should be acknowledged, and has clearly been very important in sensitively managing the issues of embryo storage.

The licensing and approval functions have also gone through an important phase of

implementing the policy and guidelines developed by the Authority. The completion of the first round of licensing did not occur until 1999. However, each of the licensing visits has proved important in both continuing the themes of consultation, consideration and, where appropriate, revision of guidelines to ensure that they are responsive to changes in the field and to protect the interests of the children born as a result of the procedure and the couples involved in receiving treatment. These visits are also critical in ensuring that members of the Authority maintain a knowledge and awareness of modern operations in relation to assisted reproduction.

The area of approved research has, as would be expected, attracted little by way of applications for specific research projects. However, the functioning of the notification process and the review of the operation of the Panel of Advisers are both critical elements in again ensuring that there is a mechanism to allow the legislation which has been put in place to keep abreast of developments in the field. More information about the work of the Research Committee is included later in this report.

Provisions in relation to donor procedures and the maintenance of the Register have been disappointingly slow in their implementation. The transfer of the 1984 Register was straightforward and the clinics are to be commended for helping the Authority to manage a very smooth transition of the recording of information in the 1984 Register. Details of the number of applications to that Register are included later in the Report. The establishment of the 1995 Register is well under way and there do not seem to be too many problems associated with its establishment. However, the provisions in relation to S.82 of the

Infertility Treatment Act 1995, which require the Authority to establish a donor treatment procedure information register have proved to be much more complex and the Authority is still awaiting clarification of various legal aspects relating to the establishment of this Register before it can proceed.

Notwithstanding this delay, the Authority has received many enquiries from donors wishing to register their availability to provide identifying information to offspring and, to a lesser extent, families and offspring themselves. This is particularly heartening given the spirit of the legislation in terms of the protection of these rights, and also it shows a clear change in perspective on the part of many donors, who donated at a time when anonymity was protected and the belief was that children should not be aware of their birth origins. It is interesting to note that all of the enquiries that have been received by the Authority relate to procedures which have been undertaken before 1988, and such enquiries usually arise as a result of a story in the media or coverage in the media.

The area of donor procedures has also been subject to a review of interpretation of the legislation and this particularly related to the issue of the capacity of the donor to withdraw consent to the use of his/her gametes in a treatment procedure. The Authority's initial interpretation was that withdrawal of consent would apply until the time of the use of the gamete, or the transfer of the embryo formed from the use of that gamete. Following an enquiry which arose in the context of a licensing visit, and also a specific case, an extensive review of the provisions was undertaken by the Authority, including a consultation with concerned parties and a further legal opinion sought from senior counsel. In response to this process the Authority has revised its policy

on this matter and extensive notification has been sent to the clinics, and changes made in policy documents, which make it clear that the withdrawal of consent applies only for the time that the gamete remains in its form as a gamete. Once an embryo is formed the withdrawal of consent cannot apply.

This change in the policy highlights the importance of the information and counselling provisions of the legislation. The matter of donation of gametes or embryos is critical in terms of the nature of the decision making process and the understanding on the part of the donors that this is not simply a transfer of an organ or of tissue, but is a donation of that which potentially involves the creation of another life. It is the Authority's view that experience in the adoption field has been critical in informing us about the importance of offspring having access to information about their biological origins. Whether they choose to exercise this right or not is irrelevant. What is important is that they have the right protected by statute. The statutory provisions in Victoria will provide an important model for developments in this area in the future.

The challenge to the Authority, as identified in last year's annual report, was to remain responsive to developments in the identification and treatment of infertility, to ensure that the legislation was appropriate in its application, and to maintain an open and clear communication with people working in the field and the community in general. It has responded with promptness and efficiency to these challenges. The Authority has incorporated this challenge in all of its endeavours.


Helen Szoke
Chief Executive Officer

***This was an
important
opportunity
for the
Authority to
correct the
media
impression
of the
legislation...***

The role of medical technology in assisting reproduction impinges on a variety of personal and community concerns and has implications for central human values. These include the social significance of the family, the psychological anxieties, hopes and very commonly disappointments of those who undergo treatment, the importance of truly informed consent, the significance of a respect for the beginnings of human life and its early nurture, the rights of children, donors and parents and in particular, the rights and well-being of children conceived by the intervention of birth technologies.

These concerns justify a degree of legal, social and professional regulation of the practices of assisted reproduction. The Infertility Treatment Authority embodies this regulative interest and is empowered to apply the Act within the State of Victoria. The Authority is also a natural locus for the raising and discussing of community concerns about the scope and meaning of the Act, and for the examination of new trends in the relevant medical and scientific technologies.

The Authority seeks to:

- * Promote community understanding of the complex issues involved in the treatment of infertility;
- * Ensure that appropriate information and counselling is available to those who seek treatment;
- * Assist in the smooth provisions of healthcare by the treatment institutions;
- * Gather and store information relevant to the proper regulation and broad oversight of the provisions of reproductive assistance and to release it where necessary; and
- * Report to Parliament under the terms of the Act.

The Infertility Treatment Authority is established under the *Infertility Treatment Act 1995* as an independent, incorporated body, whose role is to regulate the performance of assisted reproductive technology in Victoria.

The Act enunciates four guiding principles. They are in descending order of importance and application:

- a) The welfare and interest of any person born or to be born as a result of a treatment procedure are paramount.
- b) Human life should be preserved and protected.
- c) The interests of the family should be considered.
- d) Infertile couples should be assisted in fulfilling their desire to have children.

The specific functions of the Authority are:

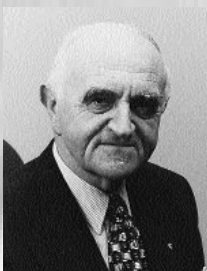
- The licensing of places for treatment and for approved research;
- The approval of practitioners, including doctors, counsellors and clinical and research scientists;
- The maintenance of statutory time limits in relation to the storage of sperm, eggs and embryos for use in treatment procedures;
- The maintenance of three registers related to donor treatment procedures;
- Monitoring decision-making and consent processes;

- Monitoring and reporting information about assisted reproductive technology within this State, through the Annual Report to the Minister for Health;
- Approving research as required under the Act.

It fulfils these functions through the development of conditions and guidelines for clinics and couples involved in assisted reproductive technology, the licensing and approval process, the production of information for clinics and consumers, media briefings and the maintenance of a library at the offices of the Authority.

The welfare and interest of any person born or to be born as a result of a treatment procedure are paramount.

The members of the Authority are nominated by the Minister for Health and the appointments are made by the Governor-in-Council. Section 123 of the Act requires that in making the nominations, the Minister must have regard to the need for diversity and expertise.



Professor Louis Waller AO

Chairperson

Professor of Law, Monash University

Term of membership expires 10 September 2001

Professor Louis Waller AO, FASSA, holds the Sir Leo Cussen Chair of Law at Monash University. He has held many posts including the first Chairman of the Law Reform Commission of Victoria, Chairman of the Victorian Government's Committee on The Social, Ethical and Legal Issues arising from IVF, the first Chairman of The Standing Review Advisory Committee on Infertility. He is currently the Chairman of the Ethics Committee of the Walter and Eliza Hall Institute of Medical Research.

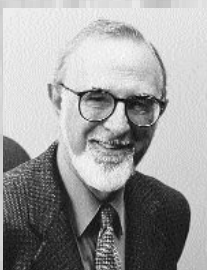


Dame Margaret Guilfoyle DBE

Deputy Chairperson

Term of membership expires 1 January 2002

The Hon Dame Margaret Guilfoyle, DBE, was a senator for Victoria from 1971 - 1987. During that time she was Minister for Education, Social Security and Finance, holding ministerial portfolios from 1975 - 1983. Dame Margaret holds numerous appointments to government and non-government bodies in the areas of the arts, education, justice and health.



Professor C.A.J. (Tony) Coady

Term of membership expires 1 January 2001

Professor Tony Coady FAHA is a Senior Research Fellow of the Australian Research Council and the Director of the Centre for Philosophy and Public Issues at the University of Melbourne. Prior to appointment as Senior Research Fellow (and Professorial Fellow at the University of Melbourne) in 1998, he was Boyce Gibson Professor of Philosophy at the University of Melbourne. He is Chair of the Humanities Large Grants Panel of the Australian Research Council, and Chair of the Philosophy, Religion and History of Ideas Electoral Panel of the Australian Academy of Humanities.



Professor John (Jock) Findlay

Term of membership expires 1 January 2001

Professor Findlay is the Deputy Director of the Prince Henry's Institute of Medical Research. He is also the Chairman of the Scientific and Technical Advisory Group of the Special Program of Research, Development and Research Training in Human Reproduction of The World Health Organisation, and a member of editorial boards of several internationally recognized scientific journals.

Very Rev Dr Anthony Fisher OP

Term of membership expires 1 January 2002

V Rev Dr Anthony Fisher is the Episcopal Vicar for Healthcare, Catholic Archdiocese of Melbourne, in addition to being a lecturer in the Australian Catholic University, where he teaches healthcare ethics and law.



Rev Dr Francis Harman AO

Term of membership expired 1 January 1999

Rev Dr Harman, a parish priest of St John's Clifton Hill, was an inaugural member of the 'Waller Committee' in 1982, and subsequently of SRACI in 1984. He has held the position of presiding judge in the National Catholic Tribunal.



Dr Christine McDonald

Term of membership expires 1 January 2001

Dr Christine McDonald is a staff specialist in respiratory diseases at The Austin and Repatriation Medical Centre in Heidelberg. She is a member of the Ministerial Asthma Working Party, Chairman of the Specialist Advisory Committee in Thoracic Medicine, and past Medical Vice-President of the Asthma Foundation of Victoria.



Dr Leeanda Wilton

Term of membership expires 1 January 2000

Dr Leeanda Wilton currently holds the position of Head of Genetic and Molecular Research Laboratory with Melbourne IVF at the Freemasons Hospital and the Royal Women's Hospital in Melbourne. She spent some years working on mammalian embryology at London Zoo. Her initial embryology training was undertaken at the Centre for Early Human Development at Monash Medical Centre.



Ms Helen Szoke

Chief Executive Officer

The Authority is staffed by a Chief Executive Officer, Ms Helen Szoke BA, MA (Prelim), Grad.Dip. Public Policy, AFCHSE.

Other staff include:

Mr Ross Adams

Data Base Assistant

Part time from 8 May 1998

Ms Jill Smithson

Personal Assistant

From 25 May 1998



Section 135 of the Act provides that the Authority may set up one or more committees of members of the Authority. The Authority has established the following committees which comprise Authority members:

- *Annual Report Committee*
has responsibility for the production of the Annual Report, and the commissioning of data from the licensed places on an on-going basis. During the consultative phase and its operational phase it has met on 10 occasions.
- *Conflict of Interest Committee*
a Conflict of Interest Policy Statement has been produced and accepted by the Authority, and forms the basis of monitoring the activities of the Authority in an on going manner. The committee has not been required to meet in the reporting period.
- *Finance and Personnel Committee*
the on-going monitoring of budget and business planning remain the responsibility of this group, which is particularly active at the conclusion of the financial year. The Committee has met on ten occasions.
- *Licensing and Approval Committee*
the members of this committee have had a particularly busy start to the 1998 year, with the conduct of site visits to a number of places to be licensed for treatment and storage, under the provisions of the Act. All approvals are considered by this Committee with recommendations made to a full meeting of the Authority. The Committee also had responsibility for the development of conditions and guidelines, and in total has held in excess of 30 meetings.

- *Research Committee*
the Research Committee monitors research activity as required. The Committee has met ten times.
- *Storage Committee*
a monthly meeting of this committee considers applications for the extension of the storage period for gametes and embryos, and also applications to import and export gametes and embryos. This Committee has met twelve times.

In addition a range of working groups and reference groups has been established to facilitate the work of the Authority. These groups co-opted the experience and expertise of people beyond the membership of the Authority.

PANEL OF ADVISERS

The Authority has invited a number of people to assist in deliberations relating to research and significant innovations in clinical practice. The Panel's role is:

- The provision of up to date information on general matters relating to reproductive technology;
- Response to questions of a technical nature on request by the Authority;
- The provision of technical advice to the Research Committee of the Authority on related fields of investigation.

Specific advice is sought from individual members, as determined by the focus of the project or referral to the ITA.

The following people agreed to participate as contact people for the Authority during 1998, on matters related to their field of research:

Dr Gordon BAKER

*Department of Obstetrics and Gynaecology
University of Melbourne (withdrew from panel, November 1998)*

Dr Agnes BANKIER

The Murdoch Institute for Research into Birth Defects

Professor Henry BURGER AO

Prince Henry's Institute of Medical Research

Professor David DE KRETZER

The Institute of Reproduction and Development, Monash University

Dr Marie DZIADEK

*Department of Anatomy and Cell Biology,
University of Melbourne*

Dr David EDGAR

Reproductive Biology Unit, Royal Women's Hospital

Dr Sean FLAHERTY

Scientific consultant, based in Adelaide

Professor John FUNDER

Baker Medical Research Institute

Professor Jenny GRAVES

Department of Genetics, LaTrobe University

Professor Colin MATTHEWS

Honorary Visiting Research Fellow, University of Adelaide

Professor Roger PEPPERELL

*Department of Obstetrics and Gynaecology,
University of Melbourne*

Professor Marilyn RENFREE

Department of Zoology, University of Melbourne

Professor Alan TROUNSON

*Institute of Reproduction and Development,
Monash University*

Professor Bob WILLIAMSON

The Murdoch Institute for Research into Birth Defects

The Infertility Treatment Authority has authority to administer the licensing and approval systems under the Act.

LICENSED PLACES FOR TREATMENT

Section 93 stipulates that certain activities may not be performed unless they are performed at a place which is licensed. An application for a licence may be made by a legal person of a public hospital, which is a statutory corporation, or by a denominational or private hospital, or a day procedure centre, and will be in respect of specified premises.

The licensing process, where possible, is undertaken when accreditation by the Reproductive Technology Accreditation Committee (RTAC) occurs. This ensures that the technical, scientific and clinical aspects are addressed through the RTAC process, and adherence to the legal provisions of the Act is assessed by the Authority.

In Victoria, a licence is required to undertake a range of treatment procedures which include:

- in vitro fertilisation (IVF)
- gamete intrafallopian fertilisation transfer (GIFT)
- donor insemination (DI)

A list of places which have been licensed, or provided with a provisional licence is outlined in Appendix 1. During 1998, the Reproductive Medicine Clinic at Prince Henry's Institute of Medical Research ceased operation, referring its current patients to Monash IVF at the Monash Surgical Private Hospital Pty Ltd in Clayton. In addition, the Bellarine Hospital ceased surgical services in December 1998, which precluded the further operation of the IVF clinic.

The Authority has widely circulated the Guidelines for the Conditions for Licence for Hospitals and Day Procedure Centres, Places for Approved Research, and approvals for doctors, counsellors and scientists. These conditions outline the requirements under the

Act and guidelines for practice. Where possible, industry standards have been identified to guide clinical and scientific practice, as published by RTAC or the National Association of Testing Authorities (NATA). The Guidelines are available from the Authority, and outline requirements for clinical services, treatment methods, storage requirements, client services, counselling, record keeping and information practices and ethics and research.

LICENSED PLACES FOR APPROVED RESEARCH

Section 94 of the Act stipulates that approved research activities may not be undertaken, unless they are undertaken at a place which is licensed.

A licence may be granted for either or both of the following activities:

- a) the undertaking of approved research as outlined in s 22(1)(a) or (b) of the Act, and/or
- b) the storage of gametes, zygotes or embryos.

Only one licence has been granted for a place for approved research, as outlined in Appendix 2.

APPROVALS

The approval requirements apply to doctors, counsellors and scientists. In the case of doctors, the Authority requires the Medical Practitioners Board Registration number and the names of two referees. In the case of scientists, two referees are required.

Counsellors are required to be members of the Australian and New Zealand Infertility Counsellors' Association (ANZICA), to have appropriate qualifications and to nominate two referees.

To date the following applications have been approved:

Counsellors	25
Clinical Scientists	40
Doctors	30
Research Scientists	5

Appendices 3 - 5 list approvals under the Infertility Treatment Act 1995.

STORAGE AND IMPORT AND EXPORT OF SPERM, EGGS AND EMBRYOS

The *Infertility Treatment Act 1995* includes a number of provisions in relation to the storage of gametes and embryos and the taking of sperm, eggs and embryos in and out of Victoria.

The Act requires that embryos must not remain in storage for longer than five years or gametes longer than ten years, except with the express approval of the Authority. These provisions, particularly as they relate to the storage of embryos, have been a large part of the Authority's work since the implementation of the Act.

During 1998 the Infertility Treatment Authority undertook an extensive search process, with the help of the Health Insurance Commission, to locate couples who had embryos in storage for in excess of five years. The difficulty in locating couples with embryos in storage has been evidenced in this process. Many couples have not responded to repeated communications. In addition, contact made with the Authority and the clinics suggests that for many couples, the decision about the future fate of embryos in storage is a particularly difficult one. Approximately 1,700 embryos were withdrawn from storage during 1998.

The extension for the storage of donor sperm has been subject to the imposition of conditions in some cases. In those cases where sperm has been used to create

children in more than ten families, the sperm is restricted to future use only for the creation of siblings in those families, or for research purposes. This measure thus implements one of the conditions for licensing of places, that is, that donor sperm can only be used to create children in ten families.

The table below summarises the number of applications which have been received in each of the categories, and the recommendations of the Authority.

Applications for Extensions in Storage: Embryos and Donor Sperm

Applications Received from 1 January 1998 to 31 December 1998

<i>Storage Type</i>	<i>Number of Applications</i>	<i>Outcome</i>
Donor Sperm	71	Approved
Embryo	423	Approved

The Authority is also required to approve the transfer of embryos, zygotes or gametes to and from Victoria. Such transfer should be in line with the main provisions of the Act. This means, for example, that in those cases where donor gametes were used, the counselling and record provisions of the legislation must be met. The summary of applications approved is outlined below.

Applications to Import Sperm and Embryos

1 January 1998 to 31 December 1998

<i>Type of Application</i>	<i>Number of Applications</i>	<i>Outcome</i>
Sperm	4	Approved
Embryo	18	Approved

Applications to Export Sperm and Embryos

1 January 1998 to 31 December 1998

<i>Type of Application</i>	<i>Number of Applications</i>	<i>Outcome</i>
Sperm	22	Approved
Embryo	11	Approved

The Authority is also required to approve the transfer of embryos, zygotes or gametes to and from Victoria.

The Authority has established a Research Committee which:

- provides advice to the Authority on matters related to research, and the impact of the Act on research which requires approval;
- provides advice on clinical and scientific developments within the area of infertility treatment;
- receives advice about notifications from clinics, institutions and researchers in relation to changes in clinical practice;
- seeks advice from the Panel of Advisers or other areas as appropriate to ensure that the Authority is appropriately informed on matters relating to research.

The requirements of the Act in relation to research on embryos are very specific.

The *Infertility Treatment Act* 1995, in section 22, defines research as including:

- a) an experimental procedure or clinical trial;
- b) the activity of bringing about or attempting to bring about parthenogenesis in an oocyte outside the body of a woman; or forming or attempting to form a parthenogenetic oocyte outside or a parthenogene outside the body of a woman.

The approval of the Authority is required for *any* research which:

- involves a living embryo;
- involves the formation of a zygote for the purposes of research, or the use in research of a zygote originally formed for a treatment procedure;
- uses a parthenogenetic oocyte.

No notification or approval is required for research on gametes, provided that they are not used to form a zygote, and that consent is given as required by section 36 of the Act.

No notification or approval is required for research undertaken on embryos after they have been allowed to succumb.

No applications for approved research have been received by the Authority to date. The Research Committee has received five notifications in relation to proposed research or clinical procedures during 1998.

In the latter part of 1998, the Research Committee commenced a monitoring process, in line with the requirement to monitor the impact of the Act on human embryo research in Victoria. This process is continuing.

Central Register

The Authority has responsibility for the operation of two central registers. The Central Register, which was established under the *Infertility (Medical Procedures) Act 1984*, recorded information about offspring born as a result of a donor procedure. The information recorded relates to identifying and non-identifying information about the donor and the offspring at the time of birth and identifying information about the couple. The register previously had been managed by the Department of Human Services, and was formally handed over to the Authority on 28 April 1998. This Central Register contains the following entries:

Register Established Under the 1984

Legislation

<i>No. of Donors Registered</i>	<i>No. of Births Registered</i>	<i>No. of Couples Registered</i>
467	1,884	1,405

In addition to the Central Register established under the 1984 legislation, the Authority is required under the 1995 legislation to keep its own central register. This register will contain similar information. However, the provisions for access to information to the 1995 Central Register are significantly different to that of the register established under the 1984 legislation. The previous Act's provisions allow applications to be made from donors, couples with a child born as a result of a donor procedure or the offspring for both identifying and non-identifying information. However, identifying information may only be released by the Authority with the consent of the person to whom the information relates. The 1995 register, by contrast, allows access to identifying information by offspring when they turn 18 years old. This right is conferred unconditionally, the donor consenting to the

use of their gametes or embryos on the understanding that this information will be made available on request.

No applications to this register were made during the reporting period, but planning and preparation for its establishment were commenced.

Donor Treatment Procedure Information Register

Section 82 of the Act requires that a Donor Treatment Procedure Information Register be established, to enable applications for lodgement of details on this register to be made on a voluntary basis. This register was not established during the reporting period.

It is important for the Infertility Treatment Authority to maintain constant and comprehensive communication with a range of organizations and agencies, both in Australia and overseas. This requirement is included in the functions of the Authority, where the Authority must ensure that the Minister for Health is provided with information about any developments in the field. The Authority has developed a varied strategy to fulfil this requirement:

- regular communication and information sharing with other regulatory agencies in Australia and overseas;
- regular briefings and presentations from experts in the field of assisted reproduction;
- regular attendance at conferences and seminars both in Australia and overseas;
- maintenance of information from the Authority through brochures and newsletters;
- attendances at meetings to respond to enquiries about the legislation or to talk about the work of the Authority.

The Authority has maintained an enquiry database which outlines the nature of enquiries received, beyond the administrative enquiries from approved practitioners or licensed places. A summary is outlined in the table below.

<i>Nature of Enquiry</i>	<i>Number of Enquiries</i>
Application Process – <i>clarification of the application process, as required under the Act</i>	10
Information – <i>any general enquiry</i>	39
Legislation – <i>relates to any enquiry where the caller is seeking clarification about the application of the Infertility Treatment Act.</i>	29
Media – <i>any enquiry from radio, print or TV media</i>	43

Information to the Public

A range of information brochures has been developed for patients using clinic services. In addition, general information brochures are available for use by the public to facilitate the understanding of the role of the Authority and the scope of the Act.

Brochures are produced by the Authority on:

- General Information
- A Guide to Patients
- Information to Couples Utilising Donor Egg, Sperm or Embryo
- Information to Men considering Donation of Sperm
- Information to Women considering Donation of Eggs
- Information to Couples considering Donation of Embryos
- Information to Couples utilising Donor Egg, Sperm or Embryos. Different Conditions Apply.

The Authority has a website which contains all of the information about the operation of the Authority and the forms required for various applications. The website address is www.ita.org.au.

In addition, the Authority produces a regular edition of the ITA News, and other reports arising from meetings.

Regulators' Meeting

The Infertility Treatment Authority hosted a meeting of Regulators and support groups in October 1998. Participation included representatives from all states except Queensland and Tasmania. A representative also attended from New Zealand. In addition, NHMRC, the Reproductive Technology Accreditation Committee, The Donor Conception Support Group and Access patient support groups were represented. The meeting received reports about the NHMRC National Working Parties, looked at the reporting of success rates and reviewed regulatory activity in the States and New Zealand. A report of the meeting is available from the Authority.

Liaison with Other Organisations

The ITA maintains consistent communication with a number of other regulatory bodies, including The South Australian Council on Reproductive Technology, The Western Australian Reproductive Technology Council, The Reproductive Technology Accreditation Committee of The Fertility Society of Australia, The Human Fertilisation and Embryology Authority in the United Kingdom and other government departments in Canada, New Zealand and Hong Kong. Such communication ensures that the Authority is kept abreast of developments in Australia and beyond.

The link with organized support groups is also essential, to ensure the perspective of those people using the services is incorporated into considerations by the Authority. The Authority has met regularly with support groups from Monash IVF, Melbourne IVF and the Melbourne Assisted Conception Centre. The Victorian branch of The Donor Conception Support Group has also made many important contributions to the development of policy in this area. Finally

the Authority has regular communication with the national bodies of Access and The Donor Conception Support Group.

The National Health and Medical Research Council (NHMRC) and the Australian Institute of Health and Welfare National Perinatal Statistics Unit (AIHW-NPSU) perform important roles at a national level. The ITA maintains regular links with these groups.

***The link with
organised
support
groups is also
essential ...***

Section 137 of the *Infertility Treatment Act* 1995 requires the Authority to report to the Minister, on the 30th September in each year. The report is to include particulars of each program including details about the number of treatment procedures carried out and the outcome of these treatment procedures. The Authority is required to report this information in terms of procedures carried out at each licensed place and also the status of stored embryos and gametes for each of the licensed places.

In the reporting period, over 4,000 couples were treated in licensed places. Five of these couples attended for the purposes of undergoing preimplantation genetic diagnosis, and no pregnancies resulted from the treatment of these couples.

The terminology used in the tables is fully explained in the listing of terminology, found on page 19. It is important to read this to ensure an accurate understanding of the reporting in the tables to follow.

In the tables that follow, it should be noted that double counting of couples may occur because they may:

- attend more than one licensed place for treatment, or
- receive treatment using more than one type of procedure.

This report also includes a final outcome of treatment procedures undertaken in 1997. These are shown on page 20. These final figures were not available at the time of the production of the 1998 Annual Report. Similarly, this year, a full report on treatment outcomes is not possible until next year's Annual Report. As pregnancies are on going, some outcomes are not known at the time of this report going to print.

In reporting treatment procedures by place, it should be noted that there are significant differences in the size of places which are licensed, and the number of services offered at these places. Many of the licensed places in country Victoria, for example, have a small number of patients. In addition, the licensed places implement different treatment policies, and this may also have an impact on the outcome for different procedures. Caution should therefore be exercised in any interpretation of the data outlined in this report.

The Authority wishes to thank the licensees and their Designated Officers for their efforts in ensuring that this data is complete for the purposes of this Annual Report.

Age of Patient

Age of woman as at the first Treatment Cycle for the period reported.

Clinical Pregnancy

Any type of pregnancy except that diagnosed only by measuring levels of human chorionic gonadotrophin. This definition includes ectopic pregnancy, blighted ovum and spontaneous abortion.

Confinement

Birth of one or more babies from a pregnancy. Such an event is counted as a single delivery for the pregnancy, irrespective of the number of babies born.

Couple

A couple, for the purposes of the Infertility Treatment Act 1995, is a man and woman who are married or in a de facto relationship, who are considered unlikely to become pregnant other than by a treatment procedure, or who wish to avoid a major genetic abnormality or disease being passed onto a person born as a result of a pregnancy.

Donor Insemination (DI)

Artificial insemination with donor sperm.

Oocyte Retrieval

Procedure undertaken in an attempt to collect oocyte/s from a woman.

Embryo

Any stage of human embryonic development at and from syngamy. Syngamy is that stage of development of a fertilised oocyte where the chromosomes derived from the male and female pronuclei align on the mitotic spindle.

Fertilisation

Penetration of an oocyte by sperm. Only oocyte/s with two pronuclei will be reported.

Gamete

An oocyte or sperm

Gamete Intra-fallopian Transfer (GIFT)

A medical procedure of transferring an oocyte/s and sperm to the fallopian tube of a woman.

Intra Cytoplasmic Sperm Injection (ICSI)

ICSI is a micromanipulation technique where a single sperm is injected into the inner cellular structure of an oocyte. For the purposes of this report, ICSI treatment cycles are included in the total of IVF treatment cycles.

Insemination (In Vitro)

Insemination occurs with the co-incubation of sperm and oocyte outside the body of a woman. It does not necessarily result in the formation of an embryo which is fit for transfer.

In Vitro Fertilisation (IVF)

Co-incubation of sperm and oocyte outside the body of a woman. Intra Cytoplasmic Sperm Injection may also be used as a part of an IVF procedure.

Licensed Place

A place in respect of which a licence under Part 8 of the Act is in force.

Live Birth

Infant with signs of life after pregnancy of at least 20 weeks' gestation.

Ongoing Pregnancies

Ongoing Clinical Pregnancies as at the 31st August of the year following that being reported on. Finalised delivery and birth details will be reported in the next Annual Report to be published.

Preimplantation Genetic Diagnosis

Testing of genetic material from an oocyte or embryo to avoid transfer of an embryo with a genetic abnormality.

Stimulated Cycle

A Treatment Cycle in which the woman's ovaries are stimulated with superovulatory drugs, excluding clomiphene citrate, to produce more than one oocyte.

Thaw Cycle

A Thaw cycle commences with the removal of frozen embryos from storage in order to be thawed and then transferred.

Transfer

The procedure of placing embryos or oocytes and sperm into the body of a woman.

Treatment Cycle

A Treatment cycle begins (a) on the day when superovulatory drugs were commenced or (b) from the date of the last menstrual period (LMP).

Treatment Cycle Continued

For the purposes of reporting, a treatment cycle continues when: (a) IVF/GIFT - an oocyte retrieval procedure occurs (b) Frozen embryo transfer and an embryo transfer procedure occurs - if an embryo is fit for transfer (c) Donor Insemination - if insemination occurs.

Unstimulated Cycle

A treatment cycle where no superovulatory drugs are used or where clomiphene citrate is used.

Terminology used in Reporting Data.

OUTCOME TREATMENT CYCLES

Final Outcomes for Treatment Cycles Commenced in 1997 All Licensed Places

Licensed Place	IVF							GIFT						
	Total No. Couples	Cycles Commenced	Cycles Cont'd	Clinical Pregnancies	Confinements	Total No. Babies Born	Pregnancy Outcome Unkwn	Total No. Couples	Cycles Commenced	Cycles Cont'd	Clinical Pregnancies	Confinements	Total No. Babies Born	Pregn'y Outcome Unk'wn
Ballarat Health Services	31	38	31	5	4	6	0	8	9	7	1	1	2	0
Bellarine Hospital	46	66	54	9	6	6	0	14	19	14	2	1	1	0
Bendigo Health Care Group	9	9	9	3	3	3	0	1	1	1	1	1	1	0
Central Wellington Health Service	31	35	31	8	6	8	0	2	2	2	0	0	0	0
Epworth Hospital	662	958	797	122	96	116	0	73	84	70	14	12	16	0
Freemasons Hospital	993	1,488	1,228	162	136	168	0	9	9	8	2	2	3	0
Mercy Hospital for Women	0	0	0	0	0	0	0	137	169	141	37	28	33	0
Mildura Private Hospital	59	85	79	7	8	12	0	0	0	0	0	0	0	0
Monash Surgical Private Hospital	747	1,044	917	186	138	174	1	63	80	66	16	15	20	0
Prince Henry's Institute of Medical Research	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Shepparton Private Hospital	20	21	16	2	2	2	0	0	0	0	0	0	0	0
Wangaratta Private Hospital	8	8	8	5	5	10	0	0	0	0	0	0	0	0
Women's and Children's Health Care Network	611	792	696	95	75	90	0	6	6	6	0	0	0	0
Aggregated Total	3,217	4,544	3,866	604	479	595	1	313	379	315	73	60	76	0

Licensed Place	THAW							DI						
	Total No. Couples	Cycles Commenced	Cycles Cont'd	Clinical Pregnancies	Confinements	Total No. Babies Born	Pregnancy Outcome Unkwn	Total No. Couples	Cycles Commenced	Cycles Cont'd	Clinical Pregnancies	Confinements	Total No. Babies Born	Pregn'y Outcome Unk'wn
Ballarat Health Services	3	3	3	0	0	0	0	0	0	0	0	0	0	0
Bellarine Hospital	11	12	9	0	0	0	0	0	0	0	0	0	0	0
Bendigo Health Care Group	3	3	2	0	0	0	0	0	0	0	0	0	0	0
Central Wellington Health Service	6	6	4	0	0	0	0	0	0	0	0	0	0	0
Epworth Hospital	261	318	279	42	37	44	0	98	357	327	26	17	16	1
Freemasons Hospital	611	1,007	948	154	128	142	1	0	0	0	0	0	0	0
Mercy Hospital for Women	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Mildura Private Hospital	34	62	55	9	7	7	0	1	1	1	1	1	1	0
Monash Surgical Private Hospital	170	198	180	26	20	24	0	0	0	0	0	0	0	0
Prince Henry's Institute of Medical Research	0	0	0	0	0	0	0	72	290	290	22	15	16	0
Shepparton Private Hospital	2	2	2	1	1	2	0	0	0	0	0	0	0	0
Wangaratta Private Hospital	3	3	3	0	0	0	0	0	0	0	0	0	0	0
Women's and Children's Health Care Network	484	802	741	89	67	76	0	83	301	276	23	22	22	1
Aggregated Total	1,588	2,416	2,226	321	260	295	1	254	949	894	72	55	55	2

Outcomes for Treatment Cycles Commenced in 1998 Treatment Procedures – All Licensed Places

TABLE 1

For period 1 January 1998 to 31 December 1998, All Places

	Total No. of Couples	Total No. of Cycles Commenced	Total No. of Cycles Continued	Total No. of Clinical Pregnancies	Total No. of Confinements	Total No. of Babies Born	Total No. of Ongoing Pregnancies
Whole of Victoria	4,274	9,254	7,934	1,231	622	756	413
By Procedure							
DI	257	871	792	72	36	39	18
GIFT	283	369	312	76	49	77	8
IVF	3,238	4,992	4,280	692	345	423	252
Thaw Cycle	1,715	3,022	2,550	391	192	217	135

* Variations in totals may be caused by attendance in the same year at more than one Licensed Place and/or by treatment under more than one procedure.

Patients Per Age Groups – All Licensed Places

TABLE 2

For period 1 January 1998 to 31 December 1998, All Places

Age of Women – Years	Total No. of Women in Treatment	Total No. of Cycles Commenced	Total No. of Cycles Continued	Total No. of Clinical Pregnancies	Total No. of Confinements	Total No. of Babies Born	Total No. of Ongoing Pregnancies
DI Procedures							
<= 24	11	24	24	3	2	3	1
25 to 29	51	164	151	15	7	7	4
30 to 34	103	347	309	32	18	19	9
35 to 39	74	281	258	22	9	10	4
40 to 44	18	55	50	0	0	0	0
Aggregated Total	257	871	792	72	36	39	18
IVF/GIFT/Thaw Procedures							
<=24	78	159	139	32	10	11	15
25 to 29	641	1,337	1,170	216	117	145	67
30 to 34	1,463	2,900	2,531	475	237	294	171
35 to 39	1,309	2,683	2,238	329	174	209	105
40 to 44	567	1,148	940	97	41	49	36
45 to 49	77	139	107	8	6	7	0
>=50	8	17	16	2	1	2	1
Aggregated Total	4,143	8,383	7,141	1,159	586	717	395

Figures include Cycles in which oocytes were donated. Women may have pregnancies from eggs donated from a younger woman.

Use of Donor Gametes and Embryos and Outcomes – All Licensed Places

TABLE 3

For period 1 January 1998 to 31 December 1998, All Places

Donor Gamete/s or Embryo/s	Total No. of Couples using Donor Gametes/Embryos	Total No. of Cycles Commenced	Total No. of Cycles Continued	Total No. of Clinical Pregnancies	Total No. of Confinements	Total No. of Babies Born	Total No. of Ongoing Pregnancies
Donor Oocytes	155	190	190	35	24	29	9
Donor Embryos	36	49	47	12	4	5	4
Donor Sperm	326	986	907	91	45	56	26

The ITA only collects information on treatment cycles for patients under treatment for infertility. As a result cycles commenced and continued for cycles receiving donor oocytes are the same – these cycles are not recorded by the places unless donor oocytes are available.

Outcomes per Licensed Place, IVF – In Vitro Fertilisation*

TABLE 4.1

For period 1 January 1998 to 31 December 1998, All Places

Licensed Place	Total No. of Couples	Total No. of Cycles Commenced	Total No. of Cycles Continued	Total No. of Clinical Pregnancies	Total No. of Confinements	Total No. of Babies Born	Total No. of Ongoing Pregnancies
Ballarat Health Services	32	43	34	7	3	4	3
Bellarine Hospital	48	61	46	6	5	8	1
Bendigo Health Care Group	38	52	46	13	6	6	7
Central Wellington Health Service	51	72	62	19	9	11	8
Epworth Hospital	599	895	753	116	51	66	54
Freemasons Hospital	946	1,475	1,248	176	95	112	50
Mildura Private Hospital	71	92	80	12	9	11	2
Monash Surgical Private Hospital	835	1,230	1,051	187	90	116	73
Shepparton Private Hospital	15	17	12	1	1	1	0
Wangaratta Private Hospital	21	22	19	10	4	5	5
Women's & Children's Health Care Network	663	847	742	110	48	54	40
Aggregated Total	3,319	4,806	4,093	657	321	394	243

* Excludes treatment where oocytes and embryos donated.

Double counting of patient numbers occurs where they have attended more than one place in the year.

Egg Collection and Embryo Transfer per Licensed Place, IVF – In Vitro Fertilisation*

TABLE 4.2

For period 1 January 1998 to 31 December 1998, All Places

Licensed Place	Total No. of Oocyte Retrieval Attempts	Total No. of Oocytes Collected	Total No. of Oocytes Inseminated	Total No. of Oocytes Fertilised	Total No. of Cycles where no Embryo was formed	Total No. of Embryos Transferred	Total No. of Embryos Frozen	Total No. of Embryos unsuitable for Transfer or Freezing
Ballarat Health Services	34	405	379	231	4	72	81	78
Bellarine Hospital	46	480	443	250	4	89	58	103
Bendigo Health Care Group	46	452	419	296	2	96	109	91
Central Wellington Health Service	62	636	589	346	3	138	96	112
Epworth Hospital	753	6,858	6,004	3,425	82	1,438	797	1,190
Freemasons Hospital	1,248	10,780	9,726	5,513	164	1,815	2,754	944
Mildura Private Hospital	80	1,006	937	607	4	89	433	85
Monash Surgical Private Hosp.	1,051	10,327	9,134	5,227	116	1,813	998	2,416
Shepparton Private Hospital	19	182	147	98	0	40	23	35
Wangaratta Private Hospital	12	81	80	40	2	16	14	10
Women's & Children's Health Care Network	742	7,389	6,691	4,224	68	1,089	2,341	794
Aggregated Total	4,093	38,596	34,549	20,257	449	6,695	7,704	5,858

* Excludes treatment where oocytes and embryos donated.

Double counting of patient numbers occurs where they have attended more than one place in the year.

Outcomes per Licensed Place, GIFT – Gamete Intra-Fallopian Transfer

TABLE 4.3

For period 1 January 1998 to 31 December 1998, All Places

Licensed Place	Total No. of Couples	Total No. of Cycles Commenced	Total No. of Cycles Continued	Total No. of Clinical Pregnancies	Total No. of Confinements	Total No. of Babies Born	Total No. of Ongoing Pregnancies
Ballarat Health Services	1	1	1	0	0	0	0
Bellarine Hospital	11	13	10	2	1	2	1
Bendigo Health Care Group	2	2	2	0	0	0	0
Central Wellington Health Service	3	3	3	0	0	0	0
Epworth Hospital	57	75	57	10	7	13	2
Freemasons Hospital	9	10	10	1	1	1	0
Mercy Hospital for Women	143	191	168	48	34	49	0
Monash Surgical Private Hospital	56	68	56	14	6	12	5
Women's & Children's Health Care Network	4	6	5	1	0	0	0
Aggregated Total	286	369	312	76	49	77	8

Double counting of patient numbers occurs where they have attended more than one place in the year.

Oocyte Collection and Transfer per Licensed Place, GIFT – Gamete Intra-Fallopian Transfer

TABLE 4.4

For period 1 January 1998 to 31 December 1998, All Places

Licensed Place	GIFT			ADDITIONAL PROCEDURES FOLLOWING GIFT			
	Total No. of Oocyte Retrieval Attempts	Total No. of Oocytes Collected	Total No. of Oocytes Transferred	Total No. of Oocytes Frozen	Total No. of Oocytes Inseminated	Total No. of Oocytes Fertilised	Total No. of Embryos Frozen
Ballarat Health Services	1	12	3	0	9	6	3
Bellarine Hospital	10	94	27	0	66	28	22
Bendigo Health Care Group	2	12	3	0	0	0	0
Central Wellington Health Service	3	27	8	0	17	9	0
Epworth Hospital	57	544	175	0	292	146	70
Freemasons Hospital	10	102	29	0	73	35	29
Mercy Hospital for Women	168	1,221	554	0	0	0	0
Monash Surgical Private Hospital	56	545	171	0	338	135	68
Women's & Children's Health Care Network	5	58	13	0	21	10	9
Aggregated Total	312	2,615	983	0	816	369	201

Outcomes per Licensed Place, Thaw Cycle – Frozen Embryo Transfer

TABLE 4.5

For period 1 January 1998 to 31 December 1998, All Places

Licensed Place	Total No. of Couples	Total No. of Cycles Commenced	Total No. of Embryos Thawed	Total No. of Cycles Continued	Total No. of Embryos Transferred	Total No. of Clinical Pregnancies	Total No. of Confinements	Total No. of Babies Born	Total No. of Ongoing Pregnancies
Ballarat Health Services	5	5	15	4	9	0	0	0	0
Bellarine Hospital	4	4	9	3	5	0	0	0	0
Bendigo Healthcare Group	4	6	13	6	12	3	0	0	3
Central Wellington Health Service	12	12	40	9	17	1	0	0	1
Epworth Hospital	284	366	930	294	598	42	17	25	19
Freemasons Hospital	685	1,272	2,338	1,113	1,883	188	101	110	58
Mildura Private Hospital	60	109	297	100	180	19	15	16	1
Monash Surgical Private Hospital	233	286	717	240	464	34	15	17	14
Wangaratta Private Hospital	1	1	3	1	3	0	0	0	0
Women's & Children's Health Care Network	503	961	1,659	780	1,306	104	44	49	39
Aggregated Total	1,791	3,022	6,021	2,550	4,477	391	192	217	135

Outcomes per Licensed Place, DI – Donor Insemination

TABLE 4.6

For period 1 January 1998 to 31 December 1998, All Places

Licensed Place	Total No. of Couples	Total No. of Cycles Commenced	Total No. of Cycles Continued	Total No. of Clinical Pregnancies	Total No. of Confinements	Total No. of Babies Born	Total No. of Ongoing Pregnancies
STIMULATED							
Epworth Hospital	1	6	5	0	0	0	0
Mildura Private Hospital	1	2	2	0	0	0	0
Prince Henry's Inst. of Medical Res.	3	7	7	1	1	2	0
Women's & Children's Health Care Network	9	23	19	3	1	1	0
UNSTIMULATED							
Epworth Hospital	95	400	346	26	11	11	9
Freemasons Hospital	2	2	1	0	0	0	0
Mildura Private Hospital	7	21	21	3	2	2	0
Monash Surgical Private Hospital	28	56	56	2	0	0	1
Prince Henry's Inst. of Medical Res.	49	145	145	9	7	7	0
Women's & Children's Health Care Network	70	209	190	28	14	16	8
Aggregated Total	265	871	792	72	36	39	18

Double counting of patient numbers occurs where they have attended more than one place in the year or had more than one type of procedure.

Outcomes per Licensed Place, Stimulated / Unstimulated – IVF / GIFT

TABLE 5

For period 1 January 1998 to 31 December 1998, All Places

Licensed Place	Total No. of Couples	Total No. of Cycles Commenced	Total No. of Cycles Continued	Total No. of Clinical Pregnancies	Total No. of Confinements	Total No. of Babies Born	Total No. of Ongoing Pregnancies
STIMULATED							
Ballarat Health Services	32	44	35	7	3	4	3
Bellarine Hospital	54	72	56	8	6	10	2
Bendigo Health Care Group	39	53	48	13	6	6	7
Central Wellington Health Service	48	68	60	19	9	11	8
Epworth Hospital	593	822	682	117	55	74	51
Freemasons Hospital	892	1,193	1,046	165	91	107	44
Mercy Hospital for Women	143	191	168	48	34	49	0
Mildura Private Hospital	71	91	80	11	8	10	2
Monash Surgical Private Hospital	832	1,156	987	197	94	126	78
Shepparton Private Hospital	21	22	19	10	4	5	5
Wangaratta Private Hospital	15	17	12	1	1	1	0
Women's & Children's Health Care Network	608	755	664	107	48	54	37
UNSTIMULATED							
Ballarat Health Services	1	1	1	0	0	0	0
Bellarine Hospital	5	5	3	0	0	0	0
Bendigo Health Care Group	6	8	7	2	0	0	2
Central Wellington Health Service	5	7	5	0	0	0	0
Epworth Hospital	158	241	221	27	15	20	11
Freemasons Hospital	142	327	247	20	10	13	7
Mildura Private Hospital	2	2	1	1	1	1	0
Monash Surgical Private Hospital	103	178	156	11	9	9	0
Shepparton Private Hospital	1	1	1	0	0	0	0
Wangaratta Private Hospital	2	3	3	0	0	0	0
Women's & Children's Health Care Network	78	104	89	4	0	0	3
Aggregated Total	3,851	5,361	4,591	768	394	500	260

Double counting of patient numbers occurs where they have attended more than one place in the year.

Multiple Births per Licensed Place

TABLE 6

For period 1 January 1998 to 31 December 1998, All Places

Licensed Place	Total No. of Confinements	Total No. of Babies Born	Number of Singleton/s Born	Set/s of Twin/s Born	Set/s of Triplet/s Born	Set/s of >= Quad/s Born
Ballarat Health Services	3	4	2	1	0	0
Bellarine Hospital	6	10	2	4	0	0
Bendigo Healthcare Group	6	6	6	0	0	0
Central Wellington Health Service	9	11	7	2	0	0
Epworth Hospital	98	130	68	28	2	0
Freemasons Hospital	202	230	174	28	0	0
Mercy Hospital for Women	34	49	22	9	3	0
Mildura Private Hospital	26	29	23	3	0	0
Monash Surgical Private Hospital	118	152	90	22	6	0
Prince Henry's Institute of Medical Research	8	9	7	1	0	0
Shepparton Private Hospital	4	5	3	1	0	0
Wangaratta Private Hospital	1	1	1	0	0	0
Women's & Children's Health Care Network	107	120	94	13	0	0
Aggregated Total	622	756	499	112	11	0

Causes of Infertility

TABLE 7

For period 1 January 1998 to 31 December 1998, All Places

Licensed Place	Femal Tubal Only	Other Female Factor	Male Infertility Only	Multiple Causes for the Couple	Unexplained for the Couple
Ballarat Health Services	7	2	8	13	6
Bellarine Hospital	3	8	21	12	15
Bendigo Healthcare Group	4	6	16	9	11
Central Wellington Health Service	9	7	16	10	14
Epworth Hospital	70	104	279	226	251
Freemasons Hospital	188	114	401	122	407
Mercy Hospital for Women	30	12	10	65	26
Mildura Private Hospital	15	13	27	21	10
Monash Surgical Private Hospital	96	114	285	185	327
Prince Henry's Institute of Medical Research	0	0	50	0	2
Shepparton Private Hospital	2	0	9	5	6
Wangaratta Private Hospital	1	1	8	4	4
Women's & Children's Health Care Network	135	71	298	101	350
Aggregated Total	507	418	1,309	717	1,313

The licensed place totals are greater than the aggregated total due to patients attending more than one place in the year.

Storage of Oocytes / Embryos per Licensed Place

TABLE 8

For period 1 January 1998 to 31 December 1998, All Places

Licensed Place	OOCYTES STORED	NUMBER OF EMBRYOS STORED			
	Woman with oocytes/ ovarian tissue stored at start of period	Start of Reporting Period	Frozen from Cycles Commenced	Thawed for Cycles Commenced	Remaining in Storage
Ballarat Health Services	0	0	88	15	0
Bellarine Hospital	0	0	84	9	0
Bendigo Healthcare Group	0	0	140	13	0
Central Wellington Health Service	0	0	96	40	0
Epworth Hospital	45	2,961	1,067	930	2,484
Freemasons Hospital	0	4,645	2,924	2,339	5,221
Mercy Hospital for Women	27	0	0	0	0
Mildura Private Hospital	0	356	436	295	594
Monash Surgical Private Hospital	12	1,314	1,148	717	1,464
Shepparton Private Hospital	0	0	23	0	0
Wangaratta Private Hospital	0	0	20	3	0
Women's & Children's Health Care Network	35	5,020	2,398	1,659	5,813
Aggregated Total	119	14,296	8,424	6,022	15,576

Storage of Donor Sperm per Licensed Place

TABLE 9

For period 1 January 1998 to 31 December 1998, All Places

Licensed Place	Total Number of donors whose sperm is stored and available for donor treatment (at start of period)	New donors recruited during Reporting Year (1998)
Epworth Hospital	87	23
Prince Henry's Institute of Medical Research	62	0
Women's & Children's Health Care Network	53	2
Aggregated Total	202	25

Treatment Authority Certification of Annual Financial Statements

In our opinion the financial statements of the Infertility Treatment Authority, comprising Revenue and Expenditure Statement, Balance Sheet, Statement of Cash Flows and Notes to the Accounts:

- 1) have been prepared in accordance with directions of the Minister of Finance under the Financial Management Act 1994, Australian Accounting Standards and other mandatory requirements (Urgent Issues Group Consensus Views), and
- 2) present fairly the results of the financial transactions of the Authority for the year ended 30 June 1999 and the financial position of the Authority as at that date.

At the date of signing these statements we are not aware of any circumstances, which would render any particulars, included in these statements to be misleading or inaccurate.



P.L. Waller

Chairman & Member of the Board



H. Szoke

Chief Executive Officer

Independent Auditor-General's Report

to the Members of Parliament of Victoria, the responsible Ministers and the Members of the Infertility Treatment Authority

Audit Scope

The accompanying financial statements of the Infertility Treatment Authority for the financial year ended 30 June 1999, comprising a revenue and expense statement, balance sheet, statement of cash flows and notes to the financial statements, has been audited. The Members of the Authority are responsible for the preparation and presentation of the financial report and the information it contains. An independent audit of the financial report has been carried out in order to express an opinion on it to the Members of the Parliament of Victoria, the responsible Ministers and the Members of the Authority as required by the *Audit Act 1994*.

The audit has been conducted in accordance with Australian Auditing Standards to provide reasonable assurance as to whether the financial report is free of material misstatement. The audit procedures included an examination, on a test basis, of evidence supporting the amounts and other disclosures in the financial report, and the evaluation of accounting policies and significant accounting estimates. These procedures have been undertaken to form an opinion as to whether, in all material respects, the financial report is presented fairly in accordance with Australian Accounting Standards and other mandatory professional reporting requirements and complies with the requirements of the *Financial Management Act 1994*, so as to present a view which is consistent with my understanding of the Authority's financial position, the results of its operations and its cash flows.

The audit does not provide any assurances that the Authority's systems, or any other systems that the Authority relies on in the conduct of its activities such as those of suppliers and service providers are year 2000 compliant, or whether plans and associated actions are adequate to address the year 2000 issue. The year 2000 issue has been addressed only in the context of existing audit responsibilities under Australian Auditing Standards to express an opinion on the financial report.

The audit opinion expressed in this report has been formed on the above basis.

Audit Opinion

In my opinion, the financial report presents fairly the financial position of the Infertility Treatment Authority as at 30 June 1999 and the results of its operations and its cash flows for the year ended on that date in accordance with Australian Accounting Standards and other mandatory professional reporting requirements and complies with the requirements of the *Financial Management Act 1994*.

MELBOURNE
7/9/1999



K.G. HAMILTON
Acting Auditor-General

Victorian Auditor-General's Office
Auditing in the Public Interest

1st September 1999, MELBOURNE

FINANCIAL STATEMENTS

Revenue and Expense Statement for the year ended 30 June 1999

	Notes	1998/99 \$	1997/98 \$
Revenue for the year			
Approval Fees		4,710	4,440
Dept of Human Services Grant		325,000	325,000
Interest Received		1,126	1,069
Licensing Fees		31,417	26,333
Sales of Publications		113	669
Other Income		9	61
Proceeds from Sale of Non Current Assets		22,232	-
Total Revenue for the year		384,607	357,572
Less Operating Expenses Requiring Fund Outflows			
Operating Expenses	12	378,912	352,076
Operating Surplus Attributable to Fund Items		5,695	5,496
Less Operating Expenses Not Requiring Fund Outflows			
Depreciation / Amortisation	7	42,167	76,917
Operating (Deficit) Attributable to Non Fund Items		(42,167)	(76,917)
Operating (Deficit) for the year		(36,472)	(71,421)
Accumulated Surplus at beginning of Financial Year		86,275	157,696
Accumulated Surplus at end of Financial Year		49,803	86,275

The accompanying notes form part of these financial statements

Balance Sheet as at 30 June 1999

	Notes	1999 \$	1998 \$
EQUITY			
Accumulated Surplus		49,803	86,275
Total Equity		49,803	86,275
LIABILITIES			
Current Liabilities			
Creditors and Liabilities	5	46,503	45,105
Provisions	6	8,845	1,518
Total Current Liabilities		55,348	46,623
Non-Current Liabilities			
Provisions	6	4,254	3,905
Total Non-Current Liabilities		4,254	3,905
Total Liabilities		59,602	50,528
TOTAL EQUITY AND LIABILITIES		109,405	136,803
ASSETS			
Current Assets			
Cash	2	34,800	33,250
Prepayments/Receivables	4	6,717	4,089
Total Current Assets		41,517	37,339
Non-Current Assets			
Property Plant and Equipment	7	67,888	99,464
Total Non-Current Assets		67,888	99,464
TOTAL ASSETS		109,405	136,803

The accompanying notes form part of these financial statements

Statement of Cash Flows for the year ended 30 June 1999

	Notes	1998/99 Inflows/(Outflows) \$	1997/98 Inflows/(Outflows) \$
Cash Flows from Operating Activities			
Operating Grant Receipts		325,000	325,000
Payments to Suppliers and Employees		(345,182)	(342,845)
Interest Received		1,180	737
Income from Fees		36,356	44,308
Other Income		9	61
Net Cash (Used in)/Provided by Operating Activities	3	17,363	27,261
Cash Flows from Investment Activities			
Proceeds from sale of Property, Plant and Equipment		22,232	-
Payments for Property, Plant and Equipment		(38,045)	(2,523)
Net Cash used in Investing Activities		(15,813)	(2,523)
Net Increase in Cash held		1,550	24,738
Cash held at beginning of the financial year		33,250	8,512
Cash held at end of the financial year	2	34,800	33,250

The accompanying notes form part of these financial statements

Notes to and forming part of the financial statements for the year ended 30 June 1999

1. Statement of Accounting Policies

These general purpose financial statements have been prepared in accordance with the directions of the Minister of Finance under the Financial Management Act 1994 and applicable Australian Accounting Standards and other mandatory professional reporting requirements

a) Accrual Basis

The Accrual Basis of accounting has been used with revenues and expenses being recognised as they are earned or incurred, and are brought to account in the period to which they relate.

b) Historical Cost

The financial statements have been prepared on the historical cost basis whereby assets are recorded at cost and do not take into account changing money values or the current costs of non-current assets.

c) Rounding Off

All amounts shown in the Financial Statement are expressed to the nearest dollar.

d) Depreciation/Amortisation

Depreciation and Amortisation are charged using the straight-line method of depreciation, at rates considered appropriate to expire the relevant cost of the assets in full over the term of their estimated useful life to the Authority. The relevant depreciation rates have been outlined in Note 7.

e) Creditors

Creditors are valued at nominal amounts.

Creditors are recognised for amounts to be paid in the future for goods and services received, whether or not billed to the Authority. Creditors are normally settled on 30-day terms.

f) Prepayments / Receivables

Prepayments or Receivables are carried at nominal amounts due. Credit sales are on 30-day terms.

g) Employee Entitlements

Based on pay rates effective at balance date, on-costs such as workcover and superannuation are included in the calculation of leave provisions.

Provision is made for the Authority's liabilities for employee entitlements to annual leave and long service leave arising from service rendered by employees to balance date. The Authority's accrued liability for annual leave not taken by employees at balance date is classified as a current liability.

Employee entitlements payable later than one year is classified as a non-current liability, and have been measured at the present value of estimated future cash flows to be made for those entitlements.

FINANCIAL STATEMENTS

The provision for long service leave is determined in accordance with Australian Accounting Standard AAS30 – Accounting for Employee Entitlements. The long service leave entitlements under existing employment arrangements becomes payable upon completion of 10 years service.

h) Consultants

The Authority engaged consultants for the financial year in order to design and create a database of cases. The amounts have been disclosed in the operating statement under the classification of Consultants fees.

i) Comparatives

Where necessary the figures for the previous year have been reclassified to facilitate comparison.

j) Prepaid Licensing Fees

The Authority charges Licence Fees to professionals who operate infertility treatment practices. The Licence Fees are for the period 1 January 1999 to 31 December 1999. As a result six months of Licence Fees that have been paid in this year have been recognised as prepaid Licensing Fees.

2. Cash

For the purposes of the Statement of Cash Flows, cash includes, cash on hand and at call deposits with banks or financial institutions. Cash on deposit is held at call and valued at the nominal amount held. Effective interest rates of between 1% and 4% were earned on funds held during the year.

Cash at the end of the financial year as shown in the statement of cash flows and balance sheet is made up as follows:

	1999	1998
	\$	\$
Cash at Bank	1,890	13,016
Cash on Hand	257	234
Cash on Deposit	32,653	20,000
	34,800	33,250

3. Notes to the Statement of Cash Flows

Reconciliation of Net Cash Used in Operating Activities to Operating (Deficit)

Operating Surplus (Deficit)	(36,472)	(71,421)
Loss on Sale of Fixed Assets	8,383	-
Non-Operating movements in Receivables and Creditors	(3,161)	-
Depreciation/Amortisation (non-cash)	42,167	76,917
(Increase)/Decrease in Prepayments/Receivables	(2,628)	(3,563)
Increase/(Decrease) in Provisions	7,676	5,311
Increase/(Decrease) in creditors	1,398	20,017
Net Cash generated by/(Used In) Operating Activities	17,363	27,261

4. Prepayments/Receivables

Interest Receivable	278	332
Prepaid Expenses	0	711
Salary Packaging Adjustment owing	0	2,930
Debtors	6,439	116
	6,717	4,089

5. Creditors & Liabilities

	1998/99	1997/98
Audit and Accounting Fees Payable	7,700	6,600
Lease Liability	436	436
Group Tax Payable	3,233	3,064
Superannuation Payable	0	732
Fringe Benefits Tax Liability	5,846	4,141
Tenancy Liability	0	8,132
Trade Creditors	11,038	8,833
Prepaid Licensing Fees	1(j) 18,250	13,167
	46,503	45,105

6. Provisions

Employee entitlements

Current

Annual Leave	1(g)	8,845	1,518
--------------	------	-------	-------

Non-Current

Long Service Leave	1(g)	4,254	3,905
--------------------	------	-------	-------

Total Employee Entitlements		13,099	5,423
------------------------------------	--	---------------	--------------

7. Plant and Equipment

<i>Item</i>	<i>At Cost</i>		<i>Depreciation</i>		<i>Accumulated Depreciation</i>	<i>Written Down Value</i>	<i>Written Down Value</i>
	<i>at 30-6-99</i>		<i>1998-99</i>				
	<i>\$</i>	<i>Rate %</i>	<i>\$</i>		<i>\$</i>	<i>\$</i>	<i>\$</i>
Leasehold Improvements	0	40%	16,493	0	0	0	24,471
Motor Vehicles	33,130	15%	4,882	3,717	29,413	21,884	21,884
Office Equipment	103,755	20%	20,792	65,280	38,475	53,109	53,109
TOTAL	136,885		42,167	68,997	67,888	99,464	99,464

8. Responsible Persons & Related Party Transactions

a) Responsible Minister

The Hon. Rob Knowles MLC Minister for Health is the Responsible Minister.

b) Authority Members

The names of Authority members at the date of this report are:

<i>P.L. Waller</i>	<i>M.G.C. Guilfoyle</i>
<i>C.F. McDonald</i>	<i>C.A.J. Coady</i>
<i>L.J. Wilton</i>	<i>F.H. Harman (resigned 1/1/99)</i>
<i>J.K. Findlay (app. 1/2/98)</i>	<i>A. Fisher (app. 1/2/99)</i>

c) Members Remuneration 1998/99 1997/99

i) Total amount received or due and Receivable by members of the Board of the Authority	\$ 51,044	\$ 52,289
ii) The number of Board Members whose Remuneration fell within the following Bands:		
\$0 - \$9,999	7	6
\$10,000 - \$19,999	1	1

d) Executive Officer

The Authority's Executive Officer did not receive remuneration in excess of \$100,000.

10. Commitments

a) Capital Commitments

At 30 June 1999, the Authority had no outstanding capital commitments.

b) Lease Commitments

Non-cancelable operating leases contracted for in relation to the rental of premises, but not included in the accounts:

<i>Less than 1 year</i>	<i>\$31,984</i>
<i>Greater than 1 year but less than 2 years</i>	<i>\$33,739</i>
<i>Greater than 2 years but less than 5 years</i>	<i>\$115,256</i>
<i>Greater than 5 years</i>	<i>\$44,387</i>

c) Other Commitments

At 30 June 1999, there were no other outstanding service commitments.

11. Superannuation

Details in relation to superannuation funds are as follows:

- The Authority contributed on behalf of its employees during the year ended 30 June 1999 to Vic Super, being a complying fund under the Superannuation Industry (Supervision) Act 1993.
- No loans exist between the Authority and Vic Super.
- The amount of total contributions by the Authority to Vic Super during the year amounted to \$11,291 (1998 - \$8,711).
- The basis for calculation of superannuation is in accordance with the statutory requirements, which specifies that contributions of the Authority are based on a percentage of the employees' salary. During the period these contributions were at the rate of 7% of gross salaries. Employee contributions were nil.

9. Financial Instruments

a) Interest Rate Risk

The Authority's exposure to interest rate risk and the effective weighted average interest rates on those financial assets and financial liabilities are as follows:

30 June 1999	Floating Interest Rate \$	Fixed Interest Maturing in 1 year or less \$	Non-interest Bearing \$	Total \$
Financial Assets				
Cash	1,890	32,653	257	34,800
Sundry Debtors	-	-	6,717	6,717
Investments	-	-	-	-
TOTAL	1,890	32,653	6,974	41,517
Weighted Average Interest Rate %	0%	3%		
Financial Liabilities				
Trade and other Creditors			19,174	19,174
TOTAL			19,174	19,174

30 June 1998	Floating Interest Rate \$	Fixed Interest Maturing in 1 year or less \$	Non-interest Bearing \$	Total \$
Financial Assets				
Cash	13,016	20,000	234	33,250
Sundry Debtors	-	-	3,378	3,378
Investments	-	-	-	-
TOTAL	13,016	20,000	3,612	36,628
Weighted Average Interest Rate %	0%	3%		
Financial Liabilities				
Trade and other Creditors			24,001	24,001
TOTAL			24,001	24,001

b) Credit Risk Exposure

The Authority is not materially exposed to any individual debtor.

c) Net Fair Value of Financial Assets and Liabilities

The net fair value of all on-balance sheet monetary financial assets and financial liabilities approximates their carrying value. There is no off-balance sheet financial assets or financial liabilities at balance date.

	Notes	1998/99 \$	1997/98 \$
12. Operating Expenses			
Accounting Fees		9,950	12,325
Advertising		1,186	4,357
Audit Fees		3,600	3,500
Bank Charges and Taxes		423	392
Computer Maintenance		6,454	3,897
Consultants fees	1(h)	2,760	11,299
Courier / Postage		2,974	2,510
Data Collection		0	960
Entertainment		1,640	1,646
Insurance		6,770	10,305
ITA Publications		12,486	6,910
Lease Payments		5,237	5,699
Legal Fees		5,250	7,875
Maintenance		1,511	5,841
Members Sitting Fees		51,044	52,289
Motor Vehicle Expenses		3,165	4,875
Office Outgoings		8,997	17,120
Printing & Stationery		5,751	4,972
Rent on land & buildings		25,370	27,200
Salaries & Wages		155,375	135,397
Staff Amenities		605	-
Staff training		2,209	1,310
Subscriptions		3,459	8,478
Superannuation	11	11,291	8,711
Telephone		8,243	10,216
Travel and Accommodation		12,547	3,992
WDV of Fixed Assets Disposed of during year		30,615	-
TOTAL EXPENSES		378,912	352,076

Places Licensed to Provide Treatment

LEGAL ENTITY	PLACE	NAME OF CLINIC	PERIOD OF LICENCE	APPROVED TREATMENTS TO BE UNDERTAKEN
Ballarat Health Services	Ballarat Base Hospital	Monash IVF	1/7/98 to 30/6/01	IVF GIFT
Bellarine Hospital	Bellarine Hospital	Monash IVF	1/7/98 to 30/6/01 (Ceased surgical services 2 Dec 1998)	IVF GIFT
Bendigo Healthcare Group	Bendigo Hospital	Monash IVF	1/7/98 to 30/6/01	IVF GIFT
Casterton Memorial Hospital	Casterton Memorial Hospital	Monash IVF	18/2/99 to 17/2/02	IVF GIFT
Central Wellington Healthcare Service	Gippsland Base Hospital - Sale	Monash IVF	1/7/98 to 30/6/01	IVF GIFT
Epworth Hospital	Epworth Hospital	Monash IVF	1/7/98 to 30/6/01	IVF GIFT DI Storage of gametes and embryos
Freemasons Hospital	Freemasons Hospital	Melbourne IVF	22/7/99 to 21/7/02	IVF GIFT DI Storage of gametes and embryos
Geelong Private Hospital	Geelong Private Hospital	Monash IVF	17/12/98 to 16/12/01	IVF GIFT
Maryvale Private Hospital	Maryvale Private Hospital	Monash IVF	19/5/99 to 18/5/02	IVF GIFT
Mercy Hospital for Women	Mercy Hospital for Women	Melbourne Assisted Conception Centre	1/7/98 to 30/6/01	GIFT
Mildura Private Hospital	Mildura Private Hospital	Mildura Reproductive Medicine Centre	1/7/98 to 30/6/01	IVF GIFT DI Storage of gametes and embryos
Monash Surgical Private Hospital Pty Ltd	Monash Surgical Private Hospital	Monash IVF	1/7/98 to 30/6/01	IVF GIFT DI Storage of gametes and embryos
North Western Health Network	Broadmeadows Health Service	Monash IVF	21/7/99 to 22/7/02	IVF GIFT
Prince Henry's Institute of Medical Research	Prince Henry's Institute of Medical Research	Prince Henry's Institute Reproductive Medicine Clinic	1/7/98 to 30/6/01 (Ceased operation from 1/9/98)	DI Storage of gametes
Shepparton Private Hospital	Shepparton Private Hospital	Monash IVF	17/12/98 to 16/12/01	IVF GIFT
The Women's and Children's Health Care Network	The Royal Women's Hospital	Melbourne IVF	22/7/99 to 21/7/02	IVF GIFT DI Storage of gametes and embryos
Wangaratta Private Hospital	Wangaratta Private Hospital	Monash IVF	16/9/98 to 15/9/01	IVF GIFT

Places Licensed for Approved Research

APPENDIX 2

LEGAL ENTITY	CLINIC OR OTHER ASSOCIATIONS	PERIOD OF APPROVAL
Monash University	The Institute of Reproduction and Development Monash IVF, Monash Surgical Private Hospital Monash IVF, Epworth Hospital	19/8/98 to 20/8/99

Counsellors Approved under the *Infertility Treatment Act 1995*

APPENDIX 3

NAME COUNSELLORS	LICENSED PLACE	CLINIC	PERIOD OF APPROVAL
ALESI, Rita	* See Note Below	Monash IVF	3 years
ANDERSON, Jan	* See Note Below	Monash IVF	3 years
ASHLEY-BROWN, Kate	* See Note Below	Monash IVF	3 years
BELTON, Karola	* See Note Below	Monash IVF	3 years
BLOOD, Jennifer	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	3 years
BOURNE, Kate	Freemasons Hospital The Royal Women's Hospital Mildura Private Hospital	Melbourne IVF	3 years
BRUCE, Paula	Mildura Private Hospital	Mildura Reproductive Medicine Clinic	3 years
CLARKE, Veronica	* See Note Below	Monash IVF	5 months until 31 Dec 1999
COOK, Roger	Mercy Hospital	Melb Assisted Conception Centre	3 years
D'ABBS, Jane	* See Note Below	Monash IVF	3 years
GRIFFIN, Sandra	* See Note Below	Monash IVF	3 years
HAINES, Wendy	* See Note Below	Monash IVF Prince Henry's Institute of Medical Research	3 years
HARRISON, Christine		Monash IVF, Qld	1 year
HUTCHINS, Pamela	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	3 years
JENKINS, Megan Jane	* See Note Below	Monash IVF	3 years
KANE, Helen	Freemasons Hospital, The Royal Women's Hospital	Melbourne IVF	3 years
LEWIS, Bronwyn	* See Note Below	Monash IVF	3 years
NAVE, Catherine	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	3 years
O'BYRNE, Louise	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	3 years
OKE, Elizabeth	Freemasons Hospital The Royal Women's Hospital Mildura Private Hospital	Melbourne IVF	3 years
PIITT, Penelope	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	Six months until 16 Dec 1999
PTACEK, Jana	Mercy Hospital	Melb Assisted Conception Centre	3 years
PURVIS, Kate	* See Note Below Freemasons Hospital The Royal Women's Hospital	Monash IVF Melbourne IVF\RWI	3 years
SMALES, Andrea	* See Note Below	Monash IVF	3 years
STRATIGAKOS, Georgina	* See Note Below	Monash IVF	3 years

*** NOTE (Licensed Places):**

- Ballarat Base Hospital
- Bellarine Hospital
(until 2 December 1998)
- Bendigo Healthcare Group

- Broadmeadows Health Service
- Casterton Memorial Hospital
- Epworth Hospital
- Geelong Private Hospital
- Gippsland Base Hospital

- Maryvale Private Hospital
- Monash Surgical Private
Hospital Pty Ltd
- Shepparton Private Hospital
- Wangaratta Private Hospital

Doctors in places licensed to provide treatment are required to provide all patients with a list of approved counsellors, prior to treatment commencing.

Clinical Scientists Approved under the *Infertility Treatment Act 1995*

NAME CLINICAL SCIENTISTS	LICENSED PLACE	CLINIC	PERIOD OF APPROVAL
ARCHER, Janell	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	3 years
ATKINS, Jan	* See Note Page 32	Monash IVF	3 years
ATTARD, Marlene	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	3 years
BOURNE, Harold	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	3 years
BURDEN, Jennifer	* See Note Page 32	Monash IVF	3 years
COSTA, Jessica Beatrice	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	3 years
COTTELL, Evelyn	* See Note Page 32	Monash IVF	3 years
CURNOW, Eliza	Monash Surgical Private Hospital	Monash IVF	3 years
DEAR, Melinda	* See Note Page 32	Monash IVF	3 years
DIAMENTE, Maria	* See Note Page 32	Monash IVF	3 years
DIMITRAKOPOULOS, Anna	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	3 years
EDGAR, David	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	3 years
FLINN, Pauline	* See Note Page 32	Monash IVF	3 years
GOUGOULIDIS, Grammatiki	* See Note Page 32	Monash IVF	3 years
GRAS, Lynette R.	* See Note Page 32	Monash IVF	3 years
HARPER, Jennifer	* See Note Page 32	Monash IVF	3 years
HOLDEN, Sandra B.	* See Note Page 32	Monash IVF	3 years
JACKSON, Peter	* See Note Page 32	Monash IVF	3 years
JERICO, Helena	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	3 years
LJUNGDELL, Emma	* See Note Page 32	Monash IVF	3 years
McDONALD, Michele	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	3 years
MANTELOS, Kathy	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	3 years
MERRY, Nicole Emma	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	3 years
MITTEN, Janine	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	3 years
MUNSIE, Megan	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	3 years
NIETO, Felix	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	3 years
NINNIS, Anna	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	3 years
O'BRIEN Carmel	Freemasons Hospital	Melbourne IVF	3 years
POULOS, Christine	* See Note Page 32	Monash IVF	3 years
RENDALL, Susan	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	3 years
RHO, Hwan-Cheol	* See Note Page 32	Monash IVF	3 years
RICHINGS, Nadine Maree	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	3 years
SLUITER, Heather	Mildura Private Hospital	Mildura Reproductive Medicine Clinic	3 years
STEEVES, Tracey	* See Note Page 32	Monash IVF	3 years
VALIOTIS, Mary	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	3 years
VASSILIADIS, Anne	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	3 years
WEBSTER, Debra	* See Note Page 32	Monash IVF	3 years
WICKS, Rachel	* See Note Page 32	Monash IVF	3 years
WILTON, Leeanda	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	3 years
WOOLHOUSE, Jenette Constance	* See Note Page 32	Monash IVF	3 years

Doctors Approved under the *Infertility Treatment Act 1995*

NAME DOCTORS	LICENSED PLACE OR LOCATION FOR D.I.	CLINIC	PERIOD OF APPROVAL
BAILEY, Catherine	Mildura Private Hospital	Mildura Reproductive Medicine Clinic	3 years
BOWDITCH, John Pierse	Mildura Private Hospital	Mildura Reproductive Medicine Clinic	3 years
CLARKE, Geoffrey Alan	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	3 years
DOBSON, Peter	Mercy Hospital for Women	Melbourne Assisted Conception Centre	3 years
DOWNING, Bruce	* See Note Below	Monash IVF	3 years
FOSTER, Penelope Ann	Freemasons Hospital Mildura Private Hospital The Royal Women's Hospital	Melbourne IVF Mildura Reproductive Medicine Clinic	3 years
GRONOW, Michael	Freemasons Hospital The Royal Women's Hospital Western Hospital, Sunshine	Melbourne IVF	3 years
HALE, Lyndon	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	3 years
HAVERFIELD, Maxwell	* See Note Below	Monash IVF	3 years
HEALY, David	* See Note Below	Monash IVF	3 years
HILL, David	* See Note Below	Melbourne Assisted Conception Centre	3 years
JOHNSTON, Walter Ian Harewood	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	3 years
KOVACS, Gabor Thomas	Prince Henry's Institute of Medical Research * See Note Below	Monash IVF Prince Henry's Institute of Reproductive Medicine	3 years
KUHN, Raphael John Paul	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	3 years
LAWRENCE, Mark Joseph	* See Note Below	Monash IVF	3 years
LAWRENCE, Tony	* See Note Below	Monash IVF	3 years
LEETON, John	* See Note Below	Monash IVF	3 years
LOLATGIS, Nicholas	* See Note Below	Monash IVF	3 years
McBAIN, John Clark	Freemasons Hospital Mildura Private Hospital The Royal Women's Hospital	Melbourne IVF Mildura Reproductive Medicine Clinic	3 years
O'CALLAGHAN, David	Mercy Hospital for Women	Melbourne Assisted Conception Centre	3 years
PLATTEAU, Peter	* See Note Below	Monash IVF	3 years
SPEIRS, Andrew	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	3 years
STEINBERG, Lionel	Mercy Hospital for Women	Melbourne Assisted Conception Centre	3 years
STERN, Catharyn	Freemasons Hospital The Royal Women's Hospital	Melbourne IVF	3 years
STURROCK, Timothy Victor	* See Note Below	Monash IVF	3 years
TALBOT, James MacKenzie	Mercy Hospital for Women * See Note Below	Melbourne Assisted Conception Centre	3 years
THOMAS, Adrian	Mercy Hospital for Women	Melbourne Assisted Conception Centre	3 years
TSALTAS, Jim	* See Note Below	Monash IVF	3 years
VOLLENHOVEN, Beverley	* See Note Below	Monash IVF	3 years
WOOD, Edwin Carlyle	* See Note Below	Monash IVF	3 years

*** NOTE (Licensed Places):**

- Ballarat Base Hospital
- Bellarine Hospital (until 2 December 1998)
- Bendigo Healthcare Group
- Broadmeadows Health Service
- Casterton Memorial Hospital
- Epworth Hospital
- Geelong Private Hospital
- Gippsland Base Hospital
- Maryvale Private Hospital
- Monash Surgical Private Hospital Pty Ltd
- Shepparton Private Hospital
- Wangaratta Private Hospital

Research Scientists Approved under the *Infertility Treatment Act 1995*

NAME RESEARCH SCIENTISTS	LICENSED PLACE	CLINIC / INSTITUTION	PERIOD OF APPROVAL
GRAS, Lyn	Monash IVF	Monash IVF Pty Ltd	3 years
JACKSON, Peter	Monash IVF	Monash IVF Pty Ltd	3 years
JONES, Gayle Maree	Monash University	Monash Institute of Reproduction and Development, Monash University	3 years
KAUSCHE, Annette Paula	Monash University	Monash Institute of Reproduction and Development, Monash University	3 years
TROUNSON, Alan	Monash University	Monash Institute of Reproduction and Development, Monash University	3 years

All licences and approvals are made by application to the Authority. They are reviewed by the Licensing and Approval Committee, who then make a recommendation to the next meeting of the Authority.

ITA

INFERTILITY TREATMENT
AUTHORITY

LEVEL 30

570 BOURKE STREET

MELBOURNE VIC 3000

TEL 61 3 8601 5250

FAX 61 3 8601 5277

EMAIL ITA@ITA.ORG.AU

WWW.ITA.ORG.AU

