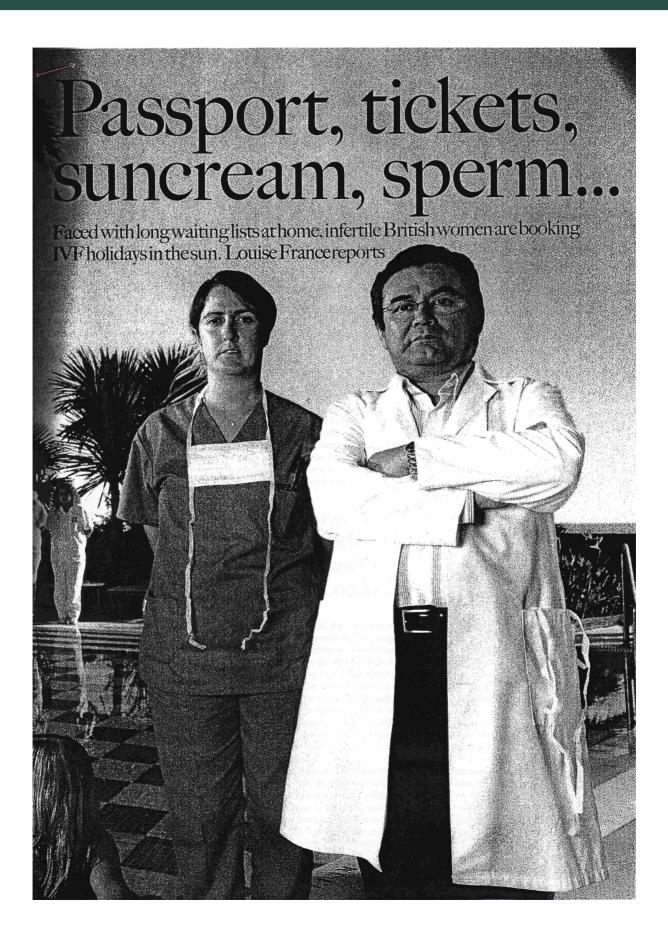
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Miriam lies in a recovery room in a fertility clinic in Marbella. Outside, tourists lounge beside a hotel pool...

relishing the winter sunshine. Waiters set tables ong the palm tree-lined promenade in time for nch. Expats stroll down the sandy beach. Back side, wrapped in blankets, Miriam focuses on er two-day-old embryos. The product of a young panish woman's eggs and Miriam's husband's term, just minutes ago they were carefully transred from the laboratory to her womb. In 10 days' ne she will find out if her IVF holiday, courtesy of theap flight to Malaga, has finally given her the egnancy she has longed for.

Perhaps the most surprising aspect of her urney to the Ceram Clinic on the Costa del Sol that it is not unique. In the reception area the iquitous pile of well-thumbed magazines are a ix of Spanish and British glossies. More than 90 r cent of the couples who nervously wait here r their appointments are from the UK. I meet usie, whose work colleagues suspect she's come Spain for breast implants. Helen, who bagged a ght for £15 from Luton airport and plans to celrate embryo-transfer day with a bottle of Spain's st non-alcoholic lager.

The centre is run by Dr Hugo Benito, a fertility ecialist from Colombia. His two embryologists 2 Spanish. But his senior nurse, Ruth Pellow, is 5 mm Britain. She moved to Marbella a year ago, ving worked for almost a decade in the fertilunit at St Bart's hospital in London. A crucial 1 t of her job is the day-to-day care of these Britin patients. After months of telephone calls and 1 nails, some of them arrive directly from the air-1, picked up by Ruth's husband Simon, who is IVF Travel Solutions and will even find them elf-catering apartment, with pool, should they intone.

If any of these women do get pregnant, many their relatives and friends will never know that eir trip to Spain was anything more than a last-inute dash for some November sun and the mid-ison bargains at the local branch of Zara. These etrips often booked in secrecy.

'My husband and I were amazed by how easy was,' Miriam explains as she rests for an hour fore returning to her spa hotel over the road in the clinic. 'We could get on with our lives in the UK. I was at work in the morning, on the flight lunchtime. No aggro and I get some sunshine. Inkly, it was easier to fly here for an appointment in to drive into central London.'

She describes her six failed attempts at IVF at a vate British clinic: brusque telephone calls from rses delivering disappointing news, hanging

about in stairwells for appointments that always ran late. 'I wasn't happy with how I was being treated. It felt as though no one cared, as if I was just part of a production line.' Ironically, Miriam, 41, knows exactly how she should have been looked after. Next week she'll be back at work — in the medical profession.

Spain is one of the most popular foreign countries for fertility treatment, but Google 'TVF holiday' and you can also choose between Kiev or Cape Town, Barbados or Crete. America has long been a fertility destination – egg donors publish slick catalogues detailing their credentials and charge more than \$20,000. India is one of the latest places to go. The travel company Med de Tour liaises with clinics throughout the country and can organise a custom-built holiday after treatment: 'It might seem like a long way to go but the facilities are good and it is potentially much cheaper. Some couples stay for as long as three or four weeks.'

'Frankly, it was easier to fly to Marbella for an appointment than to drive to London'

This is a word-of-mouth phenomenon which might never have happened even five years ago. In a bizarre way, completely unrelated modernday breakthroughs like the spread of the internet, the launch of cheap flights, the opening up of the European Union have all played a role. To a generation brought up on foreign holidays, with careers which take them all over the world, the idea of going abroad for treatment holds little fear. As one woman said: 'I've trekked across South Africa in the back of a truck. I can do Spain, for God's sake.'

There are no official statistics. The only clues are to be found on websites like www.fertilityfriends. co.uk which receives more than two million hits a month. In the past year its message boards have been dominated by women sharing information about foreign clinics. 'I went to Kiev and didn't have to wait. The price is €3,500. Oh, and it worked for me,' says one. Another writes: 'I only had to wait a few weeks at a clinic in Barcelona. It seemed like no time at all.' One woman canvasses opinion

on a clinic in Cyprus: 'It looks great in the booklet – you stay on site with private swimming pool and beach nearby.'

The vast majority of these women go abroad for egg donation. This is a procedure in which eggs from another woman are fertilised with the male partner's sperm and implanted into the woman's body. More than 5,000 babies have been conceived in the UK this way.

However, since legislation ending anonymous egg and sperm donation was first mooted over five years ago (the law was finally passed in April 2005), stocks in clinics across the country have varied widely. Combine regional shortages with the fact that some donors stipulate that they don't want their eggs to go to someone over 40, and a waiting list of two years can stretch to eight.

For women who have had years of stressful fertility treatment with their own eggs – injections, nasal sprays, internal examinations, hormonal surges – the idea that egg donation may drastically increase their chances is a revelation. One woman told me the likelihood of her getting pregnant had increased from one to 70 per cent. That there is no shortage of donors in Spain means that she needs to wait only two months for treatment.

Spanish donors remain strictly anonymous, but there is an openness about the actual procedure that would be hard to imagine in Britain, where donation has a seedy, clandestine reputation. A publicity campaign shows a handsome Spanish man, complete with glistening six-pack, brandishing the little plastic pot ready for his sperm sample. Crucially, donors are paid. While in this country there are proposals that the compensation for donations should increase from £15 to £250 (the equivalent to loss of earnings you might receive for jury service), in Spain egg donors earn, on average, £700 each time.

At Ceram, they hand out recruitment cards for egg donation at hairdressers, supermarkets, local colleges. Women with fair colouring, to match British complexions, are in particularly high demand: 'We've been known to chase blonde blue-eyed girls down the bus,' says Ruth. 'There's a kudos attached to egg donation because there's a much bigger emphasis on family here. It's seen as something to be proud of.' Attracted by the assurances on anonymity, or the financial reward, or more likely both, the clinic has recently received enquiries from British women prepared to donate eggs in Spain but not at home.

In total, six women from the UK will receive their embryos this morning at the clinic in Marbella. Lizzie waits in the room next door to Miriam. She, too, has just had two embryos implanted but hers are the result of donor egg and donor sperm. She recites the sketchy details she's been told: the female donor is a local woman, 30 years old with two children of her own. 'She likes the cinema and reading, apparently - but then we all say that, don't we?' she laughs wryly. The male donor has green eyes and brown wavy hair. He lives in Granada. 'To be honest, some people are very curious about donors. But I'm not really interested. I'm grateful that they do what they do but I see it as a professional relationship between us.'

I'd met Lizzie briefly the day before when, having just landed in Malaga, she seemed apprehensive about what the week held in store. Today, she appears animated, excited, almost girlish. No wonder - by using a younger woman's eggs, this is the best chance she's had to get pregnant in a long time. It's taken 12 attempts in the UK (at both NHS and private clinics), over £20,000 and 13 years to get here. She embarked on fertility treatment when she was 29. She is 42 now. 'I knew at the outset that my husband's sperm count was low. But it took so long to get the right kind of treatment - years waiting for appointments, investigations, a laparoscopy - that now my eggs are a problem too. I feel angry about all the messing about on the NHS. They took away the last decade of my fertility.'

She recalls more than 10 years of driving up and down the M1 for scans and blood tests while putting her career in local government on hold just in case she fell pregnant. Unsurprisingly, perhaps, she is cynical about the future of fertility services in Britain. 'I think it will narrow down to the core treatments they know they can do. They will avoid anything complicated, if only so that clinics can keep their success rates looking good. Any element of donation, either egg or sperm, will mean people going abroad. The few who are willing to donate will do it only for people they know.'

For now she's sanguine about the fact that there's nothing more she can do. 'I can think of 101 things that can go wrong. But now it's out of my hands. It's down to the embryos and my body.' And if it doesn't work? She is adamant that she will return for the two spare embryos that the Spanish embryologist, Marisa Fernandez, has just placed in the freezer

Clare Brown, head of Infertility Network UK, uses the word 'crisis' when she discusses the fertility industry in Britain. 'The fact is that many couples can't even get one free cycle of treatment on the NHS yet - despite the fact that this was promised by April 2005. Then if they give up waiting for the NHS and go privately they forfeit the chance of free treatment. The numbers going abroad are partly to do with a shortage of sperm and eggs and partly because it's a chance to combine very stressful treatment with a bit of a holiday. If you've had several stressful cycles in the UK then the idea that some sunshine might make all the difference is very persuasive.' Anecdotally, she says, the holistic care is often better abroad than it is in the UK. The doctors speak English, the nurses speak English, the literature is in English.'

Most clinics abroad will transfer two, if not three, embryos. The fact that the Human Fertilisation and Embryology Authority are currently discussing proposals to cut the number of embryos transferred to one for each treatment cycle means the pressure on the system in Britain is likely to get worse.

Many would-be mothers are furious about the fact that, as they see it, the end to anonymity has thwarted their chances of having a family. Dr Gillian Lockwood, medical director of Midland Fertility Services and a member of the British Fertility Society, agrees. She believes the change in the legislation on anonymity has unfairly punished a generation of would-be parents - and would-be donors. 'It's not surprising that a couple of flights to a clinic which has a good success rate no longer seems such a terrible prospect. Given the acute shortage of donor eggs in the UK, I believe it would be unethical to fail to help couples seeking donor gametes abroad. I would much rather they went to established clinics with a good reputation who will allow us to cooperate with the treatment.'

Meanwhile, almost one year on from the change in the law, those who supported the end of anonymous donation can only watch as more and more couples circumvent the legislation. Olivia Montuschi is a spokesperson for the Donor Conception Network. 'I can see that it is enormously

'I feel angry at the messing about on the NHS. They took a decade of my fertility'

attractive,' she says carefully. 'Many women can easily, quickly, and often more cheaply, get treatment. But have they genuinely considered all the implications? What is this going to be like for the child when they get older? Will they fit in with the rest of the family, looks-wise, in terms of their ethnic background? And will they have any parity at all with children conceived through donor treatment in the UK who can now find out about their genetic heritage?'

Critics argue that it's all too easy to imagine how an English couple expecting a fair-haired child might give birth to a baby with olive skin. If they embarked on treatment without telling anyone they could face, at best, increasingly personal questions; at worst, a future harbouring a potentially corrosive secret.

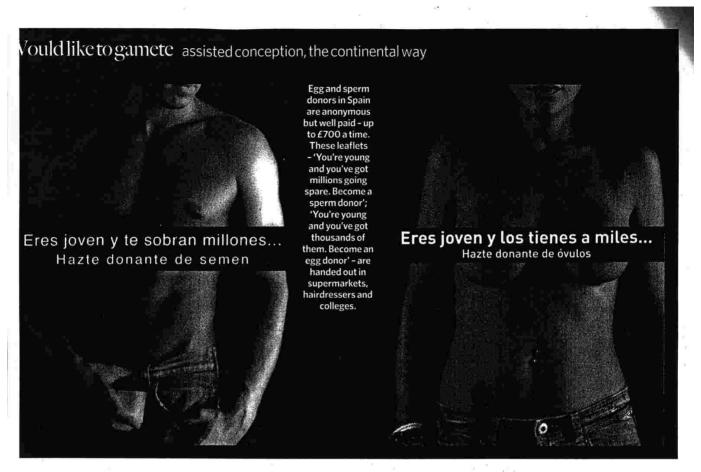
Only a minority of the women I meet say they've come to Spain because they fundamentally disagree with the change in the law regarding anonymity. However, those who agree with the notion that a child should know their genetic background ultimately persuade themselves that a bal important. What unites all of them is lusionment about long waiting lists, reg ations in treatment and the spiralling co encountered in Britain. Lynn, 42, is swa clinic in Bristol for one in Barcelona. I friends plan to follow suit. 'Desperate' Britain think they're at the end of the they're not. There is another option. Brit forget that it's our pain, our misery, our money they are playing with.'

At Ceram, a cycle of egg donation, inc fee for the donor and all the drugs, cos According to one patient: 'It's actually c me to use a donor egg in Spain than it is own eggs at home. The last time I tried at bill was well over £5,000 and I didn't eve embryo transfer stage.' Bigger clinics in and Valencia charge more but the total co ing flights and accommodation, is ran than the bill from a private clinic in Brit even offer deals - a lump sum for three c surreal fertility gamble - if a woman fall: the first time, she's paid over the odds three goes, then she's saved money.

While it's impossible to verify the figi is some evidence that treatments are mor ful in Spain. Around 30 per cent of egg procedures in Britain result in a live birtl clinics claim a figure nearer to 50 per this might be is the subject of huge deb say Spain is more advanced in their te 'We might have invented it but the Sp streaking ahead,' says one disgruntle Others suggest that the use of younger their twenties is a factor. There is also that the relative ease of treatment - fly Spain for a week rather than trying to fit around a work schedule - means women to be more relaxed.

Lisa, 32, says the first time some tioned donor eggs from abroad to 'balked at the idea'. Having experience menopause in her twenties, she ha known that egg donation was a possit it seemed much too strange. To go something so personal in a foreigr seemed very alien to me.' However, she researched the idea and the more s to her partner about it, the better she irony was that just before we were at to Spain, my English clinic rang me to had found a donor. But she had wr very long letter for any child that woul as the result of her eggs. It was over p pages, complete with contact numbers heartfelt, it seemed as though we wer any potential baby on loan. That really mind up to go abroad. It just felt too pe

Last September she and her husband loan for £5,000, booked a week off work a Marbella from Stansted airport. 'In the less stressful than a trip to the dentist,' s 'It felt a long way from the daily grind c home. We could relax by the pool. On



sfer day we arrived too early so we went for a around the old town instead.

ended up costing the same as it might do in e clinics in the UK but we got a holiday as well e treatment - and I came home with twins.' ot everyone has such an easy time. Cather-45, tried treatment in Valencia. She describes essful experience: last-minute changes of , vague information about treatment, sitting ugh appointments with a Spanish dictionary. utes after their donor's eggs were collected and her husband were told that the eggs not suitable after all. Two days later another or was found and they were ecstatic when six ryos fertilised. However, before the embryo sfer, while Catherine was lying on the trolbout to be wheeled into theatre, she was told one was good enough. 'After all we'd been 1gh, and we only had one chance! I was deved.' Despite all the difficulties, they plan to m to Spain next month in the hope that a nd treatment there will be less stressful than g a different clinic.

ne Human Fertility and Embryology Authorhich regulates services in Britain, counsels on. Foreign clinics may voluntarily sign up des of practice but they are not obliged to. , warns the HFEA, standards, including the ming of donors, may not be as rigorous as are at home. Their press officer, Gemma ie, says: 'We only regulate within the UK. job is to monitor the safety and effectiveness

'We got a holiday as well as the treatment - and I came home with twins'

of clinics in this country alone. As we don't regulate treatment outside the UK we cannot advocate it.' Accordingly, they offer no information about going abroad in their 'Guide to Infertility and Directory of Clinics'.

The website www.ivfworld.com, a support group for couples seeking fertility treatment, believes that, rather than abandoning couples who go abroad for treatment or pretending that it's not happening, clinics and regulatory bodies in Britain need to offer more support to couples. 'Going abroad is not an easy path but this is happening and the UK needs to acknowledge freedom of choice. UK doctors are not always helping to monitor overseas cycles thoroughly,' says a spokesperson following research carried out with thousands of its members over 12 months.

Certainly, for the time being, it seems that little will stop the one-way flow of couples. Following just one trip to Barcelona, Anna, 41, is seven months pregnant with a baby girl. However, she is frustrated about the way she was treated at home. 'Anyone considering egg donation abroad ends up feeling like a freak,' she says, 'but there's no one to help you in this country. Lots of women are going abroad but they're just ignoring it.'

After four failed IVF attempts using her own eggs at her local clinic in Scotland, Anna was told her chances of conceiving were less than 10 per cent and that the waiting list for donor eggs was more than four years. She stumbled across the idea of going abroad on the internet, however, it wasn't straightforward. Her local doctor refused to give her the drugs she needed ahead of the donation. 'She looked appalled when I told her what I wanted to do. I felt like some sort of drug addict, as if I was doing something wrong.' At a later stage in her treatment she needed progesterone. 'In the end a nurse took pity on me and surreptitiously handed me some in a brown paper bag.'

While she could not be more overjoyed at the outcome or more positive about her donor — There are all kinds of nationalities in my background. I've gone beyond any niggling worries about what she'll be like. She feels like mine' — there is anger too. 'Going abroad was never my first option. But I didn't feel as if I had any choice.'

Some names have been changed

Useful contacts: www.ceram.es; www.fertilityfriends. co.uk; www.ivfworld.com; National Gamete Donation Trust – www.ngdt.co.uk; Donor Conception Network – www.dcnetwork.org