

Guidance Notes for Potential Egg Donors.

Firstly let us thank you for your interest in becoming an egg donor. There is nothing as precious as the gift of life and by becoming an egg donor you will be helping people to create the family they otherwise could not have.

Below is some general information to help you. We hope that you will contact us if there is anything further we can do. We can put you in touch with others who have donated, for example, so you can speak to them about their experience.

The information should be read in conjunction with the Human Fertilisation and Embryology Authority leaflet “Donating Sperm, Eggs and Embryos”. The HFEA can also be contacted on 020 7291 8200. www.hfea.gov.uk for further information.

Why are Egg Donors needed?

The process of having children is seen as being a very natural and relatively simple one. Most people take it for granted; at least until they discover that they may not after all be able to conceive children. This realisation can have far reaching implications for many people.

Most of us do not realise that even for those who “do not have any difficulty in conceiving” the average chances of conceiving are only about 20-25% per cycle. (Interestingly this is about the same chance of becoming pregnant through some assisted conception techniques.) Indeed, one in seven couples seek medical advice at some stage in their lives in order to achieve a pregnancy.

Some couples fail to achieve a pregnancy because the female partner may have suffered a premature menopause – as young as 20 years of age, never been able to produce eggs, lost the use of her ovaries due to disease, surgery or the treatment of cancer. Some women carry inherited genetic diseases and are thus seeking donated eggs so as not to transmit the disease to their children.

There is an acute shortage of egg donors and many couples wait for several years to benefit from donated eggs. Some couples are fortunate enough to have friends and family willing to donate eggs as a ‘known donor’. However most are not so fortunate and thus they are likely to be ‘in the queue’ waiting for sufficient anonymous donors to volunteer their eggs.

Would you make a suitable donor?

Donors should be healthy women aged 18 to 35 years, free of any serious medical infection, disability, congenital, family or hereditary disease and who are not severely overweight for their height.

People who are adopted can donate only if there is availability of a family medical history. It is necessary to examine their family history for evidence of serious inherited disorders that could be passed on to any children born following DI.

Because some birth defects (e.g. spina bifida, cleft palate, hare lip) and serious diseases (e.g. diabetes, epilepsy, schizophrenia, asthma and haemophilia) are genetically linked, it is not possible to accept as a donor any individual where there is a family history of these conditions.

Counselling of Potential Egg Donors.

Potential donors are carefully counselled to ensure that they are fully aware of all that is involved in egg donation, their rights, the rights of the eventual parents and any child born as a result of donated eggs; as well as potential effects on the donor and their own family if they do indeed become an egg donor. Equally, they are advised of the medical procedures involved.

Screening of Potential Donors.

It will be necessary for potential donors to be “screened” so as to ensure that they are free of infections, diseases or genetic conditions that might be transmitted in the donation process. Information will be required from you about your medical and family history. Potential donors will also need to have a general medical examination and blood tests.

With the potential donor’s permission, their General Practitioner will be contacted in order to obtain a more detailed medical history.

As it is usual for there to be an attempt to match the physical characteristics of both the donor and the eventual recipient of the donated egg, general physical characteristics of eye and hair colour, height and weight and race and complexion are taken into account and are thus recorded.

What treatment does the donor have to undergo?

In essence, the treatment involved for the egg donor is much the same as that for a woman undergoing IVF treatment. The ovaries will need to be suppressed by desensitising the pituitary gland by means of either daily nasal sprays or injections for 2-4 weeks. The ovaries are then stimulated by means of daily injections for around 10-14 days. Whilst the treatment may possibly be self administered there will be a need for regular ultrasound scans (about 5 or 6) to determine the stage of the ovulation cycle, together with further blood tests.

The actual egg collection is usually performed under general anaesthetic but alternative sedation may be available according to the egg donor’s wishes. Normally, egg collection is performed vaginally under ultrasound scan.

Donors can usually return home just several hours after the egg collection has been completed. However, they need to be aware that they will suffer the normal after-effects of having had a general anaesthetic and should ensure that they are accompanied and that, if they have children or other dependants, these will need others to look to their needs, until the after-effects of the anaesthetic have worn off.

What risks are there for the donor?

The risks to the donor are considered to be minimal and short-term. Such risks include the possibility of troublesome bleeding or pelvic infection (less than a 1% chance). Equally, there is a 1% - 2% risk of excessive ovarian stimulation (too many eggs being produced) despite careful monitoring. In such a case, the donation cycle will probably be abandoned and treatment would be commenced to regularise your menstrual cycle.

What next?

If you wish to become an egg donor and you are not excluded by reference to any of the above mentioned criteria, you should now contact a Centre licensed by the Human Fertilisation and Embryology Authority (HFEA) operating an egg donor programme. Details of these are included in the enclosed list, together with the names of the appropriate contacts and any special telephone lines dedicated for the use of potential egg donors.

When you visit the Licensed Centre, you will be asked questions about your health and related issues mentioned above. You will be offered counselling about what is involved and your rights, as well as the rights of those receiving your donated eggs and any child created by means of your donated eggs.

You need also to be aware that your details will be held on a register maintained by the HFEA as a safeguard against inappropriate sexual relationships between children sharing the same (genetic) mother.

The law changed on the 1st of April 2005 to remove anonymity from donors and allow donor-conceived children to access the identity of their donor when they reach the age of 18. The new legislation will not be retrospective.

Counselling.

You should have the opportunity for appropriate counselling at any stage during your donor programme and at any stage thereafter, in relation to your being an egg donor.