

Preface

Dear Reader,

In this issue of Gynemedia we look forward to an interview with Dr. Sell regarding his professional reorientation within the Hamilton Thorne Group from January 1st, 2021.

We also have two interesting articles on the subject of falling birth rates. In the first, we report about the Japanese Prime Minister candidate who would like fertility treatments to be covered by insurance in the future.

The second article deals with the impact of the corona pandemic on birth rates.

Finally, we are happy to present an interview with Laurence Rivain, International sales and Marketing Manager by Gynemed.

We remain, as ever, stay safe and healthy

Your Gynemed Team

Dr. Fabian Sell appointed as Chair of Hamilton Thorne Europe

It has been official announced in October 2020. Dr. Fabian Sell takes over the "Chair of Hamilton Thorne Europe" from 1st January 2021 on.

Gynemed: Dr. Sell, you founded the company in 1998 with your partners, Ms. Waechter and Mr. Koch.

Dr. Sell: Yes, it was particularly fortunate to found the company Gynemed and to develop it with my partners into a respectable company, which - despite all modesty - is highly valued by our customers in Germany, Austria and Switzerland and which also internationally our efficient dealers are constantly being further developed. I would like to express my thanks to all of our customers who have contributed to this.

Gynemed: Why the move to Hamilton Thorne now?

Dr. Sell: Consolidation in Reproductive Medicine has been an unmistakable process that has been going on for years. It is becoming more and more difficult to advance the development of new medical devices. The focus here is not only on the development of costs, but also on the long ways to successful certification. With the acquisition by Hamilton Thorne Ltd., a stock corporation traded on the Toronto Venture Exchange, in April 2017, we became - overnight, as it were - one of the world's leading providers of precision instruments, medi-



Herr Dr. Fabian Sell

cal products and related services for reproductive medicine and cell biology also for many research institutions. In this "association" we want to tackle the diverse challenges of the coming years.

Gynemed: In which „Association“?

Dr. Sell: We currently market our specialties and services under the Gynemed, Hamilton Thorne Inc., Planer and Embryotech brands. One of the main tasks of my new position will be that this network continues to grow in our M&A program, and that appeals to me very much.

But I will also be concerned with the inter-company development for product specialties, the further development of the GM 501 media series and the acquisition of products. So I stay true to reproductive medicine.

Gynemed: And Gynemed?

Dr. Sell: The decision was not an easy one for me, that's very clear. I was always convinced of my work and the development of the company, and I was lucky to be active in such an interesting and innovative field. I have supervised countless ESHRE events, AGRBM meetings, intensive workshops, referring events and my own symposia and always felt fulfilled in my everyday professional life. I've always felt comfortable in thousands of conversations. It was particularly fortunate for me to accompany my customers on their professional careers and sometimes to be involved in their private lives.

But we didn't fail to develop the team continuously and in good time. With Dr. Hoffmann, Dr. Terzenbach, Dr. Tiedemann and Mr. Gaisbauer have a competent field service/sales force available as contact persons.

Dr. Heinzmann will manage the business as my successor. And of course it is very important to me that the location in Lensahn will last for a long time, that our employees, of whom I

am very proud, and many of whom have worked loyally for us for 10 years or more, also in the future with or without Corona, have secure professional prospects.

Gynemed: When will we meet again?

Dr. Sell: It is not my plan to go into hiding from January onwards. My cell phone number will stay the same, so I will be happy to serve Gynemed and their customers - in accordance with the Gynemed philosophy.

Of course, I am at Gynemed's side whenever this is requested. And if ESHRE should be held in the usual manner next year, there will be a big reunion at the latest.

Gynemed: Dr. Sell, we wish you the best of luck in your new role.

ABV47+ - Cryo-Container in Gynemed Design

We would like to present you our offer, the Cryo-Container, which combines beautiful design and high quality.

The containers are made of aluminium, have a high vacuum power, and multi-layer super insulation.

At the same time they have a very long liquid nitrogen retention time

of 120 days. More information can be found below.

This container is a class IIa medical device and is supplied together with a roller support (5 wheels).

If you are interested in an ABV47+ in Gynemed Design, please contact us and we will make you a personal offer.

Specification ABV47+

- Volume: 38 liter
- Height outside: 681 mm
- Outer diameter: 478 mm
- Diameter of the opening: 127 mm
- Static evaporation rate: 0,25 L/24h
- Static hold time: 120 Days
- Weight, empty: 17,3 kg
- Weight, full: 47,5 kg
- Number of canisters: 10
- Canister height: 280 mm
- Storage capacity
2 ml ampulla: 1140



*Cryo-Container ABV47+ and
Transport-Container in
Gynemed Design*

Japanese Prime Ministerial candidate pledges better access to fertility treatment

As Dr Marieke Bigg reported in Bionews on 14 September 2020, Yoshihide Sugo has suggested that fertility treatments should be covered by insurance in future. In his speech on his candidacy

for the post of Prime Minister, the Acting Head of Cabinet addressed the low birth rate in Japan and announced his plans to make fertility treatments more accessible. "To support couples wishing to have

children, we want to have IVF treatments covered by health insurance," he said according to Reuters.

The proposal appears to build

on the “womenomics” policy of Suga’s predecessor, Prime Minister Shinzo Abe, which, as part of his project to combat falling fertility and an ageing population, aims to strengthen the role of women in business and politics. Similarly, Suga has committed to “creating

an environment in which women can remain healthy and play an active role in society”.

Yet Abe’s policies widened the gender gap in Japanese society. The birth rate reached its lowest level ever in 2019. The free kindergartens and day-care centres introdu-

ced by the government last year were also widely criticised for long waiting lists for working mothers. Suga plans to expand Abe’s economic and pandemic response policy, but promised to supplement it with support for fertility treatment.

SARS-CoV-2 and births

In the context of the corona pandemic, the picture regarding the birth rate is now unclear. In fact, major crises are generally followed by increased birth rates. In the current crisis, however, a more differentiated picture is emerging. While in some countries the birth rate is skyrocketing, Singapore is currently having to provide financial aid to support people to start families.

The corona pandemic has changed many things. Including, apparently, the desire to reproduce. What gynaecologists had already predicted is now being confirmed by the birth statistics of Singapore: The fertility rate in the smallest and at the same time richest state in South East Asia has continued to decline since the beginning of the Corona epidemic. Before the crisis, Singapore already had one of the lowest birth rates in the world. Women had on average 1.14 children each. This is the fourth lowest fertility rate in the world (2.1 babies per woman would be needed to maintain a stable population).

For years the government has been trying to promote raising families with financial incentives. Parents could expect up to the equivalent of 7300 dollars for a child under the previous bonus system. So far this has not won many over. As the figures have remained in decline. The fact that in

the pandemic the average monthly income has fallen from 4435 dollars to 3738 dollars makes the situation worse. To ensure that the pandemic-related worries about jobs and wage payments do not become reasons against having children, the government now wants to increase the existing incentive. This should reassure people financially, Deputy Prime Minister of Singapore Heng Swee Keat told MPs this week. “If Covid-19 is delaying plans to have children, we must take countermeasures”, the BBC quotes him as saying. The amount has not yet been published. The situation in China, the Middle Kingdom, is also comparable to that in Singapore. In early 2020, the number of newborns shrank to its lowest level since the founding of the People’s Republic - despite the relaxation of the one-child policy. On average, a Chinese woman still has just 1.6 children.

In a study carried out in Milan in July, researchers investigated and published the link between the pandemic and fertility rates, concluding not only that global fertility has changed significantly over the last century, depending on material wealth, but also that birth rates in higher income countries would decline in the future. Statistics show a fertility rate of about 2.1 children per woman in “emerging countries and in most urban areas within these countries”, the authors write. But some countries fall as low as

to 1.3 children per woman. As in the case of Singapore or China. The richer a country is, the sooner financial worries strangle the desire for children.

On the other hand, there is also an opposite trend: Poorer Southeast Asian countries like Indonesia or the Philippines prove that high birth rates are still the norm in the world’s poorest rural areas. Here too, the pandemic is reinforcing the trend. Indonesia and the Philippines are expecting a real baby boom during the pandemic.

According to a UN report, pregnancies in the Philippines are expected to skyrocket by almost half to 2.6 million if the pandemic situation remains the same with many restrictions until the end of the year. “These figures are an epidemic in themselves”, the BBC quotes UN spokeswoman Aimee Santos.

The Philippines already has the second largest population in Southeast Asia, 108.4 million, and is also one of the poorest countries in Asia. It cannot be claimed that a conscious decision to have children is being made in poorer countries.

In Indonesia, for example, women in lockdown stood outside the closed doors of their health centres, where the poorer ones receive their birth control pills.

Interview with Laurence Rivain

Gynemed: Laurence, you are managing Gynemed's International Marketing and Sales. Please tell us a little bit about yourself.

Laurence Rivain: My name is Laurence Rivain, I am French; my background is in international sales and management. I have worked in the field of Reproductive Medicine for 8 years, specifically in the company MICROPTIC as the Sales Manager, responsible for the international sales and marketing improvement. My main objective was to open new markets, organizing and conducting workshops, conferences, customer visits, helping distributors, teaching the sales force, to name a few. During this time I learnt a great deal about different cultures, whilst in contact with a variety of professionals within the sector.

Gynemed: What are you looking forward to with this new challenge?

Laurence Rivain: I joined the GYNEMED team early this year to offer my experience and knowhow and further improve the international position and notoriety of Gynemed products. Gynemed offers a unique blend of products that offers particular advantages on the market. In addition to the media line with its specialty products and consumables, Gynemed offers a broad range of technical equipment. And Gynemed is a member of a strong group, which currently markets our specialties

and services under the Gynemed, Hamilton Thorne Inc., Planer and Embryotech brands.

Gynemed: Where do you see your strength?

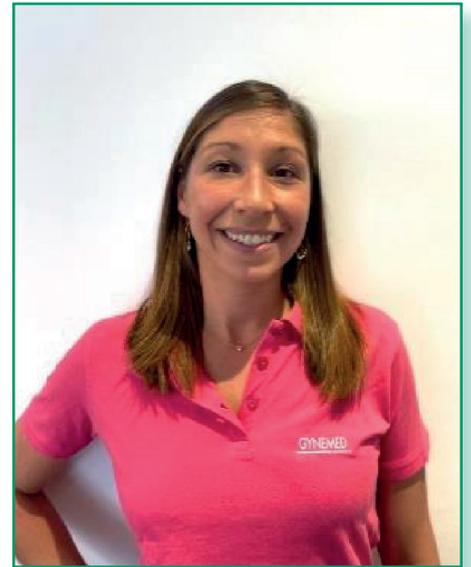
Laurence Rivain: I believe I will bring new ideas to the GYNEMED team. I am ambitious, motivated, and I like challenges, as I am interested in finding new projects. I enjoy meeting new people, I like to practice the different languages I have learned and I like to teach others what I know. And I'm very happy to cooperate with Dr. Julia Heinzmann who runs Gynemed in DACH.

And I will continue to cooperate Dr. Fabian Sell who will be responsible for the group's M&A program, for the inter-company development for product specialties, as well as for further development of the GM 501 media series and the acquisition of products in his new position as a Chair of Hamilton Thorne Europe.

Gynemed: Can you explain your mission in GYNEMED?

Laurence Rivain: I was already quite familiar with this company and I really like the values they are sharing. I look forward to working more with the team and the product line.

My first target since March has been to open the French market with Bénédicte Weiss through the new French GYNEMED branch.



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This first step gives me the opportunity to learn more about our wide array of products, as well as market expectations. Gynemed already has a far-reaching distributor network and I am very excited to expand it further with Jessica Wittern, who is the Export Manager of GYNEMED since many years, as well as Vivien and Katharina in the office in Lensahn. New marketing opportunities i.e. social media management will be explored and set-up together with Julia Biegemann and the marketing team.

We would like to support our customers and partners as much as possible, providing trainings, marketing materials, workshops, attending their local congresses... I am very excited and ready for a new adventure!

Gynemed: wishes you good luck!

LEGAL NOTE

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