

What is Oocyte Donation?

This is the gift of oocytes (eggs) from a donor to a recipient in order to assist the recipient in achieving a pregnancy. The oocyte donor has to go through a routine IVF cycle, have eggs collected and then these oocytes will usually be fertilised with the recipient's partner's sperm to generate embryos. When indicated donor sperm can also be used.

The embryos that are formed become the property of the recipient(s) and will be transferred to her uterus when appropriate. Embryos not used can be cryopreserved (frozen and stored). Embryos generated with donor egg and or sperm can only be used by the recipient and if any excess occurs these cannot be on donated to other recipients.

Who needs donor oocytes?

Approximately 1:35 women of reproductive age who wish to reproduce will require egg donation.

The reason for this includes:

- Premature menopause, no oocytes left in the ovaries
- Presence of poor quality oocytes
- Absence of ovaries or eggs (could be due to genetics, radiation, disease or surgery)
- Hereditary disorders that cannot be detected or treated.

Once one of these conditions have been diagnosed the female partner has one of three choices:

- Not to have any children
- Consider adoption however waiting lists are often very long
- Consider the use of donor oocytes.

Oocyte donation has the advantage that a pregnancy can be shared by the couple and half the genetic makeup comes from the male partner. The shared experience starts with the excitement of the missed period, the diagnosis of pregnancy and continues throughout the pregnancy, climaxing with the delivery of the child.

Unfortunately Oocyte Donation cannot protect the expectant mother from the complications of pregnancy and childbirth. Women who have children by oocyte donation have exactly the same risk of an abnormality in their children as those who conceived naturally. There is no decrease or increase in the risk of congenital abnormality.



CLINIC HOURS

Monday to Friday - 8.00am to 4.30pm

Saturday - 9.00am to 1.00pm

All appointments

02 9389 1177

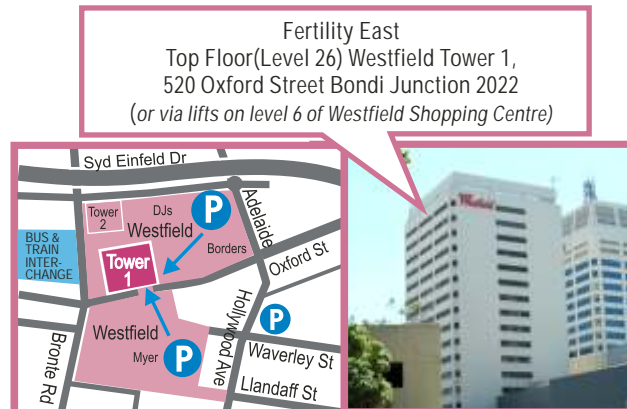
BLOOD COLLECTION HOURS

Monday to Friday - 8.00am to 9.30am

Saturday - 9.00am to 10.30am

No appointments necessary

Results Mon-Fri between 1pm and 3pm



Fertility East
Top Floor (Level 26) Westfield Tower 1,
520 Oxford Street Bondi Junction 2022
(or via lifts on level 6 of Westfield Shopping Centre)

- 1 minute walk from Bondi Junction Bus Terminal and Train Station
- 2hr free parking in Westfield

Our success is your baby

Level 26, Westfield Tower 1
520 Oxford Street Bondi Junction NSW 2022
PO Box 345 Bondi Junction NSW 1355
Tel: (02) 9389 1177 Fax: (02) 9387 8580
admin@fertilityeast.com.au
www.fertilityeast.com.au

Fertility Australia Pty Ltd A/T/F The Fertility Australia Trust
ABN 22 482 157 084

Oocyte Donation...The facts

11



Assisted Conception Clinic

Oocyte Donation

The facts...

02 9389 1177

Our success is your baby

www.fertilityeast.com.au

Assessment of Oocyte Donors

The selection of oocyte donors is complex. It is also governed by legislation that may vary from state to state. This brochure is applicable to New South Wales.

Ideally potential oocyte donors need to be between 18 and 35 years of age preferably having completed their own family.

The donor will be seen by the Fertility Specialist who will discuss the medical issues and the Oocyte Donation IVF procedure. Prospective donors must provide a full personal and family medical history and answer questions specifically about activities associated with risk of (HIV) AIDS infection. The specialist doctor will examine the donor, review the family medical history and ensure the donor is in good health. Blood tests for hormone levels, HIV, Hepatitis B, C, HTLV 1 & 2, Syphilis and Chlamydia antibodies, Blood group and Rh and any other indicated investigations that are required.

When the Infertility Specialist has initially approved the donor, the donor and partner (if applicable) are then required to attend counselling sessions to ensure complete understanding about what is involved and the legal and moral issues associated with becoming an identifiable oocyte donor.

Identifiable implies that once the child of the donation reaches the age of 18 years, he or she can obtain identifying information about the donor from the clinic and establish contact with the donor if need be.

The counselling reports are sent to the managing Infertility Specialist for review and are part of the approval process.

A 4-month cooling off period from the initial consultation with the specialist is required before the oocyte preparation, collection and donation process can take place. Consent forms have to be signed before the oocyte cycle can begin by the donor and partner.

Sources of Oocyte Donors

Donors may be known to the recipient either being family members, friends or people who have answered an advert placed by the recipients.

Occasionally donors are anonymous coming forward after reading an article and will not be known by the recipient(s). These donors tend to be very rare.

Studies indicate that the most common characteristics donor's possess are their desire to help others.

Irrespective of their origin all donors need to be identifiable by law.

Occasionally patients will seek donors overseas, a topic not dealt with by this information sheet, but information available at: www.donoreggsaustralia.com.au

Oocyte Collection

Once all the prerequisites have been completed the donor undergoes a stimulation programme using hormonal medication (including a period of daily injections) to produce a number of follicles (which normally contain eggs). These are collected in a Day Surgery operation called "Oocyte collection". All out-of-pocket expenses are to be met by the recipient couple. See the explanation of fee sheet.

All the collected oocytes are fertilised with the appropriate recipient's sperm and the good quality embryos generated are frozen and stored for use by the recipient(s)

6-Month Quarantine Period of Embryo Storage

RTAC (Reproductive Technology and Accreditation Council) recommends that donated gametes (sperm) and embryos be stored for a 6-month quarantine period. It is the policy of Fertility East to follow this RTAC recommendation.

Embryo Transfer and retesting

Once the quarantine is over we can plan for embryo transfer. The embryo transfer cycle either involves monitoring the recipient's natural cycle or by hormonal preparation of the endometrium. Your Fertility Specialist will discuss this decision. The actual embryo transfer is a simple procedure, taking place in our transfer room and is rather like a PAP smear.

If no pregnancy results further transfer cycles can occur, often back-to-back, provided frozen embryos remain.

Selection of Donors

In the case of anonymous donors non-identifying information about the donor is available. This information includes race, ethnic origin, height, build, hair and eye colour and blood group. Where possible and if required recipients can be provided with oocyte donors whose characteristics most closely resemble the female partner. Unfortunately the lack of availability of oocyte donors usually makes close matching very difficult.

Consent and documentation must be read and clearly understood before accepting this type of treatment.

Decision Making

In our society there are many differing ways to form a family. Oocyte donation is one option however the decision may not always be straightforward or acceptable to all parties concerned.

Your fertility specialist and counsellor as well as our dedicated nursing staff are all available to assist you with information and advice so that you are able to reach your decision based on informed consent.

In addition to the mandatory counselling our clinic counsellors are available for additional counselling at any stage of the process up to an including difficulties which could arise after the child is born.

Known Donors

Some recipients will provide their own known donor and in these circumstances the donor and partner if applicable will have to consult with the Fertility East specialist, undergo the necessary blood tests and screens, provide the relevant lifestyle declarations and sign the appropriate consents and complete counselling sessions with our counsellors. The final counselling session will involve the recipient and partner (if she has one) as well as her donor and partner (if she has one). Irrespective of whether a donor is known or anonymous the donor's details will need to be made available to the child born of such a donation when the child reaches 18 years of age.

Waiver of Known Donor Quarantine Period

Where the known donor and recipient have been associated with each other for some time (sister, cousin lifelong friends) and provided the donor has been tested and found to be well the recipient(s) can sign a quarantine waiver document acknowledging the potential for an unknown risk and the donor will still need to have her follow up blood tests in 6 months for the file record.

Oocyte donation- implications and considerations for the child, parents and donor

- Does a child have a right to know about his or her origins?
- Are there inherent dangers in attempting to keep Oocyte
- Donation a secret from the child or the family?
- Logistical difficulties in co-ordinating treatment cycles
- Australian law prohibits recipients for paying for oocytes.
- The NSW Children's Act 1966 determines that a child born of gamete donation is considered the legal offspring of the recipient(s)
- Fertility East cannot provide legal advice so any queries should be directed to your legal advisor
- Occasionally oocyte donors may elect to share oocytes between more than one recipient.
- Egg sharing as defined by a patient on an IVF programme for infertility cannot donate spare eggs from that cycle to a recipient.
- Future fertility of the donor (rarely affected)

Further Information

For all appointments & enquiries:

02 9389 1177

