Specialists In Reproductive Medicine & Surgery, P.A.

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Excellence, Experience & Ethics



Egg Recipient General Information Southwest Florida Egg Donation Program

How do I know if I am a candidate for the egg donor program?

Women without adequately functioning ovaries, a history of genetic diseases or women above the age of 40 may benefit from receiving donor eggs (i.e., become an "egg recipient"). In order to decide if you are a candidate for the program, you will be asked to forward all your medical records, laboratory tests, copies of prior operative procedures, radiology X-rays such as the hysterosalpingogram and any pertinent information on the evaluation of the husband prior to being seen by *Specialists in Reproductive Medicine & Surgery, P.A. (SRMS)*. Both the patient and partner will be encouraged to attend the first interview. Depending upon the age of the recipient, additional testing including an EKG, treadmill, psychological evaluation, mammogram, vaginal ultrasound and screening blood tests may be requested. Medical conditions such as diabetes and other significant medical problems may exclude an individual from becoming an egg recipient.

Who are the egg donors?

There are two major types of egg donors. The first is a "Non-Anonymous Egg Donor". The non-anonymous egg donor is usually a friend or relative of the recipient. While certainly possible, this form of egg donation is usually discouraged. Your physician will address the reasons for concern.

The second type is an "Anonymous Egg Donor". This is the most common type of egg donor. These egg donors are women who have offered to donate their eggs anonymously with reasonable reimbursement. The anonymous donors are obtained through advertisement and word-of-mouth. Many of these egg donors have had friends or relatives who have experienced infertility.

Highly Desired Donor Qualifications	Absolute Donor Contraindications
☑ 18 to 31 years of age	☑ Less than 18 and greater than 40 years of age.
☑ Completed childbearing	☐ Family history of significant genetic diseases
✓ No family history of genetic diseases	☐ History of active sexually transmitted disease
☑ No history of sexually transmitted diseases	☑ Partner does not agree to the procedure.
☑ Partner agrees to the procedure	

All egg donors will undergo an intensive screening process including a history and physical exam, a detailed genetic history and extensive laboratory testing for communicable diseases. A urine drug screen and psychological evaluation is also mandatory.

How will I get to choose my egg donor?

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You will choose your egg donor. General characteristic such as race, eye/hair color, height/weight, blood type, educational background and general interests are often used to find your donor. An up-to date Egg Donor Database can be obtained at the SRMS web site:

http://www.dreamababy.com/egg-donation-surrogacy-program.htm

Am I at a greater risk during my pregnancy if I am older than most pregnant women?

If you are in good general health, the risks for carrying a pregnancy later in life are minimized. Older pregnant women do seem to have an increase in the incidence of the following:

- ✓ C-Section (Surgical Delivery)
- ☑ Hypertension (High Blood Pressure)
- ☑ Placental Infarcts (damage) leading to smaller gestations and placental abruption
- ☑ Placental previa where the placenta blocks the exit of the fetus requiring a C-Section.

While exceedingly rare, the mortality rate for pregnant women over the age of 40 reaches 80 per 100,000 women compared to 20 per 100,000 women at 30 years of age.

The risks of genetic abnormalities, such as Down's syndrome, are proportional to the age of the egg donor and not your age. The age of your uterus does not seem to play any significant role in your ability to sustain and carry a pregnancy.

This general area of research continues to develop and the potential egg recipient needs to understand that she may be considered high risk simply because of her age.

What has to be done in preparation for the actual embryo transfer?

SRMS will suggest a specific protocol that is tailored to your current medical state. In general, if you are still ovulating, a medication will be given to inhibit the ovulation process. Supplemental estrogen and progesterone will then be administered most commonly through injections such that the hormonal cycle is carefully mimicked and controlled. This careful control of the cycle is necessary so that the donor and recipient cycles are matched precisely and that the freshly fertilized eggs may be implanted in the recipient's uterus.

What are the success rates?

The overall statistical success rates vary from program to program. Please visit the following locations for additional information to answer this very important question:

Egg Donation Statistics	http://www.dreamababy.com/stats-egg-donation.htm
General SRMS ART Statistics	http://www.dreamababy.com/stats-srms.htm

What are the potential liabilities?

The recipient couple will be responsible for any reasonable hospital/physician charges incurred by the donor for complications associated with the egg donation process. The most common complication of

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the process involves overstimulation of the ovaries called Ovarian Hyperstimulation Syndrome (OHSS). Please review the Egg Donor Packet for specific details. OHSS can result in hospitalization and prolonged treatment.

The complications of the egg retrieval process itself are less than 1%. Rarely, a surgical complication such as infection or bleeding could require hospitalization and an emergency laparoscopy on the egg donor. Every attempt would be made to have the process covered on the egg donor's insurance policy, but any unpaid balance will be the responsibility of the recipient couple.

The staff at SRMS will do everything possible to prevent all complications from occurring to any patient, especially egg donors. The cycle will be canceled if we feel the risks to the donor are too great.

Inadvertent Consanguinity:

It is theoretically possible that an egg donor could donate enough times to statistically increase the risks of half-brothers and sisters (same egg donor mother but different fathers) could meet and reproduce.

According to existing guidelines, it is recommended that we limit a single donor from producing no more than 15 offspring per 500,000 population. We here at SRMS limit a single donor to no more than six successful donated offspring. Please recall that we here at SRMS cater to a large population conservatively estimated at over 1,000,000 throughout Southwest Florida, not including other states and countries. According to guidelines, we could easily have over 30 offspring per egg donor before retiring the donor.

Transmission of Infections:

The donor and recipients undergo exhaustive evaluation of potentially transmittable diseases. It should be recalled that the egg donor is only donating a dozen or so single cells (eggs) and that the transmission of diseases requires a certain level of inoculum well beyond these numbers. The transmission of any diseases from a donor to a recipient is a very rare event and it is uncertain if it has ever happened in the past. That stated, the potential for transmission of currently known and unknown diseases is theoretically present. To keep perspective, it is far more likely the egg recipient will have exposed herself to a much greater inoculum and risk of infection through past and current sexual partners. In summary, the probability for transmission of disease is quite remote and is minimized through careful laboratory testing of the egg donor.

Do the egg donors have any legal rights to the offspring?

Although both State and Federal laws frequently change, there are no parental rights of the egg donor to the offspring from egg donation here in the state of Florida. Florida is a particularly ideal location for egg donation and surrogacy. Please review the following web site for additional information:

http://www.dreamababy.com/fl-safe-haven.htm

Summary:

Egg Recipient General Information (cont.)

The egg donor program is a wonderful opportunity for a couple who desire a child but who have a decreased reserve of healthy eggs. The program is often the only hope for such couples.

Key References:

Repetitive Oocyte Donation, ASRM Practice Committee Report, A Committee Opinion, 11/2000. [Web site location: http://www.asrm.org/Media/Practice/oocyte_donation.pdf (requires Adobe Acrobat Reader)]

American Society for Reproductive Medicine. Guidelines for gamete and embryo donation. Fertil Steril 1998;70:5S-13S.