Using a donated embryo is a 'last chance' scenario for many people who find themselves reading this fact sheet, but it is also a time for cautious hope. This fact sheet explains the considerations and treatment processes involved in using donated embryos.



#### THE FACTS ABOUT:

# Treatment with donated embryos

## Finding a donor embryo

If you know a couple who are willing to donate embryos to you, we can arrange everything for both you and your donors.

Life Fertility Clinic is occasionally contacted by patients who are willing to be anonymous embryo donors. These are often patients who have completed their family or who do not want further treatment but have frozen embryos remaining in storage.

Once all the necessary preliminary steps have been completed, profiles for these donors will be offered to patients on our embryo donor waiting list.

Please advise our Nurse Coordinator if you wish to be put on this waiting list.

# Getting started

If you plan to have treatment using donated embryos, this is an outline of some of the preliminary steps that will be involved:

- You will need a referral from your GP if you are not already a patient of Life Fertility Clinic.
- You must make an appointment for a consultation with a Life Fertility Clinic specialist who will review your history and recommend treatment that is best suited to your circumstances
- You must attend an education session with our Nurse Coordinator who will arrange any blood tests and go through the consent forms with you.
- You (and your partner if you have one) should attend a minimum of two counselling sessions (mandatory) to discuss the implications of being a recipient of donor embryos.

If you know a couple who are willing to donate embryos to you, they will also need to have a consultation with one of our fertility specialists and to attend a nurse education session. These appointments can be jointly with you or at separate appointments.

There are some other preliminary requirements (such as blood tests) that will need to be met and they will also need to have two counselling sessions. You will all also need to attend an additional joint counselling session.

Life Fertility Clinic will arrange for anonymous embryo donors to complete all counselling, blood tests, consents and other documentation before offering them to patients on the donor embryo waiting list.

#### Counselling

You (and your partner, if you have one) must attend a minimum of two confidential counselling sessions with a Life Fertility Clinic counsellor. These sessions give you a chance to explore whether being a recipient of donated embryos is for you. They also give us a chance to get to know you and make sure you fully understand your rights and the situations that could arise in future as a result of your treatment.

Most recipients appreciate the opportunity to talk through their decisions and how this may affect their life and that of their family now and in the future.

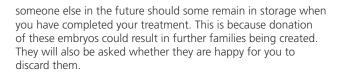
If you know your embryo donors, you will also be required to have a joint counselling session with them as well.

You can decide not to go ahead as a result of these sessions or, if we have any concerns, we may suggest you defer or do not go ahead with treatment.

### Legal issues

Once a donation agreement is in place, you the recipients become responsible for the embryos in storage. This point is reached when: all preliminary requirements including counselling have been completed by everybody involved; the donor(s) have completed their consent to donation; and you the recipient(s) have completed your consent to receive donated embryos.

Although it might seem a long way in the future when you are accepting embryos for donation, it is important to be aware that the embryo donor(s) will be asked in their consent forms whether they are happy for you to donate the embryos to



In addition, if the embryos were originally created using donated eggs or sperm, or they were previously donated to your donor, the donors may have also given instruction about the number of families that can be created that you should be aware of.

Your Life Fertility Nurse coordinator will summarise all of this information about your embryos for you, so that you are fully informed of your donor's consent about all of these issues and you can in fact decide not to accept the donation if needs be.

Embryo donors can still change or withdraw their consent to the donation at any time up to the time of embryo transfer. However, once this point in treatment has been reached, all rights and responsibilities with regard to any pregnancies, or any legal responsibilities for any child born, lie with you (and your partner).

As a recipient of donated embryos, regardless of whether the donors are known to you or not, you (and your partner with whom you embarked on treatment) are the legal parent(s) of any child born as a result of the treatment. You (and your partner) are named on the child's birth certificate

All embryo donors must consent to their identifying information being held with Life Fertility Clinic. When a child conceived using donated embryos reaches 18 years old, they are entitled to ask Life Fertility Clinic for the donors identifying details.

The donors may also ask for non-identifying details about who has received their embryos and the number and gender of any children born.

It is a licensing requirement for Life Fertility Clinic that the number of families created from any egg, sperm or embryo donor is appropriately limited. For both known and anonymous donors, it is Life Fertility Clinic policy that all donors are limited wherever possible to creating no more than five families (in Queensland) including their own.

# Do I need to pay my embryo donors?

No. It is illegal in Australia to receive payment for embryo donation.

As the recipient, you may choose to cover their reasonable out-of-pocket expenses of the donors that are associated with the donation.

# Treatment using donated embryos

All donated embryos are already frozen so all treatment using donated embryos involves a frozen embryo transfer cycle for the recipients.

Separate fact sheets are available about Freezing and Frozen embryo transfers.

Once you have completed all the necessary pre-treatment testing, counselling and consents, you can expect the following treatment sequence:

#### Stimulation and monitoring phase

As all donor embryos are already frozen, there is no need to match cycles with a donor as we do with egg donation. As the woman receiving the donated embryo, you will begin with a hormone regime (Progynova tablets) that thickens the lining of the uterus.

When you have been on the hormone tablets for 10 to 12 days, your IVF specialist will do an ultrasound scan to measure the thickness of the uterine lining. This scan uses a vaginal probe which is painless, lasts for only a few minutes and does not need a full bladder.

We aim to give your uterus a lining of the right thickness to create the best environment for an embryo to implant. If the scan shows that the developing lining needs further adjustment, the IVF specialist will change your hormone medication, you may need to book for a another scan and you may be advised to start taking progesterone. You must continue all hormone medication until advised to stop.

#### Thawing the donor embryos

When your uterine lining has almost reached the appropriate thickness, the laboratory will be instructed to thaw the frozen embryos. The stage at which the embryos were originally frozen will determine the timing of embryo thawing relative to your transfer and to ensure that they are in synchrony with the uterine lining.

It is common practice for the IVF specialist to recommend that embryos are grown to the blastocyst stage before transfer, if not already frozen at that stage. Depending on the stage the scientist may therefore culture the embryos for two to five days to ensure they develop normally to the blastocyst stage before transfer.

#### **Embryo transfer**

The embryo transfer is done via the vagina. Your specialist will place a speculum into your vagina (as for a pap smear), insert a small catheter through your cervix into your uterus, and transfer the embryo through the catheter. This process does not need sedation.

On the day of embryo transfer, your Life Fertility Clinic Nurse Coordinator will give you instructions to continue the hormone and progesterone medication and will tell you when to have a pregnancy (quantitative hCG) blood test.

It is unlikely that you will experience any problems after the embryo transfer but if you experience abdominal discomfort similar to period pain, you can take paracetamol. If for any reason you experience excessive abdominal pain, bleeding, or feel faint, please contact Life Fertility Clinic.

#### Follow up

Please have your pregnancy blood test on the recommended day because earlier tests can give inaccurate results.

Your blood test results will be forwarded to Life Fertility Clinic and our Nurse Coordinator will contact you with the outcome of your pregnancy test.

If your pregnancy test is positive, you should continue your hormone and progesterone medication and repeat the pregnancy blood test in a few days to monitor hormone levels. You should also make an appointment with your IVF specialist for your first pregnancy scan.



If your pregnancy test is negative, we will advise you to stop all hormone and progesterone medications. A negative result is always extremely disappointing for all concerned and we encourage you to take advantage of a free counselling session if you need to talk to someone who understands the things you may be feeling.

When you are ready, make an appointment with your IVF specialist to review your treatment and discuss any further possibilities.

# How successful is treatment using donated embryos?

The chance of pregnancy depends on a number of factors, including the stage at which the embryos were frozen, the methods used for cryopreservation and, most importantly, the age of the woman (whose eggs were used to create the embryos) at the time the embryos were frozen.

If an embryo vitrified at the blastocyst stage is thawed and transferred, it has approximately the same success rate as a fresh embryo.

There is no evidence that frozen and thawed embryos result in a greater number of miscarriages or abnormalities.

# Things that can go wrong during a donor embryo cycle

Despite the great care our embryologists take at every stage, there are risks of damage to embryos in the freezing and thawing process.

Some embryos (or possibly all embryos) will not survive the freezing and thawing process if cells are damaged. Frozen embryo survival rates are more than 90% if embryos are frozen by 'vitrification' at the blastocyst stage (5-6 days after fertilisation). If they are frozen at the earlier stages by 'slow freezing', approximately 80% survive the freezing and thawing process.

Sometimes when we thaw embryos frozen at earlier stages and culture them to the blastocyst stage in the laboratory, they may initially survive but stop developing. Sadly, this can mean there are no healthy embryos to transfer.

The embryologist will immediately let you know the result of the thawing process and how many embryos are viable.

### Support groups

#### **Australian Donor Conception Network**

Email: donorconceptionnetwork@gmail.com Website: www.australiandonorconceptionnetwork.org

The Australian Donor Conception Network is a self-funding organisation run by volunteers and has been in existence since 1993. The membership is made up of people considering or using donor sperm, egg or embryos, those who already have children conceived on donor programs, adult donor offspring and donors.

#### **Access**

Email: info@access.org.au Website: www.access.org.au

Access is a consumer based, independent, non profit organisation committed to being a national voice in promoting the wellbeing and welfare of infertile people of all ages.

# Contact Life Fertility Clinic

The friendly and professional team at Life Fertility Clinic are eager to help and answer any questions about our donor program.