Dear Members,

The year 2014 was the 30th anniversary of ESHRE and I could hardly have imagined a more successful year to mark this occasion.

When Bob Edwards founded ESHRE in 1984, his idea was to build a European society with its own Annual Meeting, journals and training events.

And now, 30 years later, I am proud to see that these activities are not only well established, but also reflect the leadership of our Society in reproductive science and medicine.

Our Annual Meetings are the world’s largest congresses in the field, our Campus events provide training for about 2000 specialists every year and our journals were ranked number 1 and 2 in the fields of reproductive biology and obstetrics and gynaecology in 2014.

The treatment of infertility is a recent field of medicine which evolves quickly and needs more and more recognised and trained specialists. This trend encouraged the Society to develop certification programmes which would allow recognition of the skills and knowledge of clinicians. After our certification programme for embryologists, which attracts more candidates every year, and the introduction of certification for reproductive endoscopic surgeons (ECRES), the launch of a certification programme for nurses and midwives working in ART in 2014 demonstrates the dynamism of the Society and demand for highly qualified staff in our field.

Supporting excellence in reproductive science and medicine has indeed become one of ESHRE’s objectives when developing any new project. I thus wish to highlight the research grant programme, another project launched in 2014, which I am extremely proud of. The ESHRE grant scheme will operate every two years in support of research projects in the field of human reproduction and embryology. A research project on fertility preservation from the UK and Italy was awarded the first grant of the scheme in 2014.

The range of activities organised by ESHRE is so large that I can hardly mention them all in this introduction. This annual report will give you a good overview of what ESHRE did in 2014.

Let me finish by thanking all the people involved in the Society, who are at the heart of ESHRE’s success. By giving their time and effort, they helped make ESHRE flourish and fulfil its motto of “People moving science, science moving people”.

Juha Tapanainen
ESHRE Chairman 2013-2015
Eshre at a glance

I About Eshre

The European Society of Human Reproduction and Embryology (ESHRE) is an international non-profit organisation whose main objective is to promote the study of reproductive science and medicine and the diagnosis and treatment of infertility.

ESHRE was founded in 1984 by Robert Edwards and Jean Cohen who perceived the need for a European organisation dedicated to human reproduction, with its own journal, Annual Meeting and education scheme.

ESHRE is based on the idea that reproductive medicine is dependent on both scientific and clinical knowledge.

ESHRE develops a wide range of activities which reflect the ambitions of the Society in education, research and clinical medicine. With steady growth since 1984, the Society now comprises more than 6500 members and has become the leading society in reproductive science and medicine.

I Eshre Members

ESHRE membership has steadily grown from 349 in 1985 to 6495 in 2014. In 2014, 450 additional members joined ESHRE, an increase of 7.45% in one year.

ESHRE attracts members from many specialties linked to reproductive medicine, including andrology, embryology, endocrinology, genetics or medical ethics. Around 10% of ESHRE members are lab technicians, nurses or counsellors.

ESHRE members in 2014 were drawn from more than 110 countries, with European members accounting for 68% of the global membership. The UK, Italy and Germany were the three top European countries, with respectively 483, 365 and 316 members.

The USA and India are the leading non-European countries with 314 and 267 members.

Top 10 - Global Membership

<table>
<thead>
<tr>
<th>Country</th>
<th>Members</th>
</tr>
</thead>
<tbody>
<tr>
<td>United Kingdom</td>
<td>483</td>
</tr>
<tr>
<td>Italy</td>
<td>365</td>
</tr>
<tr>
<td>Germany</td>
<td>316</td>
</tr>
<tr>
<td>U.S.A.</td>
<td>314</td>
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<tr>
<td>Spain</td>
<td>299</td>
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<tr>
<td>The Netherlands</td>
<td>291</td>
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<tr>
<td>Belgium</td>
<td>276</td>
</tr>
<tr>
<td>India</td>
<td>267</td>
</tr>
<tr>
<td>Greece</td>
<td>189</td>
</tr>
<tr>
<td>Denmark</td>
<td>186</td>
</tr>
</tbody>
</table>

Evolution of ESHRE Membership (1985-2014)

- 1985: 349 members
- 2013: 6045 members
- 2014: 6495 members

+7.45%
I. ANNUAL MEETING

ESHRE’s 2014 Annual Meeting - the Society’s 30th - was staged in Munich, Germany from 29 June to 2 July 2014. With 8866 in attendance, the ESHRE congress is now clearly established as the world’s major and best attended event in reproductive science and medicine.

The 2014 congress confirmed the international appeal of the congress and that participants from outside Europe are more and more represented: non-Europeans represented 41% of the attendance and Europeans 59%.
**SUNDAY 29 JUNE 2014: PRECONGRESS COURSES**

Fourteen Precongress Courses were organised in Munich, attracting 2001 delegates in total. The best attended courses were the SIG Embryology, SIG Early Pregnancy and Reproductive Endocrinology and SIG Reproductive Genetics courses with respectively 412, 344 and 202 delegates.

**MONDAY 30 JUNE TO WEDNESDAY 2 JULY 2014: MAIN SCIENTIFIC PROGRAMME**

The main scientific programme staged 248 oral presentations and 600 posters. The programme was based on a scored selection made from 1454 abstracts submitted by the deadline of 1st February.

**IN THE NEWS**

ESHRE Annual Meetings have built their reputation on the scientific quality and innovation of the selected abstracts. A small selection of this research is presented every year to the international press. In Munich eight abstracts were selected for the press programme, including large-scale trials and smaller studies of public interest. Among the highlights of 2014 were results from the TROPHY study, which showed that outpatient hysteroscopy before IVF does not significantly affect IVF results. A 30-year follow-up of fertility patients in the USA found no link between fertility drugs and gynaecological and breast cancers.
I THE BEST OF ASRM AND ESHRE

The third edition of the “Best Of” meeting organised jointly by ESHRE and the ASRM took place in Cortina D’Ampezzo, Italy, from 27 February to 1 March 2014 with 259 participants. Highlights of the meeting included a presentation by Swedish gynaecologist Mats Brännström on a series of nine uterine transplantations undertaken at the University Hospital of Gothenburg. Brännström stated that seven out of the nine women had begun regular cycles two months after surgery.

I CAMPUS EVENTS

ESHRE Campus courses offer great opportunities for life-long learning and continuing education in reproduction. Fifteen Campus events were organised in 2014 in different European countries and in all disciplines represented by ESHRE’s Special Interest Groups [SIGs].

The total number of participants was 1075, and the best attended Campus course was “Making OHSS a complication of the past: State-of-the-art use of GnRH agonist triggering”, organised by SIG Endocrinology in Thessaloniki, Greece, with 149 delegates.

I A NEW CHAIR FOR THE PARAMEDICAL BOARD

Helen Kendrew, matron at Bath Fertility Centre in the UK, took over as Chair of the Paramedical Board, following Helle Bendtsten. Helen’s term will last until July 2016. The Paramedical Board organised or co-organised four Campus events in 2014.
**PUBLICATIONS**

**ALWAYS AIM FOR THE TOP**

<table>
<thead>
<tr>
<th>IMPACT FACTORS RANKING ESHRE JOURNALS (CATEGORY: REPRODUCTIVE BIOLOGY)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>N°1</strong> Human Reproduction Update 8.657</td>
</tr>
<tr>
<td><strong>N°2</strong> Human Reproduction 4.585</td>
</tr>
<tr>
<td><strong>N°4</strong> Molecular Human Reproduction 3.483</td>
</tr>
</tbody>
</table>

**IMPACT FACTORS**

With impact factors of 8.657 and 4.585 respectively, Human Reproduction Update and Human Reproduction both topped the categories of Obstetrics and Gynaecology and Reproductive Biology and were ranked 1 and 2.

MHR: Basic Science of Reproductive Medicine had an impact factor of 3.483 and was the fourth leading journal in the category of Reproductive Biology.

**NEW COVERS**

New outside covers appeared on the three ESHRE journals from January 2014.

**PROMOTING IMPACT FACTORS**

The promotion of the new impact factors had a dedicated campaign on social media.

FIRST THINGS FIRST.

Human Reproduction Update and Human Reproduction top in Obstetrics and Gynaecology and Reproductive Biology.
ESHRE PAGES IN 2014

ESHRE’s flagship journal *Human Reproduction* regularly features papers approved by the ESHRE Executive Committee for publication in the “ESHRE pages”, which are not externally peer-reviewed.

**ESHRE GUIDELINE**
Management of women with endometriosis (*Human Reproduction* – March 2014)

**CURRENT ISSUES IN MEDICALLY ASSISTED REPRODUCTION AND GENETICS IN EUROPE**
Research, clinical practice, ethics, legal issues and policy (*Human Reproduction* – August 2014)

**BEYOND THE DICHOTOMY**
A tool for distinguishing between experimental, innovative and established treatment (*Human Reproduction* – March 2014)

**ESHRE TASK FORCE ON ETHICS AND LAW 22**
Preimplantation Genetic Diagnosis (*Human Reproduction* – August 2014)

**ESHRE PGD CONSORTIUM DATA COLLECTION XII**
Cycles from January to December 2009 with pregnancy follow-up to October 2010 (*Human Reproduction* – May 2014)

**ESHRE TASK FORCE ON ETHICS AND LAW 22**
Medically assisted reproduction in singles, lesbian and gay couples, and transsexual people (*Human Reproduction* – September 2014)

**ESHRE TASK FORCE ON ETHICS AND LAW 21**

**ASSISTED REPRODUCTIVE TECHNOLOGY IN EUROPE, 2010**
Results generated from European registers by ESHRE (*Human Reproduction* – October 2014)

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**EDITOR’S HIGHLIGHTS**

Editor’s highlights are also published on ESHRE social media.

The Editors-in-Chief of the three titles now choose one study or theme which they wish to highlight from each publication. In 2014 these “Editor’s highlights” became freely downloadable.
GUIDELINES PUBLISHED BY ESHRE HAVE FOLLOWED A RIGOROUS METHODOLOGY ESTABLISHED BY THE ESHRE MANUAL FOR GUIDELINE DEVELOPMENT

All guidelines published by ESHRE have followed a rigorous methodology established by the ESHRE manual for guideline development (published in 2009 and updated in 2014).

Guideline development is now a well-established activity within ESHRE. 2014 has been a flourishing year, with many new guidelines initiated or on the verge of being published.

I MANAGEMENT OF WOMEN WITH ENDOMETRIOSIS

Following the publication of the first guideline Management of women with endometriosis in 2013, ESHRE developed a wide series of tools to ensure an optimum dissemination of the guideline and a facilitated adoption in the clinical practice in 2014.

The summary of the guideline was published in Human Reproduction on 20 January 2014 in advance access.

A decision-aid application for mobile device and computers, entirely based on the recommendations and conclusions of the guideline was also developed and released in April 2014.

A patient version of the guideline was also developed and published.

In 2014, the webpage of the guideline Management of women with endometriosis on the ESHRE website ranked among the top 10 most visited pages, with 32,401 page views.

In addition, eight abstracts linked to the publication of the Guideline on the Management of women with endometriosis were submitted and accepted to be presented in international and national gynaecology medical congresses.

DOWNLOAD THE ENDOMETRIOSIS APP
ROUTINE PSYCHOSOCIAL CARE IN INFERTILITY AND MEDICALLY ASSISTED REPRODUCTION – A GUIDE FOR FERTILITY STAFF

The draft guideline, developed by the SIG Psychology and Counselling, was presented at the Annual Meeting in Munich and was open for review from 4 August to 30 September 2014. The publication is planned for 2015.

MANAGEMENT OF WOMEN WITH PREMATURE OVARIAN INSUFFICIENCY

The draft guideline developed by the SIG Reproductive Endocrinology, was presented during the Annual Meeting in Munich. The review process is planned for 2015.

GUIDELINE ON THE MANAGEMENT OF RECURRENT MISCARRIAGE

An initiative of the SIG Early Pregnancy, the full guideline development group was composed in April 2014 and literature searches started in September 2014. The first draft of the guideline should be available at the end of 2015.

GOOD PRACTICE IN IVF LABORATORIES

A proposal of the SIG Embryology to update its Revised guidelines for good practice in IVF laboratories was approved by the ESHRE Executive Committee in February 2014. The first draft should be available for review in 2015.

ON THE WEB

Information about the ESHRE guideline development programme and the guidelines published can be found on the ESHRE website: www.eshre.eu/guidelines
The ESHRE IVF Monitoring (EIM) Consortium has been collecting data each year since 1997 from around 30 European countries.

Results from the 2010 data collection were published in Human Reproduction in October. The report can be downloaded from the ESHRE website: www.eshre.eu/eim

A new IT system was selected in 2014 to improve the efficiency of the EIM’s data collection and speed up the process. The new system will be used for the first time in 2015 to collect the data from 2013.

The latest EIM data presented at the 2014 Annual Meeting in Munich, reported data on more than 1 million ART babies born in Europe since records began.

The 2011 data were presented at the Annual Meeting in Munich. These were drawn from 1034 clinics, with results showing some important current trends in IVF:

- ICSI is still the preferred treatment option with 300,000 cycles reported;
- The number of frozen cycles is slowly reaching the levels of fresh cycles in IVF (120,032 cycles for FER vs 137,621 fresh cycles) and pregnancy rates from frozen cycles have risen from 14.1% in 1997 to 21.4% in 2011;
- The majority of transfers are two-embryo transfer, while SET continues to rise representing almost 30% of the cycles;
- Multiple delivery rates decline and while pregnancy rates increase. Average pregnancy rate is now at 32.1% (from 26% in the first data collection).

The Consortium is now monitoring about 600,000 cycles per year.
I PGD CONSORTIUM

Since 1997 the ESHRE PGD Consortium has been collecting prospective and retrospective data from PGD cycles, producing consensus guidelines for PGD laboratories and promoting best practice. Data collection XVI, due in 2014, was postponed in order to collect those data with the new software commissioned by the Consortium.

The report on data collection XII (cycles of 2009) was published in *Human Reproduction* in May.

The report can be downloaded from the ESHRE website: www.eshre.eu/pgd

WORKING GROUPS

A working group on HLA tissue typing, chaired by Jan Traeger Synodinos was set up in 2014 and began a multicenter study to evaluate the overall clinical utility of HLA-PGD.

The working group created in 2013 to monitor new technologies in PGD has collected results from the first survey on PGD/PGS practice and perspectives. Forty-six PGD centres from 24 countries participated and reported on current practice and technologies in 1938 PGD cycles and 2725 PGS cycles. The survey will be extended and the publication is expected in 2015.

I RESEARCH GRANT

ESHRE introduced a research grant programme in 2014, with funding of up to 150 000€ spread over a maximum of three years.

Selection of submitted proposals took place over two rounds and was based on three main criteria: scientific excellence, originality and feasibility. 259 project proposals were submitted by the deadline of 15 May 2014 for the first round of selection.

Based on an evaluation of the projects by the SIG coordinators, ExCo members, and experts, ten projects were selected for the second selection round and were further reviewed and assessed by five independent experts.

This first ESHRE research grant was awarded to Professor Norah Spears from the University of Edinburgh for her project on fertility preservation: “Can tyrosine kinase inhibitors protect the ovary against chemotherapy-induced damage?”

This project also involved colleagues Richard Anderson and Federica Lopes from Edinburgh University and Francesca Gioia Klinger and Massimo De Felici at the University of Rome Tor Vergata.

The research grant will be awarded every second year. The next call for proposals will be in 2016.

ON THE WEB

More information about the ESHRE grant can be found on www.eshre.eu/grant

![Number of proposals per topic](image)

**NUMBER OF PROPOSALS PER TOPIC**

<table>
<thead>
<tr>
<th>Topic</th>
<th>Number of Proposals</th>
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<tbody>
<tr>
<td>Cross Border</td>
<td>2</td>
</tr>
<tr>
<td>Developing Countries</td>
<td>3</td>
</tr>
<tr>
<td>Reproductive Epidemiology</td>
<td>4</td>
</tr>
<tr>
<td>Ethics and Law</td>
<td>5</td>
</tr>
<tr>
<td>Psychology and Counselling</td>
<td>9</td>
</tr>
<tr>
<td>Stem Cells</td>
<td>10</td>
</tr>
<tr>
<td>Male and Female Fertility Preservation</td>
<td>14</td>
</tr>
<tr>
<td>Reproductive Endocrinology</td>
<td>15</td>
</tr>
<tr>
<td>Quality and Safety of ART Therapies</td>
<td>16</td>
</tr>
<tr>
<td>Translational Research</td>
<td>17</td>
</tr>
<tr>
<td>Early Pregnancy</td>
<td>19</td>
</tr>
<tr>
<td>Female (in)fertility</td>
<td>28</td>
</tr>
<tr>
<td>Endometriosis</td>
<td>31</td>
</tr>
<tr>
<td>Andrology</td>
<td>35</td>
</tr>
<tr>
<td>Reproductive (epi)genetics</td>
<td>40</td>
</tr>
<tr>
<td>Embryology</td>
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</tbody>
</table>
ESHRE CERTIFICATION FOR EMBRYOLOGISTS

The ESHRE certification in embryology is a two-level certification programme which aims to encourage the formal recognition of embryologists working in IVF and develop their competence.

The embryology certification is a competitive and high-level programme. Success rates at the exam in 2014 were 48% for clinical embryologists and 34% for senior embryologists.

MORE INFORMATION?

www.eshre.eu/embryologycertification

The embryoology certification programme was introduced in 2008 and interest in the certification has been growing over the years. In 2014, the accumulated number of ESHRE certified embryologists was 1100.
I. **ESHRE CERTIFICATION FOR REPRODUCTIVE ENDOSCOPIC SURGEONS (ECRES)**

The ECRES programme was designed for reproductive surgeons who wish to validate their hysteroscopic and laparoscopic skills. It assesses both practical and theoretical skills.

The programme, introduced in 2013, is on two levels: Bachelor (Level 1) and Reproductive Endoscopic Surgeon (Level 2).

In 2014, five candidates applied and four passed at level 1. Eight candidates from 11 applicants were successful and passed the level 2 exam.

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II. **ESHRE CERTIFICATION FOR NURSES AND MIDWIVES**

The ESHRE certification programme for nurses and midwives was launched in 2014.

The certification will allow nurses and midwives with special interest in reproductive health to validate their skills and experience and to establish their status.

In January 2014 the logbook necessary to apply for the first certification exam (scheduled in 2015) was published; 77 applications were received, and 68 accepted.

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III. **CENTRE ACCREDITATION OF SUBSPECIALIST TRAINING PROGRAMME IN REPRODUCTIVE MEDICINE**

The ESHRE accreditation of specialist centres is in collaboration with the European Board and College of Obstetrics and Gynaecology (EBCOG). Accreditation provides a quality label for specialist centres and attests good in-house facilities and expertise to provide adequate training to those wishing to specialise in the treatment of fertility.

In 2014 two new centres were accredited in the scheme, which brought the accumulated number of centres with valid accreditation to 11.

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**MORE INFORMATION?**

[www.eshre.eu/ecrescertification](http://www.eshre.eu/ecrescertification)

[www.eshre.eu/nursescertification](http://www.eshre.eu/nursescertification)
Financial results for 2014 showed a positive balance of 359,107.48 euro. As expected, the net result was less favourable than in 2013, but still higher than budget projections. Compared to 2013, income decreased by 322,806.8 euro, while expenses increased by 183,060 euro.

The income decrease is explained by a reduced revenue from live educational events (i.e. Annual Meeting and Campus meetings/workshops). Incurred advance payments for congress facility rental fees and other deposits mostly explain the main difference between 2013 and 2014 expenditures.

The Society’s financial situation is currently more than sound with a total of 12,452,737.08 euro in capital and reserves (noted 31 December 2014).

The profit and loss accounts for the year ending 31 December 2014 and proposed budget for 2015 are as in the tables below and are submitted to the Annual Assembly of Members for approval.
EXPENSES AS OF 31/12/2014: €5,773,693.45

EXPENSE BUDGET 2015: €5,295,818.00
PEOPLE

THE HEART OF ESHRE’S SUCCESS

I  COMMITTEES

Executive Committee (2013-2015)

Chairman
Juha Tapanainen (Finland)

Chairman Elect
Kersti Lundin (Sweden)

Members
Carlos Calhaz-Jorge (Portugal)
Jacques De Mouzon (France)
Petra De Sutter (Belgium)
Roy Farquharson (United Kingdom)
Anis Feki (Switzerland)
Georg Griesinger (Germany)
Grigoris Grimbizis (Greece)
Cornelis Lambalk (The Netherlands)
Cristina Magli (Italy)
Tatjana Motrenko Simic (Montenegro)
Andres Salumets (Estonia)

Immediate Past Chairman
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Co-ordinator SIGs
Timur Gürgan (Turkey)

Paramedical Board (2012-2014)

Chairman
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Members
Eline Dancet (Belgium)
Yves Guns (Belgium)
Inge Rose Jorgensen (Denmark)
Helen Kendrew (United Kingdom)
Uschi Van den Broeck (Belgium)
Leonie Van Den Hoven (The Netherlands)
Cecilia Westin (Sweden)

Past-Chairman
Jolieneke Schoonenberg-Pomper (The Netherlands)

Paramedical Board (2014-2016)

Chairman
Helen Kendrew (United Kingdom)

Members
Valérie Blanchet De Mouzon (France)
Eline Dancet (Belgium)
Annick Geril (Belgium)
Yves Guns (Belgium)
Jolieneke Schoonenberg-Pomper (The Netherlands)
Uschi Van den Broeck (Belgium)
Leonie Van Den Hoven (The Netherlands)
Cecilia Westin (Sweden)

Past-Chairman
Helle Bendtsen (Denmark)

Central office
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Veerle De Rijbel
Veerle Goossens
Karen Maris
Catherine Plas
Erika Mar Rodriguez Raes
Heidi Roijemans
Bruno Van den Eede
Titia Van Roy
Ine Van Wassenhove
Nathalie Vermeulen

Committee of National Representatives

Austria
Thomas Ebner (Basic Scientist)
Ludwig Wildt (Clinician)

Belgium
Greta Verheyen (Basic Scientist)
Frank Vandekerckhove (Clinician)

Bulgaria
Stefka Nikolova (Basic Scientist)
Petya Andreeva (Clinician)

Croatia
Patrik Stanic (Basic Scientist)
Renato Bauman (Clinician)

Cyprus
Mahmut Cerkez Ergoren (Basic Scientist)
Sozos J. Fasouliotis (Clinician)

Denmark
Ursula Bentin-Ley (Clinician)

Estonia
Kristiina Rull (Clinician)

Finland
Laure Morin-Papunen (Clinician)
Sirpa Makenen (Basic Scientist)
People

France
Catherine Rongieres (Clinician)
Pierre Boyer (Basic Scientist)

Georgia
Lia Chkonia (Basic Scientist)

Germany
Thomas Strowitzki (Clinician)
Verena Nordhoff (Basic Scientist)

Greece
Georgios Pados (Clinician)
Michael Pelekanos (Basic Scientist)

Hungary
Péter Kovács (Clinician)
Peter Fancsovits (Basic Scientist)

Ireland
Aonghus Nolan (Basic Scientist)
Edgar Mocanu (Clinician)

Israel
Eitan Lunenfeld (Clinician)

Lithuania
Giedre Belo Lopes (Basic Scientist)

Italy
Lucia De Santis (Basic Scientist)

Macedonia
Valentina Sotiroska (Basic Scientist)
Zoranco Petanovski (Clinician)

Norway
Nan Brigitte Oldereid (Clinician)
Anette Bergh (Basic Scientist)

Poland
Robert Spaczynski (Clinician)
Anna Janicka (Basic Scientist)

Romania
Bogdan Doroftei (Clinician)
Monica Marina Dascalescu (Basic Scientist)

Serbia
Nebojsa Radunovic (Clinician)
Lela Surlan (Basic Scientist)

Slovakia
Ana Ivanova (Basic Scientist)

Slovenia
Irlma Virant-Klun (Basic Scientist)
Veljko Vlaisavljevic (Clinician)

Spain
Ernesto Bosch (Clinician)
Maria José Gómez Cuesta (Basic Scientist)

Sweden
Lars Björndahl (Basic Scientist)
Pietro Gambadauro (Clinician)

Switzerland
Nicole Fournet Irion (Clinician)
Felix Roth (Basic Scientist)

The Netherlands
Velia Mijatovic (Clinician)
Susana M. Chuvad Sousa Lopes (Basic Scientist)

Turkey
Basak Balaban (Basic Scientist)
Gurkan Uncu (Clinician)

Ukraine
Lyubov Myhailyshyn (Clinician)

United Kingdom
Sheena E.M. Lewis (Basic Scientist)

Special Interest Groups

Andrology (2013-2015)
Stefan Schlatt (DE) I Co-ordinator
Willem Ombelet (BE) I Deputy
Jackson Kirkman-Brown (GB) I Deputy
Victoria Sanchez (VE) I Junior Deputy
Sheena Lewis (GB) I Past Co-ordinator

Early pregnancy (2012-2014)
Mariëtte Goddijn (NL) I Co-ordinator
Siobhan Quenby (GB) I Deputy Co-ordinator
Emma Kirk (GB) I Deputy
Robbert van Oppenraaij (NL) I Junior Deputy
Ole B. Christiansen (DK) I Past Co-ordinator

Early pregnancy (2014-2016)
Siobhan Quenby (GB) I Co-ordinator
Emma Kirk (GB) I Deputy
Astrid Marie Kolte (DK) I Junior Deputy
Mariëtte Goddijn (NL) I Past Co-ordinator

Maria José de los Santos (ES) I Co-ordinator
Sophie Debrock (BE) I Deputy
Giovanni Coticchio (IT) I Deputy
Susanna Apter (SE) I Junior Deputy
Kersti Lundin (SE) I Past Co-ordinator
Carlos Plancha (PT) I Basic science

Endocrinology (2013-2015)
Efstratios Kolibianakis (GR) I Co-ordinator
Frank J. Broekmans (NL) I Deputy
Daniela Romualdi (IT) I Deputy
Terhi Piltonen (FI) I Junior Deputy
Georg Griesinger (DE) I Past Co-ordinator
 PEOPLE

Endometriosis and Endometrium (2012-2015)
Gerard Dunselman (NL)  |  Co-ordinator
Michelle Nisolle (BE)  |  Deputy
Andrew Horne (GB)  |  Deputy
Carla Tomassetti (BE)  |  Junior Deputy
Hilary Critchley (GB)  |  Past Co-ordinator

Veerle Provoost (BE)  |  Co-ordinator
Guido Pennings (BE)  |  Deputy
Wybo Dondorp (NL)  |  Past Co-ordinator

Psychology and Counseling (2013-2015)
Uschi Van den Broeck (BE)  |  Co-ordinator
Sofia Gameiro (GB)  |  Deputy
Cora de Klerk (NL)  |  Deputy
Mariana Martins (PT)  |  Junior Deputy
Christianne Verhaak (NL)  |  Past Co-ordinator

Willianne Nelen (NL)  |  Co-ordinator
Arianna D’Angelo (GB)  |  Deputy
Kelly Tillemann (BE)  |  Deputy
Danielle Nogueira (FR)  |  Junior Deputy
Petra De Sutter (BE)  |  Past Co-ordinator

Reproductive Genetics (2013-2015)
Ursula Eichenlaub (GE)  |  Co-ordinator
Claudia Spits (BE)  |  Deputy
Tania Milachich (BG)  |  Deputy
Georgia Kakourou (GR)  |  Junior Deputy
Joyce Harper (GB)  |  Past Co-ordinator

Tin-Chiu Li (GB)  |  Co-ordinator
Grigoris Grimbizis (GR)  |  Deputy
Antoine Watrelot (FR)  |  Deputy
Sotirios Saravelos (GR)  |  Junior Deputy
Vasilios Tanos (GR)  |  Past Co-ordinator

Françoise Shenfield (GB)  |  Co-ordinator
Paul Devroey (BE)  |  Deputy
Anna Pia Ferraretti (IT)  |  Deputy
Virginie Rozée (FR)  |  Junior Deputy

Stem Cells (2013-2015)
Rita Vassena (ES)  |  Co-ordinator
Cristina Eguizabal (ES)  |  Deputy
Björn Heindryckx (BE)  |  Deputy
Filippo Zambelli (IT)  |  Junior Deputy
Karen Sermon (BE)  |  Past Co-ordinator

I TASK FORCES

Basic Scientists in Reproductive Medicine
Johan Smitz (BE)  |  Chairman
Ursula Eichenlaub-Ritter (DE)
Carlos Plancha (PT)

Developing Countries and Infertility
Willem Ombelet (BE)  |  Chairman
Geeta Nargund (GB)
Rudi Campo (BE)
Carin Huysen (ZA)
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