

Meta Title

Egg Freezing Age Limit: Best Age, Maximum Age & Success Rates Explained

Meta Description

Learn the best and maximum age for egg freezing, how age affects success rates, clinic age limits, and whether freezing eggs at 35, 40, or beyond is worth it.

Egg Freezing Age Limit: Best Age, Maximum Age

Egg freezing has no strict legal age limit before menopause, but the age at which you freeze dramatically affects your chances of having a healthy pregnancy later.

How age affects egg freezing

As you age, both the quantity and quality of your eggs decline, so it becomes harder to get pregnant and to stay pregnant. Fertility starts to fall gradually from around 30, then more steeply after 35, and drops sharply in the 40s. This means eggs frozen in your 20s and early 30s are more likely to lead to healthy embryos and live births than eggs frozen in your late 30s and 40s.

You are born with all the eggs you will ever have, and with time more eggs develop chromosomal abnormalities, which increases the risk of miscarriage and genetic conditions such as chromosomal aneuploidies. Older age also raises the risk of pregnancy complications like gestational diabetes, hypertensive disorders and miscarriage, especially after the mid-30s.

Is there an egg freezing age limit?

Legally, there is usually no fixed maximum age to freeze eggs before menopause, but many clinics set their own upper age limits. In the UK and similar settings, most clinics will offer elective egg freezing up to around 40–45, and some stop at 40 for ethical and medical reasons. These limits reflect the steep fall in success rates and the rising risks of pregnancy at advanced reproductive ages.

There is also a legal limit on how long eggs can be stored. In the UK, eggs, sperm and embryos can now be stored for up to 55 years, provided you renew your consent at regular intervals. This means that if you freeze eggs at, say, 30, you could still have the option of using them many decades later, assuming you remain medically suitable for pregnancy and your clinic's policies allow it.

Typical clinic policies (general)

- Many clinics encourage egg freezing before 35 for best chances of success.
- Quite a few set an upper age for egg collection somewhere between 40 and 45.
- Some clinics cap the age for using your own eggs (transfer) around 50–52 because pregnancy risks rise substantially beyond that.

Best age to freeze your eggs

There is no single “perfect” age, but there is an optimal window where you balance egg quality, quantity and your life circumstances.

- Under 30: Egg quality and quantity are generally at their peak, and freezing now provides very good future potential, though many people are not yet sure about their plans.

- 30–34: Often considered the “sweet spot” because egg quality is still high, and many people have a clearer view of their family goals.
- 35–37: Still reasonable success rates but egg quality and numbers are starting to drop; you may need more eggs or more than one cycle.
- 38–40: Egg freezing can still help, but success rates are lower, and you typically need significantly more eggs to achieve a good chance of a live birth.
- 40+: Success declines sharply; egg freezing is possible in some clinics but often with modest chances, and many clinics restrict access.

For example, some analyses suggest that when 20 eggs are frozen, women under 35 may have an around 80%+ chance of at least one live birth, while women 38–40 may need 25–30 eggs for roughly a 65–75% chance. These figures vary by clinic and individual factors such as ovarian reserve and general health.

Summary table: age and egg freezing

Age band	General fertility status	Typical clinic view on egg freezing	Key points for planning
20–29	Peak egg quality and quantity	Strongly favourable; high success potential even with fewer eggs	Excellent biological timing; main question is whether you feel ready to invest now.
30–34	High fertility, gradual decline starting	Often described as the best window	Good success odds, strong option if you anticipate delaying pregnancy.
35–37	Noticeable decline begins, especially after 35	Still offered by most clinics	May need more eggs or cycles; still

			worthwhile for many.
38–40	Sharp decline in egg quality and quantity	Offered in many but not all clinics	Needs realistic expectations; often more expensive and emotionally demanding.
40–45	Low natural fertility, high aneuploidy rates	Many clinics restrict or stop egg freezing in early 40s	May consider other options (donor eggs, embryos); careful counselling essential.

Is it worth freezing eggs at 36, 39, 44 or 46?

Because your key questions are very age-specific, it helps to look at each age band separately while remembering that individual testing (like AMH, antral follicle count and overall health) can shift the picture.

Is 36 too late to freeze eggs?

At 36, it is not “too late”, and many clinics regard the mid-30s as still a reasonable time to freeze. However, egg quality is already declining faster after 35, and you are less likely to get the same results as someone who froze in their late 20s or early 30s. You may need a larger number of eggs and perhaps more than one cycle to reach a target that gives a comfortable chance of a future live birth.

Cost-benefit at 36 often depends on your plans: if you know you want children but expect to delay pregnancy into your late 30s or early 40s, freezing now is usually more effective than waiting. A fertility work-up (hormone tests and ultrasound) can

clarify how many eggs a doctor expects to retrieve and whether your ovarian reserve is still relatively robust for your age.

Is it worth it to freeze my eggs at 39?

At 39, egg freezing can still be worth considering, but it requires very realistic expectations. Data suggest that each egg at 38–40 has a lower chance of leading to a live birth than at younger ages, so you may need to aim for a higher total number of mature eggs (for example 25–30) to get a reasonable chance of one baby. That may mean multiple stimulation cycles, which increases cost, time and emotional load.

If your ovarian reserve is already low at 39, you might produce relatively few eggs per cycle, making egg freezing less efficient. In those cases, some people consider alternatives such as embryo freezing with a partner or donor sperm, or thinking ahead about donor eggs in the future; embryos can sometimes give clearer information about viability because they have already fertilised and started development. A specialist consultation can help you weigh your personal odds and decide if the likely benefit justifies the investment at 39.

Can I freeze my eggs at 44 or 46?

Medically, egg retrieval is technically possible in the mid-40s if you are still ovulating, but many clinics will not offer elective egg freezing after about 40–45. Typical medical practice is to perform retrieval before 45 or 46, as success with your own eggs beyond that age is very low, and the risk of poor response to stimulation is high.

At 44 or 46, several issues converge:

- Ovarian reserve is usually very low, so few eggs may be collected.
- A high proportion of eggs are chromosomally abnormal, so few, if any, normal embryos may result.
- Pregnancy at this age carries increased risks including hypertension, diabetes and obstetric complications.

Because of these factors, many clinics either strongly discourage or decline egg freezing at 44 or 46 and instead discuss options like donor eggs or adoption. For

someone strongly interested, a fertility assessment (AMH, ultrasound) may still be done, but counselling will usually emphasise the low probability of success with own eggs at these ages.

How long can eggs stay frozen?

With modern vitrification techniques, frozen eggs can remain viable for many years without significant additional age-related deterioration while in storage. In the UK, current law allows storage of eggs, sperm and embryos for up to 55 years as long as you renew your consent at set intervals. The limiting factor in practice is often your health and clinic policies on the maximum age for carrying a pregnancy, rather than the eggs themselves “expiring” in storage.

If you later decide not to use your stored eggs, you usually have options to discard them, donate them for research, or in some cases donate them to others, depending on your country’s regulations and your consent.

Success rates, side effects and cost

Success rates from egg freezing depend mainly on age at freezing, number of mature eggs collected, underlying fertility, and how they are used later (ICSI/IVF protocols, sperm quality, uterine health). Younger cohorts, especially under 35, have the highest live birth rates per frozen egg or per batch of eggs, while outcomes drop steadily after 35 and more steeply after 38–40.

Common short-term side effects of egg freezing include bloating, mood changes, temporary discomfort from enlarged ovaries, and bruising from injections; more serious risks such as ovarian hyperstimulation syndrome (OHSS) or procedure-related complications are uncommon but do occur. The process can also be emotionally demanding, particularly if you need more than one cycle.

Costs vary widely by country and clinic but usually include:

- The stimulation and retrieval cycle itself.

- Medication.
- Annual storage fees for your eggs.

In many places, a single cycle plus medications can amount to several thousand in local currency, and more than one cycle is often required to achieve a good egg number, especially after 35.

Can you still get pregnant naturally after freezing eggs?

Freezing your eggs does not use up future fertility; it simply collects some of the eggs you would otherwise lose that month. You can still try to conceive naturally later if you wish, and the frozen eggs remain as a “backup plan” if natural conception does not happen. This dual pathway trying naturally while having frozen eggs in reserve is one reason many people find egg freezing psychologically reassuring.

If you are considering egg freezing at any age, the most practical next steps are to:

- Arrange fertility testing (AMH, FSH, ultrasound antral follicle count).
- Ask the clinic for age-specific success rates using their own data.
- Discuss how many eggs and cycles they estimate you would need for your goals.

These details, tailored to your own health, will give you a clearer picture of whether egg freezing is likely to be worthwhile for you at your current age.

Frequently Asked Questions (FAQs)

1. Is there a maximum age limit for egg freezing?

There is usually no strict legal maximum age for egg freezing before menopause, but most fertility clinics set their own upper age limits based on medical and ethical considerations. In many countries, clinics typically offer elective egg freezing up to around 40–45 years old, with some stopping earlier due to sharply declining success rates. After 40, egg quantity and quality decrease significantly, and the proportion of chromosomally abnormal eggs rises. These factors reduce the likelihood that frozen eggs will later result in a healthy pregnancy. Clinic policies aim to ensure patients have realistic expectations and are not exposed to unnecessary physical, emotional, or financial strain.

2. What is the best age to freeze your eggs?

The best age to freeze eggs is generally between 30 and 34 years old. During this window, egg quality remains high, egg numbers are still relatively good, and many people have a clearer sense of their future family plans. Freezing eggs in the early 30s often requires fewer stimulation cycles and offers higher chances of a future live birth compared to freezing later. While freezing eggs in your 20s provides excellent biological potential, many individuals choose to wait until their 30s for personal or financial reasons. Ultimately, the “best” age balances biology with life circumstances.

3. Is egg freezing still worth it after age 35?

Egg freezing after 35 can still be worthwhile, but expectations must be realistic. Egg quality and quantity begin to decline more rapidly after this age, meaning more eggs and often more cycles are needed to achieve a reasonable chance of a future live birth. Many women between 35 and 37 still benefit from egg freezing, especially if they plan to delay pregnancy into their late 30s or early 40s. However, success rates are lower than in younger age groups. Fertility testing, such as AMH levels and antral follicle count, helps determine whether egg freezing is likely to be effective.

4. Can you freeze your eggs at 40 or over?

Technically, egg freezing is possible at 40 and beyond if a woman is still ovulating, but success rates decline sharply. Many clinics limit egg freezing after 40–42 due to low ovarian reserve and high rates of chromosomal abnormalities in eggs. Women in this age group often produce fewer eggs per cycle, making the process more expensive and emotionally demanding. While some clinics may allow egg freezing up to 45, counselling usually emphasizes the modest chances of success. Alternatives such as embryo freezing or donor eggs may be discussed depending on individual circumstances.

5. How long can frozen eggs be stored?

With modern vitrification techniques, frozen eggs can remain viable for many years without losing quality while in storage. In the UK, eggs, sperm, and embryos can legally be stored for up to 55 years, provided consent is renewed at required intervals. The eggs themselves do not “age” in storage; instead, the limiting factor is the individual’s health and clinic policies regarding pregnancy at later ages. Even if eggs are stored for decades, using them later depends on whether pregnancy is considered medically safe at that time.

6. Does freezing eggs affect natural fertility later?

Freezing eggs does not reduce your ability to conceive naturally in the future. The eggs collected during a freezing cycle are those that would otherwise be lost during that month’s natural cycle. After egg freezing, you can still try to become pregnant naturally, and many women do so successfully. The frozen eggs simply act as a backup option if natural conception does not occur. This reassurance is one of the main reasons many people choose egg freezing—it offers flexibility without closing the door on spontaneous pregnancy.

7. How many eggs should be frozen for a good chance of pregnancy?

The number of eggs needed depends strongly on age at freezing. For women under 35, freezing around 15–20 mature eggs may provide a high chance of at least one live birth. Between 35 and 40, more eggs often 25–30 or more may be needed due to lower egg quality. After 40, even larger numbers may not significantly improve success rates. Because egg yield per cycle declines with age, older women often require multiple cycles. Clinics usually provide personalized estimates based on age, ovarian reserve, and health.