

The James Cook University Hospital
Department of Reproductive Medicine

Information for potential embryo donors

Thank you for considering donating your embryos. Some women are unable to have children because they have either no eggs or only defective eggs. When such women have partners who have no sperm conception is only possible through the use of both donated eggs and donated sperm. The donation of embryos effectively provides both donated eggs and sperm at the same time.

At present there is a shortage of egg donors in the UK, so that many couples who could benefit cannot be treated. If you do decide to donate your embryos you will be offering a chance of conception to a couple who otherwise cannot be treated.

There is no payment offered for egg, sperm, or embryo donation in this country, although reasonable expenses such as travel and childcare can be refunded.

Couples who might benefit from embryo donation include those in whom the woman -

- is unable to produce eggs of her own.
- produces eggs of poor quality.
- has had her ovaries removed.
- has experienced a premature menopause.
- is over the age of 40 years.

The male partner will also have fertility problems, such as no sperm, or defective sperm.

Who should not donate embryos?

To donate embryos the woman must normally have been no more than 35 years old, and the man no more than 45 years old, at the time that your embryos were made. Note that these age limits refer to the time that your embryos were made and frozen, and not to your present ages.

Occasionally, potential donors may unknowingly carry the HIV virus in their bodies. Couples in whom either partner is in a high-risk group for HIV should not donate their embryos. High-risk groups include:

- Men who have had sex with other men.
- Intravenous drug users.
- People of any race who have been sexually active (with either sex) in areas known to be at high risk for HIV (eg Africa, Thailand). The main route of HIV infection in Africa is through heterosexual sex.
- Men who have had sex with a prostitute in the 12 months prior to the production of the sperm used to make the embryos for donation.
- People who have had multiple sexual partners in the six months prior to the creation of the embryos for donation.
- The sexual partners of any of the above groups

Men or women who are adopted should not donate embryos unless they have access to the medical history of their natural parents.

Personal and family health

You will be asked to complete a lengthy questionnaire about your health, with particular emphasis on hereditary disease. If any such disorders are present in either of your families you may be excluded from donating your embryos.

We will seek your permission to contact the family doctors of both of you regarding your personal and family health. There are some conditions, such as asthma, which will require further consideration, but will not necessarily exclude you from donation.

We will take blood samples for blood grouping, for chromosome analysis, for certain genetic tests (mainly to check whether either of you are carriers for cystic fibrosis), and to check for infections such as hepatitis or HIV.

Regardless of their impact upon whether you donate embryos or not, the results of such tests may have implications for your own health. You must provide written consent prior to HIV testing, which is performed as a screening test prior to your being accepted as embryo donors.

Counselling

There are many considerations to be taken into account when deciding to donate your embryos. To help you, all licensed clinics can offer you the opportunity to talk through any issues and concerns you may have with someone not immediately involved in any treatment that you may have had or may still be having yourselves.

The independent counsellor attached to the Department of Reproductive Medicine is Janet Owen who can be contacted on mobile 07951579785, Monday-Friday, 09.00 am – 5.00 pm.

Counselling can be a useful opportunity to discuss with an impartial person any concerns you may have about any aspect of becoming a donor and its implications for you and your family. However, you do not have to accept offers of counselling if you do not feel it would be helpful.

Consent

Written consent must be given before embryo donation can occur. You should only give your consent once you are satisfied that you understand what you are agreeing to. You will be asked to make important choices. You should feel that you have had the opportunity to consider the implications of what you are agreeing to.

The Human Fertilisation and Embryology Act requires that *“you must give your individual consent to the use and storage of your own gametes or embryos created. You will be able to vary or withdraw this consent until such time as the embryos that may have been created have been implanted.”*

This means that both of you together, or either of you separately, are free to withdraw an offer of embryo donation at any time prior to the transfer of the embryo's involved into the recipient's womb. Should you experience any doubts regarding your decision to continue it is important that you raise your concerns with a member of staff. If you change your mind at any point your embryos will not be used in treatment, but will be allowed to perish.

Once the embryos have been transferred into the womb of the recipient you will no longer have any legal rights over them. The woman (recipient) who has had the embryos transferred into her womb and her partner will become the legal parents of any resulting child or children. Donors have no relationship in law with any child resulting from treatment using eggs that they have donated and no obligations or rights over that child.

When donated embryos have been used the identity of the donor is kept strictly confidential. The recipient of your embryos will not be able to learn your identity. Similarly, the recipient's identity will not be disclosed to you.

The Human Fertilisation and Embryology Authority

Treatment and research using donated eggs, donated sperm, or donated embryos are licensed and regulated by the Human Fertilisation and Embryology Authority (HFEA) under the terms of the Human Fertilisation and Embryology Act, 1990. All clinics offering such treatment have been inspected and licensed by the HFEA. The clinic has a legal obligation to record each donor's name and some details about him or her.

The law changed on 1st April 2005. Prior to that date the great majority of sperm, egg, and embryo donations were made on an anonymous basis. Since that date sperm, eggs, and embryos can only be donated by individuals or couples who have agreed to be identifiable to any child conceived from the use of their sperm, eggs, or embryos. Identifying information (the donor's name and address) will be made available to such individuals only at their request, and only after they have reached age 18 (or age 16 if they intend to marry).

Every treatment cycle, and every resulting pregnancy and birth, is registered confidentially with the Human Fertilisation and Embryology Authority (HFEA). At each treatment we will inform the Authority of the names and dates of birth of all the parties involved – recipients and donors. The HFEA keeps on record certain information about donors: name, address, date of birth, race, height, weight, colour of hair, colour of eyes, skin colour, occupation, interests, and whether they have any children of their own. Donors are also invited if they wish to write a few sentences (or more) about themselves as a person, providing information of possible interest to any child conceived in this way. This section might include non-identifying information about the donor's interests, family background, childhood, region of origin, etc.

From the year 2008, people aged 18 or more (16 or more if intending to marry) who ask the HFEA will be told whether or not they were born as a result of licensed assisted conception treatment, and if so whether they are related to the person whom they wish to marry. Individuals conceived from donated eggs or sperm may request non-identifying information about the donors. They may also, if they choose, ask to be informed of the identity of the donors.

It will obviously be up to the person conceived by the use of donor embryos to make enquiries from the HFEA, and there is no suggestion that the Authority would ever contact such a person other than in reply to his or her own enquiries.

Other Issues

More than one couple may benefit from your donation depending upon the number of embryos that you donate. There is therefore the potential for more than one couple to achieve a family from your donation. The HFEA limit the number of children created from the donated eggs or sperm of any individual donor to a maximum of ten. If either of you have had donated eggs or sperm before you must tell us.

Cryopreserved embryos may not be stored indefinitely and the statutory storage period for gametes and embryos is ten years. This period may be exceeded in certain circumstances.

From the time of cyopreservation your embryos must be stored in quarantine for a minimum of six months before they can be transferred into a recipient. If your embryos have been stored for less than six months at the time of donation we will need to see both of you again to screen for HIV and hepatitis before the embryos can be used. During this time you retain legal rights over the embryos until they are transferred into the recipient. If during this time you wish to withdraw your consent you must contact and inform the clinic of your decision immediately. If you do not attend for this important blood test the embryos will not be available for treatment and will therefore have to be destroyed.

Further Information

For more information regarding embryo donation please contact a member of our nursing team directly on 01642 854836.