

RE: CDC, Assisted Reproductive Technology (ART) Program Reporting System

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Thank you for the opportunity to comment on the Assisted Reproductive Technology (ART) Program Reporting System. This comment responds to the identified issue of “enhanc[ing] the quality, utility, and clarity of the information to be collected.”

As professors and social scientists researching assisted reproduction, we utilize the Centers for Disease Control and Prevention’s Assisted Reproductive Technology Fertility Clinic and National Summary Report that is generated via the ART Program Reporting System in our research. This report and the available datasets providing the underlying data are a primary data source for statistics on ART and for understanding the scope and practice of ART in the U.S. We write to express our support for continued data collection. Continued collection and reporting of these data remain vitally important. Specifically, these data are the only high-quality, publicly-available data on ART success rates and births in the U.S. Although information on ART-use is collected on the U.S. birth certificate, several studies have shown that birth certificate data underreports ART births (e.g., Cohen et al. 2014; Moaddab et al. 2016; Thoma et al. 2014; Tierney and Cai 2019). Further, the vital statistics datasets are often difficult for the general public to access due to the size of the data files, which necessitates the use of specialized software. In addition, based on historical studies (Stephen et al. 2016), demographic projections (Tierney 2022), and ongoing delays to first births (e.g., Osterman et al. 2024), we believe demand for ART will only increase. Therefore, continued collection and reporting on these data is necessary to both inform patient-clients and enhance population-level research on ART.