

# DONOR EGG INFORMATION



**PIVET MEDICAL CENTRE**  
**ASSISTED REPRODUCTIVE TECHNOLOGY PROGRAM**

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**WESTERN AUSTRALIA**

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# EGG DONATION - PATIENT INFORMATION

## 1. What Is egg donation?

Egg donation involves the use of eggs donated from a woman who acts as the “donor”. The donor must have IVF treatment in order to obtain eggs for the donation process.

The decision to use donor eggs or to donate eggs may have a significant impact on the donor, the recipient and their family. It is important that informed decisions are made regarding the offering or receiving of donor eggs, including legal rights and responsibilities.

In Western Australia the donating and receiving of donor eggs is governed by legislation under the Reproductive Technology Act (1991) and the HRT Act Directions.

Information regarding donation can be discussed with the Donor Co-Ordinator or by emailing the clinic: [info@pivet.com.au](mailto:info@pivet.com.au).

PIVET Medical Centre manages a program to provide for women, who for various reasons, require the use of donated oocytes (eggs). Some women experience “premature ovarian failure” where their ovaries cease producing eggs many years before expectation. Certain genetic conditions and surgical removal of the ovaries to prevent the spread of disease, are other reasons why women would need to access donated eggs to enable them to have a child.

Ideally, donors should be under 35 years of age, however, up to 40 years may be considered in some circumstances. Eggs from women aged over 40 years have disappointing outcomes and given the costs to, and the expectations of the recipients, PIVET prefers not to accept donors over this age. Eggs must not be donated by any person under the age of 18 according to the Human Reproductive Technology Act (1991) Directions 7.1.

## 2. Known vs Unknown Donation

### What Is “Known” Donation?

Known donation refers to the recipient finding their own donor. Egg donors are usually relatives or friends but may also be an acquaintance or recruited through advertising

### What Is “Unknown” Donation?

Unknown donation refers to the use of donor eggs from a donor unknown to the recipient. The donor is recruited by the clinic and following extensive screening and counselling, her eggs are collected and cryopreserved (frozen) in an IVF treatment cycle.

Usually more than one recipient (but no more than five) will benefit from each unknown donation. We aim to allocate six eggs to each recipient.

To access PIVET’s unknown donor egg program, patients need to place their names on the donor waiting list. A consent to be on the wait list is signed at the patient’s initial appointment. The wait list works in chronological order and once the patient is near the top of the list, they will be contacted by the Donor Co-ordinator for the next steps in the process.

Once set up for a treatment cycle by a Clinician, recipients will be offered donor profiles from the Donor Co-ordinator. As the donor is unknown, only non-identifying information is provided on the profile. This includes height, build, hair colour, eye colour, complexion, blood group, age at donation, education, occupation, and ancestry. The donor may also include their interests, some information as to their motivation for donating and a copy of the donor’s genetic review is included.

### 3. Who can be an egg donor?

Egg donors ideally are aged between 18-35 years of age and have preferably completed their own families. In the case of a known donation these requirements can be varied.

The unknown donors we have at PIVET are locally recruited. We rely on the interest and generous nature of women from the community. Most potential unknown donors contact the clinic as they have either witnessed family or friends struggle with infertility and wish to help or give back.

Unknown donors must donate altruistically (not involving monetary gain) and are only reimbursed for reasonable expenses.

Previous tubal surgery or contraceptive devices does not prevent donation.

### 4. What is involved in becoming an egg donor? Processing, Screening & Quarantine

The donor will have several blood screening tests and is required to complete:

- a family health history form – details of any diseases/genetic conditions in close family members
- a lifestyle declaration form – details of lifestyle habits preceding the donation time
- a donor characteristics form –physical features (height, weight, eye colour etc)

Blood tests are carried out for the following diseases and conditions: -

- Karyotype: *all donors must have a normal number and arrangement of chromosomes*
- Cystic Fibrosis
- SMA – Spinal Muscular Atrophy
- Fragile X
- HIV I & II antibody
- HTLV I & II antibodies
- Syphilis
- Chlamydia
- Gonorrhoea
- Hepatitis B surface antigen
- Hepatitis core antibody
- Hepatitis C antibody

Donors are also screened for ethnically related diseases, where appropriate:

- Mediterranean or Asian heritage - **Thalassaemia**
- African heritage - **Sickle-cell Anaemia**
- Jewish heritage - **Tay-Sachs and Gaucher's disease**

Once a donors' infectious screening returns negative results, donations may begin.

**Quarantine** commences once freezing of the donor eggs is complete. Donated eggs are routinely quarantined for a minimum of three months. The donor is then requested to attend for a final blood test, the results of which will satisfy quarantine requirements. A donor profile is then generated and offered to recipients and the eggs are available for use in treatment.

### 5. Genetic Counselling & residual risks for donors & recipients

All unknown donors have an appointment with the Genetic Counsellor to discuss their Family Medical History form. A copy of their genetic consult is provided on the donor profile you receive as a recipient.

If a genetic disorder is declared by a donor, the recipient may wish to make an appointment with our Genetic Counsellor to discuss the risks of inheritance of this disorder in relation to the background general population risk.

Despite the level of screening performed, there are still risks associated with the treatment, as there are many other genetic diseases that are deemed to be at too low risk for testing or the technology is not yet available for testing. If pregnancy should result from the treatment, we cannot rule out the possibility of physical, mental or psychological abnormalities to the child from an unsuspected hereditary illness.

It should be noted that the risk of chromosomal abnormalities increases with the age of the donor, and that there are higher miscarriage rates and lower successful implantation rates in higher age groups for recipients.

All recipients are strongly encouraged to consult with PIVET's Genetic Counsellor, prior to a treatment cycle where donated eggs are being utilised.

## 6. Donor Implications Counselling

Counselling is provided from PIVET's Fertility Counsellor who has experience in all aspects of infertility and reproductive health issues. It is PIVET policy that all egg donors (and partner if any) and all recipients accessing unknown donor eggs have at least one counselling session to consider the implications for them and the donor conceived child. Follow up counselling can also be arranged if required.

Attending Counselling prior to donating gives potential donors the opportunity to discuss and explore:

- their motivation for donation
- the impact donation may have on their family (and other children if applicable)
- how they may feel if the donation is successful / unsuccessful
- the release of their identifying information
- the impact on their own fertility and plans for having children in the future

Recipients are counselled so that any questions or concerns they may have regarding the legality of receiving donor eggs and their rights and responsibilities as a parent of a donor conceived child. They may have concerns in relation to the donor's rights after a donation has taken place and the Counsellor can answer any questions in relation to this.

Information regarding the medical, personal and social implications of caring for donor children is also available from:

- Reproductive Technology Council - <http://www rtc org au>
- Donor Conception Support Group - <http://www dcsg org au>

In the case of **known donation** all parties (donor & partner if any, recipient & partner if any) must attend counselling sessions at the beginning and conclusion of the mandated "cooling off" periods. On the same day, the donor (and husband/partner, if applicable) attend for a Counselling session followed by the recipient (and husband/partner, if applicable). At the completion of this second session, all parties then have a group session.

This commences the 3 months (90 days) "cooling off" period which must be observed for all "known" donation cycles. At the completion of the "cooling off" (i.e., after 3 months) the above sessions are repeated -

The "cooling off" period is a period required by the Human Reproductive Technology Act (HRT Act 1991) to be imposed prior to commencement of the donor's IVF treatment. It is three (3) months for egg donors (see HRT Directions 5.8 & Part 2, Schedule 4 and commences from the first counselling session). During this time the egg donor can decide to change their mind regarding the donation process.

## 7. Regulation and the law surrounding a child born from donor conception in Australia

The *Artificial Conception Act of 1985* protects the donor from any legal responsibilities or rights to any children born as a result of the donations, and any child born automatically becomes the legal child of the woman delivering or couple involved. This is the case for treatment of single women and couples (married, de facto, same sex).

There is also a requirement that the recipient of donor gametes or embryos return to PIVET (or mutually agreed pathology lab) to have a pregnancy test performed following the completion of a donor (egg, sperm or embryo) treatment cycle. This is important as regulations require that PIVET, as well as the Reproductive Technology Registers held by the WA Health Department, keep track of all pregnancies from donor gametes or embryos.

In relation to a child born as a result of donation, all records are confidential to the clinic and the Reproductive Technology Registers held by the WA Department of Health and identifying details are kept securely. The care of the child is the legal responsibility of the couple who consent to the donation procedure, and the husband or partner (in a de-facto situation), if any, is the legal father/parent of the child.

Confidential identifying and non-identifying information about all donors, recipients, and children born as a result of donor treatment is supplied to the Reproductive Technology Registers held by the WA Department of Health <http://www.rtc.org.au>. Under the Human Reproductive Technology Act (1991) Amendment 1, December 2004 any child born as a result of egg / sperm or embryo donation, on reaching the age of 16 years, will have access to identifying information about the donor, following approved counselling. This process may be facilitated by the Reproductive Technology Unit and clinics.

For children under the age of 16 years each donor and recipient need to consent to sharing identifying information and the parent needs to consent on behalf of the child. There must be counselling of all parties (which may include the child).

All parties involved in donor conception (donors, parents of donor conceived children and donor conceived children over the age of 18 years), can register with Jigsaw DNA Connect where they may be able to access identifying information. Accessing information through Jigsaw will depend on whether the other parties are also registered and their instructions on information to be made available. The website for Jigsaw: [jigsawdna.org.wa](http://jigsawdna.org.wa)

## 8. Commonly asked questions & Extra Information

### What is involved emotionally in choosing a donor?

Choosing a donor is one of the most challenging decisions you will ever make and for couples, that your child will be genetically related to only one of you.

- Give yourself time to grieve your loss of a genetic connection to your child.
- Give yourself time to move forward and appreciate the options available through medical procedures.
- Take the time to realize that you (and your partner) are creating a child who is unique to your family and would not be created if not for your love for each other.
- Remember that blending the genetics of any two people will bring an unpredictable outcome in a child, a child that will be cherished regardless of hair colour or sporting achievement.
- Read about the characteristics of the donor and choose someone you can relate to and feel positive about. Choose someone who feels like a fit with your family.
- For couples, it is important that your choice of donor is mutual.
- Make sure you are comfortable going ahead with treatment – there is extra counseling available should you feel you need it.

### **How are the eggs collected?**

The IVF treatment cycle will be discussed in an appointment with the Fertility Specialist and a stimulation protocol written ready for a treatment cycle where the eggs will be collected. A treatment cycle commences on Day 2 of the donor's menstrual cycle.

Stimulation continues by daily injections and around Day 14 of the treatment cycle from commencing the eggs may be ready for collection. A light anaesthetic is administered in the day procedure unit and the eggs are collected from follicles in the ovaries by flushing with special fluid under ultrasound guidance.

Once the eggs are collected, they are cryopreserved (frozen) and kept in quarantine for a minimum of three (3) months. At the end of the quarantine period the egg donor is contacted to have a final blood test and if the results satisfy quarantine requirements the eggs are made available for donation. The three-month re-screening is to test for a group of infectious diseases which have up to a 3-month incubation period.

### **Can I be paid as an egg donor?**

It is illegal to pay for the donation of human material, therefore all donations must be of an altruistic nature. PIVET Medical Centre realises that considerable time, effort and inconvenience is required for donors to participate in the unknown donor program and therefore we are permitted to provide reimbursement of verifiable out-of-pocket expenses in line with NHMRC guidelines. Any unexpected accounts (e.g., Anaesthetist's account) received by unknown donors should be directed to the Donor Co-ordinator for action. All expenses incurred during a known donation cycle will be the responsibility of the recipients. Where possible, Medicare rebates will apply, but please be aware if the donor does not have a Medicare card that costs could be considerable.

### **What is involved in becoming a recipient of donor eggs?**

Becoming a recipient of donor eggs involves attending a series of appointments with the IVF specialist, the Counsellor and Donor Co-ordinator to understand the procedures and processes involved.

At the medical appointment, the recipient's medical history is reviewed, screening and hormone blood tests arranged, the process is explained, and consent forms signed. Egg recipients and their partners must have blood tests and any further genetic testing if required.

If using known donation, then the egg donor's quarantine period and "cooling off" period must be completed before treatment proceeds. With unknown donation, the donor eggs will be available once the selection of an egg donor is made, and the quarantine period completed. Following selection of unknown donor eggs, the recipient is logged against the donor profile. In Western Australia the Directions of the Reproductive Technology Act applies a 5-family limit to all donations. This means that only 5 "families" can be created from each egg donor.

Recipients of donor eggs must meet with the Counsellor to discuss the implications of using donor eggs. This is an opportunity to consider all the issues and implications associated with the decision to be involved in the donor program and to make an informed decision.

A further meeting with the Fertility Specialist will follow to discuss the process and embryo transfer procedure.

The Donor Co-ordinator will arrange any further medical and counselling appointments as they are required and explain to the recipient how to commence treatment.

### **What are the costs involved in receiving donor eggs?**

All out of pocket costs expenses (including treatment) for known donor eggs are paid by the recipient(s).

The cost of receiving unknown donor eggs is not included in the treatment cycle fee.

Please ensure that you arrange a meeting with the finance department, so you are fully aware of the costs involved prior to commencing a treatment with the clinic.

### **Can I request transport or transfer of the donor eggs to another clinic to continue treatment?**

If the donor eggs are from a known donor, then the transfer to another clinic in Australia can be facilitated by the recipient contacting the chosen fertility clinic to receive the donor eggs to inform them of the transfer. PIVET will need to be notified at the same time so release forms can be arranged and signed.

The laboratory at PIVET will then liaise directly with the clinic to organise the transfer. The costs of transporting to another clinic are paid by the recipient. Please speak to the finance department so you are fully aware of the costs involved in transport.

If the donor eggs are from an unknown donation and a pregnancy has been achieved, then only "sibling" embryos for that recipient will be permitted to be transferred to another facility. Eggs from an unknown donor that have not been fertilised will not be released from PIVET to another clinic.

### **What are the legal requirements for transportation of donor eggs outside Australia?**

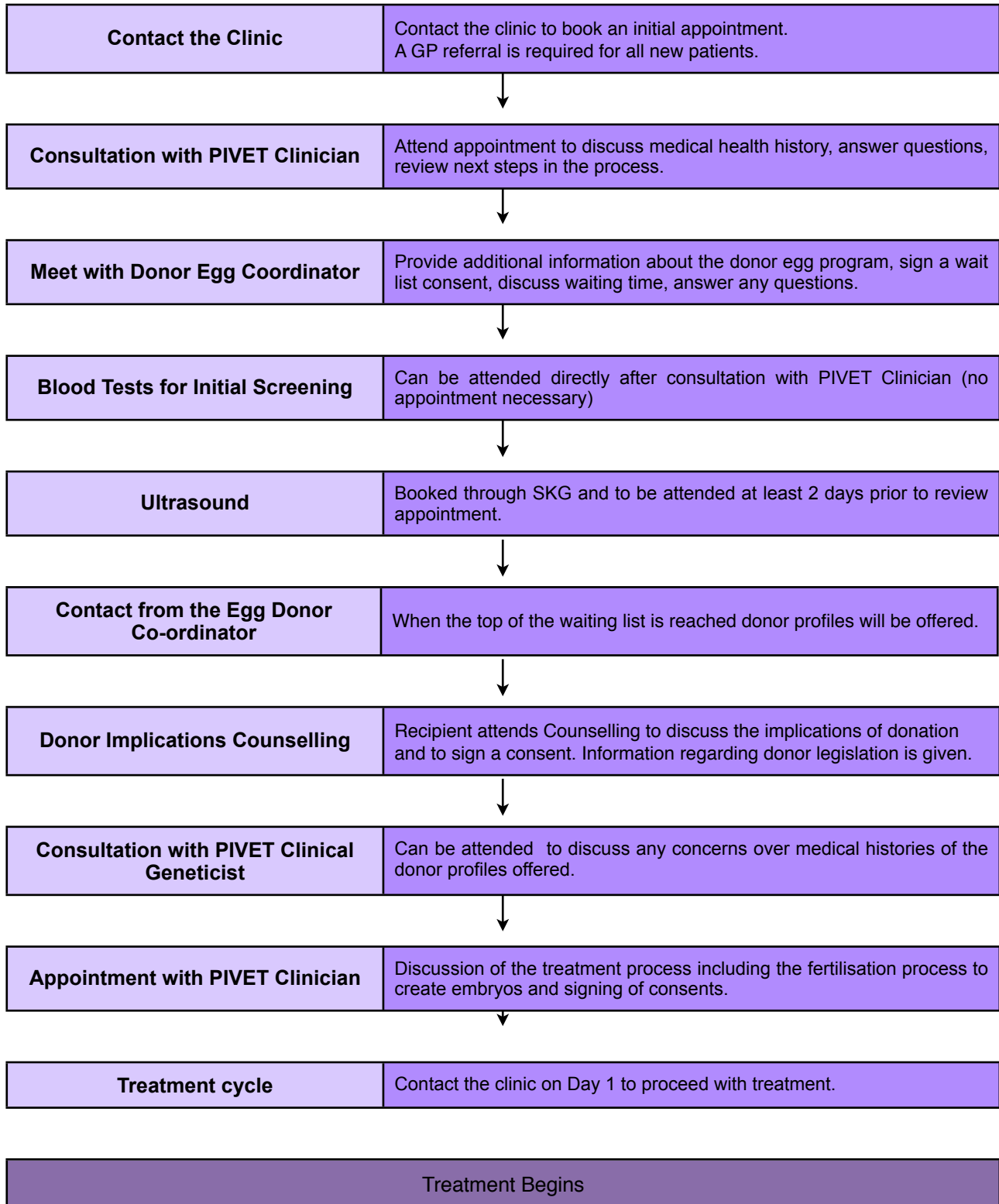
An international clinic also needs to be nominated so that arrangements can be made between PIVET and the nominated clinic. Appropriate international couriers need to be appointed so that declarations and paperwork can be signed before transportation.

The requirements of the Human Reproductive Technology Act (1991) impose certain conditions on the transfer of donated eggs as follows: -

- information about the use and outcome of the donation.
- Consenting must be completed by all parties prior to treatment and copies of consents available.
- Counselling must be undertaken by all parties prior to treatment with associated reports.
- Donor Identifying information must be provided to the receiving clinic.
- The donor eggs cannot be used in a Surrogacy treatment.
- Application for a birth certificate and Australian requirements for registration of a birth need to be clarified for any child born from donation.

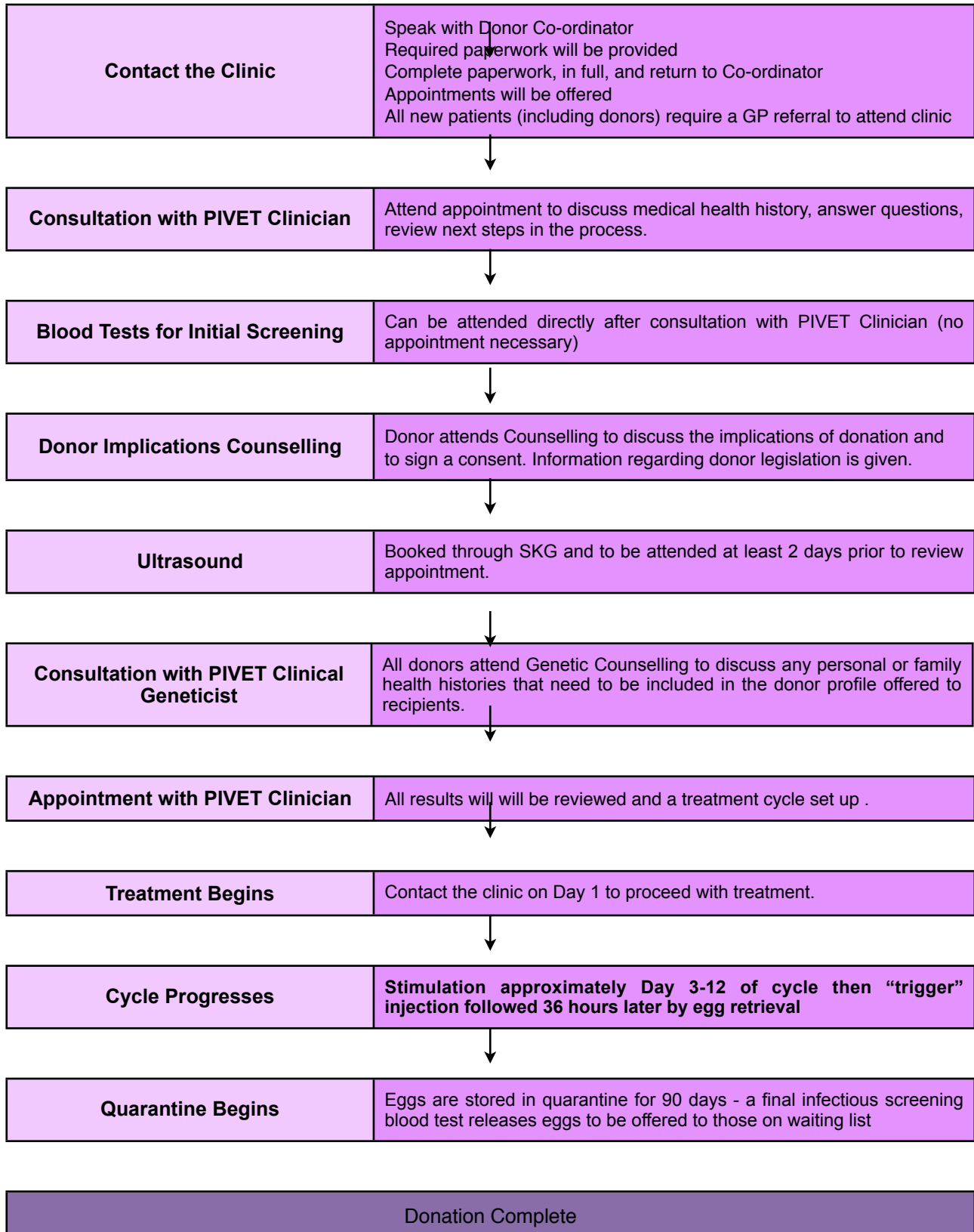
All the conditions need to be documented together with approval from the Reproductive Technology Council for the export of donor eggs for a patient's use in an overseas clinic.

## Patients Preparing for Treatment with Unknown Donor Eggs (Recipient)

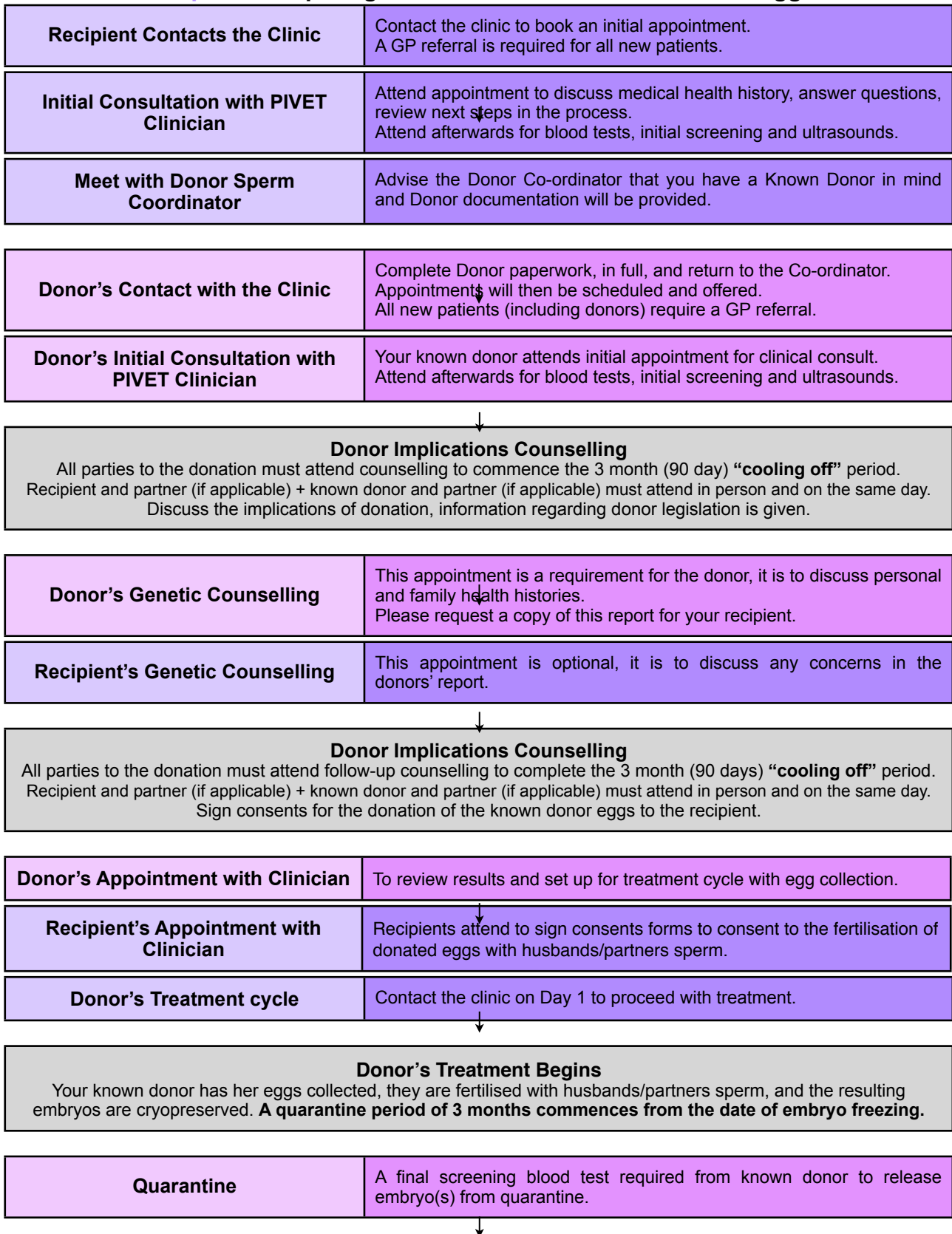




## Preparing for Treatment - Unknown Donor Eggs (Donor)



## Recipients Preparing for Treatment with Known Donor Eggs



<b>Appointment with PIVET Clinician</b>	When embryos are cleared from quarantine, Clinician can set up a FET treatment cycle with signing of treatment consents.
<b>Treatment cycle</b>	Contact the clinic on Day 1 to proceed with treatment.
<b>Recipient's Treatment Begins</b>	

## 9. References

- **WA Reproductive Technology Council**

[www.rtc.org.au](http://www.rtc.org.au)

Information about relevant WA legislation, including the Donor Register and access to identifying information for donor conceived persons.

- **Victorian Assisted Reproductive Treatment Authority**

[www.varta.org.au](http://www.varta.org.au)

Victoria's legislation is different to WA's, however, this website provides some very useful resources, including the publications: *Why, when, and how to tell children about donor conception*; Kirkman, M. et al. *Telling It Your Way: A Guide for Parents of Donor Conceived Adolescents*, and the webinar "*Time to Tell*".

- **Donor Conception Support Group**

[www.dcsq.org.au](http://www.dcsq.org.au)

Australia wide internet-based support group for donors, recipients, and offspring; has various publications available for purchase and identifies other activities and resources.

- **Rainbow Families**

[www.rainbowfamilies.com.au](http://www.rainbowfamilies.com.au)

Internet based support group for same-sex couples/parents, mainly based on the East Coast. Variety of activities, resources, and special interest groups etc.

- **Solo Mothers by Choice**

[www.smcaustralia.org.au](http://www.smcaustralia.org.au)

Internet based support group; based on the USA group, *Single Mothers by Choice*. State-based activities/social meetings.

- **Assisted Reproductive Technology: Books for Children**

<http://booksfordonoroffspring.blogspot.com>

Lists and reviews a wide range of books for parents and children which explain assisted reproduction, includes IVF, egg /sperm and embryo donation, surrogacy, adoption, gay/single and heterosexual parents, and includes books in languages other than English. Updated regularly.