

## Embryo Donation - Information for Recipients

Fertility treatment with donor embryos can help many patients achieve their dream of having a baby. The decision to go ahead with treatment using donor embryos is sometimes difficult. There are often medical, ethical, religious and legal aspects to consider. As a patient, you and your partner, if you have one, will have a session with our counsellor to discuss the implications of donor embryo treatment for you and your family, before you consent to have treatment.

This leaflet aims to:

- Help prepare you for treatment with donor embryos
- Provide information about the law relating to donation and how it affects you
- Answer your questions about donors and treatment
- Encourage you to think about the issues that you might face

### Who could be the embryo donor?

Patients who have completed their family and have frozen embryos remaining in storage that they no longer wish to use for their own treatment. Patients who donate their embryos do so voluntarily because they wish to help others, no financial incentives are involved.

Embryo donors are aged between 18 and 35 (i.e. less than 36 years) and the sperm provider between 18 and 45 at the time the embryos were produced.

Embryos donors will have been investigated for their medical and personal history to ensure that there are no inheritable conditions that could be passed on to donor-conceived offspring. Donors are also screened for:

- Infections including HIV, HTLV, Hepatitis B and C
- Sexually transmitted infections like Syphilis, Gonorrhoea and Chlamydia
- Genetically inherited conditions, such as Cystic Fibrosis

Other tests may have been performed depending on a potential donor's ethnic group.

For general information about the current donor screening requirements see:

HFEA Code of Practice: [Code of Practice 9th edition – revised October 2023](https://www.hfea.gov.uk/9th-edition/)  
([hfea.gov.uk](https://www.hfea.gov.uk/))

## What are Embryo Donation and Anonymity laws?

Donors are selected very carefully and since April 2005 anyone donating embryos consents to being an *identifiable* donor. This means that at the age of 18, the person conceived from donated embryos, will be able to obtain certain identifiable information about the donors from the Donor Register held by the Human Fertilisation and Embryology Authority (HFEA). They may also be able to find out identifiable information about any donor-conceived siblings, on the basis of mutual consent.

These details will be held on a register at the HFEA and further information and application forms can be obtained from the website:

[Finding out about your donor and genetic siblings | HFEA](#)

## Who needs donated embryos?

There are a number of reasons why people need embryo donation, for example, you:

- May already require one form of donor gamete to conceive (sperm/egg) but for various reasons have decided to use donor embryos instead.
- May have had multiple failed cycles with their own gametes and wish to have treatment with donated embryos.

## How will I be matched with an embryo donor?

There is usually a waiting list for treatment. When donated embryos become available, we will contact you. In selecting a donor to offer to you, we take into account the information you have provided to us regarding your ethnicity and physical characteristics such as hair colour, eye colour, height etc. It is our policy to offer you donated embryos and to share with you non-identifying information that the donors have provided, if you wish to see it, before they are confirmed as a match with you.

Due to the current national shortage of donated embryos, there is limited choice for recipients. You do not have to accept the donated embryos we offer you, but you may have to wait again before alternative embryos become available.

## **What traits/ characteristics could a child inherit from their donor?**

It is very difficult to say what characteristics a child might inherit from their donors. It is likely that a child will bear some physical resemblance to their donors; however the genetics are very complicated with many different genes involved. Eye colour is one characteristic where inheritance follows a more predictable pattern, as there are very few genes involved. For example if you and your partner both have blue eyes, you would naturally only be able to conceive a blue-eyed child. Therefore a blue-eyed donor would offer an ideal match for you. However if either or both you and your partner have brown eyes, a naturally conceived child may still have blue-eyes. This is particularly true if your parents, siblings or grandparents had blue eyes. In this case blue or a brown-eyed donor could be a good match for you. As for personality traits and interests, these are far more a product of nurture than nature. For example if an embryo donor describes themselves as sporty, it doesn't mean a child would automatically be sporty too, it would depend on the environment he or she had been brought up in. The same applies for intelligence, which is strongly related to the opportunities, and education a child or person receives rather than genetics alone.

## **How many embryos will I receive?**

As part of your package you will be allocated a minimum of 2 donated embryos frozen at blastocyst stage.

## **What are the chances of success?**

Overall success rates for treatment with donated embryos can be found on the HFEA website. Your own chance of success will be influenced by a number of factors and may be different to the overall success rates. We will discuss your chances with you before you start treatment.

## **What is the risk of miscarriage?**

Approximately 1 in 5 of all pregnancies ends in a miscarriage. The risk of miscarriage increases as a woman gets older: often as women age, the quality of their eggs deteriorates and chromosomal abnormalities become more common. This is particularly apparent after the age of 35, which is why all our female donors must be under 36. It is important to remember that the risk of miscarriage is related to the age of the woman providing the eggs. You will have the same chance of miscarriage as any woman under the age of 36.

## **If I have a child, will I be able to use the same donor to create a sibling?**

If you have any remaining embryos, you may be able to use them in the future to create a sibling.

## **What does the treatment actually involve?**

### **1. Preparing your womb to receive an embryo**

We will aim for you to start your period (or have a withdrawal bleed if you have been taking the pill). During this time you will take oestrogen tablets to help thicken the lining of your womb in preparation for embryo transfer. You will be asked to attend the clinic for two internal ultrasound scans to monitor your progress. Once your womb lining has thickened we will be able to schedule you for embryo transfer.

### **2. Thaw and transfer**

Embryos are thawed according to your consent. We usually recommend transferring only one embryo at a time. The majority of the embryos tolerate freezing and thawing well, but some may not. We normally do not call you, but decisions to thaw more might be needed and therefore we ask that you are available on the day of thawing.

The transfer procedure is quick and simple and usually completely painless. The embryos are gently transferred into the uterus by using a fine plastic tube (catheter).

### **3. Hormone Support**

After the embryo transfer you will continue to take progesterone and oestradiol until the day of the pregnancy test. The lining of the uterus is normally supported with progesterone to help the embryo implant in the uterus. This is called luteal phase support.

### **Pregnancy Test**

16 days after your luteal day 0 (the day you started taking progesterone) you will be asked to take a home pregnancy urine test. You will need to call the clinic with the result. If the test is positive you will be booked for a pregnancy scan.

If the pregnancy test is negative this means that a pregnancy has not occurred this time. We realise that you may be very disappointed and the staff in the clinic are always available to offer support and advice. The counsellor is also available should you wish to have an appointment.

### **Pregnancy Scan**

You will be asked to attend for a vaginal scan about three weeks after your positive pregnancy test (this is equivalent to a seven week pregnancy). This scan is important to ensure that the pregnancy is in the correct place, that it is developing normally and

to confirm how many pregnancy sacs there are. At this stage, the pregnancy should be clearly visible inside the uterus as a small sac with a tiny fetus within. It should be possible to identify a heartbeat at this stage.

## **What can go wrong?**

Sometimes treatment has to be cancelled or delayed before it has even started, for example we find occasionally that the lining of the recipient's womb does not thicken adequately to receive an embryo. In this case we may recommend postponing the cycle to a new one a month or two later, where additional hormones can be given.

## **What advice and support will I get?**

As a recipient of donated embryos, you will be referred for implications counselling at the time you are added to the waiting list for treatment. If you are in a relationship, both you and your partner must attend the counselling session to ensure you are both fully aware of all the implications of treatment.

Implications counselling is a confidential session routinely provided for anyone considering treatment using donated embryos. The session gives you an opportunity to explore the short and long term implications of creating a family this way, for you and your partner, any child who may be conceived and anyone else who may be affected by the treatment.

You may already have gathered information from other sources and considered your decision carefully. However, counselling at this stage gives you a chance to talk through any anxieties you may still have and to ask questions in complete confidence before making a final decision. The session also provides you with an opportunity to explore how you will manage information about the donors in the future.

Counselling is available throughout your time at the clinic and you may return at any time in the future to see our counsellor if you have any issues concerning your treatment.

## **Donation and the law**

### **Is embryo donation anonymous?**

It is in the sense that you will not be given identifying information about your donors and you will not know who your donors are. However, a new law came into effect in 2005, giving donor-conceived people the right to apply for the following identifying information about their donor once they are 18 years old:

- Full name (and any previous names)
- Date of birth
- Town or district of birth
- Last known postal address (or address at the time of registration)

Not all donor-conceived people will want to apply for this information. However, you may want to think about how you would feel if they did. You should also consider how this could affect those close to you.

### **What can the donors decide about the use of their embryos?**

Although by law the donors can place conditions on who can receive their embryos, in practice, donors are unlikely to be accepted if they impose conditions (apart from donating to a named person/couple or limiting the number of families they wish to create). Complete Fertility has a duty to provide equality of opportunity to our donation programme and we need to ensure that any conditions imposed do not unfairly discriminate against a person or group of people.

### **How many children could be born from one donor couple?**

Each donor can by law donate embryos to create a maximum of 10 families, although only one or two couples will receive embryos per donation cycle. In practice, it is rare for embryo donors to help create more than one or two families.

Each treatment cycle with donated embryos could result in one baby, twins, or possibly even triplets. Also if the donors consent to this, embryos could be stored for the recipients to try for a second child. It is highly unlikely that there will be more than two or three deliveries from one donation and of course sometimes the treatment will be unsuccessful.

As a recipient, once you have given birth as a result of donation you are entitled to access information about the number, sex and year of birth of your children's genetically related donor-conceived siblings.

### **What if the donor couple changes their mind?**

Embryo donors consent in writing to their embryos being donated and used for the treatment of others. Donors can change or withdraw their consent up to the point that embryos are placed into the recipient's womb. Given that fertility treatment is costly, time-consuming and emotionally and physically stressful; we ensure that all our donors understand how important it is to be really sure that they want to donate before proceeding. It is very rare for a donor to withdraw consent once they have started treatment.

**Welfare of the child assessment:**

The HFEA Act states that a treatment centre must take account of the welfare of any child who may be born as a result of the treatment (including the need of that child for supportive parenting), and of any other child (other children in the household or the family) who may be affected by the birth. We will ask you to complete consent forms prior to your treatment which we will examine and, if satisfactory, sign off before treatment proceeds.

**Consents and legal issues:**

It is a legal requirement that we obtain written consent from both intended parents before you receive donated embryos for your treatment.

These will include legal parenthood consent forms (which will vary dependent on your marital status) to ensure that you are both legal parents to any child born.

**Legal parenthood information from the Human Fertilisation Embryology Authority (HFEA) after embryo donation:**

**The child's mother**

The woman who gives birth is always considered to be the child's legal mother. This is the case even if the treatment involved the use of donated eggs or embryos. The law only recognises one person as the legal mother of a child.

**The child's father/second parent**

Where the woman who gives birth is married, her husband/wife will be the legal father/ parent of the child, unless it can be shown that he/she did not consent to their treatment.

When the woman giving birth is not married or not in a civil partnership, the legal father or second parent of the child will be the person who is named on the 'consent to parenthood' forms. The forms are completed by the couple receiving donated embryos prior to their treatment. Both the named person and the woman giving birth must consent to that man being recognised as the legal father or that woman being the second parent of the child.

Where the woman giving birth is in a civil partnership with another woman, the legal second parent will be her civil partner, unless it can be shown that the female partner did not consent to her treatment.

A female second parent is not the legal mother of the child; the law does not allow a child to have two legal mothers.

### **Treatment of a single woman**

The HFEA state that if you are a single woman using donated embryo(s) you will be the legal mother of any resulting child. However, the law is not as explicit in the case of a man donating embryos created with his sperm originally for his and his partners treatment. In such cases it is unclear who might be considered to be the legal father and there is a legal risk that the man whose sperm was used in the creation of the embryo could be considered the father. This is not the case if the embryos were created with donor sperm which was donated at a UK-licensed centre.

The HFEA therefore advise that a woman who is not in a legally recognised relationship and intending to use donated embryos should seek legal advice before doing so. In particular, the HFEA state that you should be aware of the potential that the sperm provider could be recognised in law as the father of any child born to a single woman who does not have a husband or civil partner or has not entered into a parenthood agreement with another person.

Please see this link for further information: [Becoming the legal parents of your child | HFEA](#)

### **What will I know about the donor?**

As a recipient, we will share with you (if you wish) the non-identifying information that the donors provided on their donor information form. Most parents intend to tell their children when they are young about the fact of their donor conception and will share the non-identifying information about the donors with their child. Based on research evidence, it is best practice to be open with children from an early age about their donor conception.

### **Can the donor get any information about a child created from their embryos?**

Legally, donors can make an application to Complete Fertility Centre or to the HFEA to find out the number, gender and year of birth of any child created from their embryos. In practice, if donors ask us, we can let them know if their recipient has a confirmed pregnancy.

By law, we cannot tell donors the names of the children or give any identifying information.

### **What information can a donor-conceived child get about the donors?**

Licensed Fertility clinics are required by law to pass information about donors and donation cycles to the fertility regulator – The Human Fertilisation and Embryology



Authority (HFEA). Parents and/or donor conceived offspring can apply for information about their donor from the HFEA or Complete Fertility.

The following non-identifying information about the donors are potentially available to parents of donor-conceived children at any time and to donor-conceived children themselves from the age of 16:

- Physical description (height, weight, and eye, hair and skin colours)
- Year and country of birth
- Ethnic group
- Whether the donors had any genetic children when they registered, and the number and sex of those children
- Other details the donors may have chosen to supply (e.g., occupation, religion and interests)
- The ethnic group(s) of the donor's parents
- Whether the donors were adopted or donor conceived (if they are aware of this)
- Details of relevant personal and family medical history
- Skills
- Reason for donating
- A goodwill message, and
- A description of themselves as a person (pen portrait).

From the age of 18, donor-conceived adults (conceived after April 2005) also have the right to access the following information about their donors:

- Full names (and any previous names)
- Date of birth
- Town or district of birth
- Last known postal address (or address at the time of registration)

When a donor-conceived adult applies for identifying information about their donors, the HFEA will contact the donors to let them know that an application has been made. The HFEA will not tell them the name of the donor-conceived person, or any of their identifying details.

Other information that is available to donor embryo-conceived people on application to the HFEA includes:

- Information about the possibility of being related to the person they intend to enter into an intimate physical relationship with (from the age of 16)
- Information about the possibility of being related to the person they intend to marry or enter into a civil partnership with (from the age of 16)
-

- Identifying information about donor-conceived genetic siblings, with mutual consent (from the age of 18)

## Ancestry Websites

It is important to be aware that due to the emergence of ancestry websites it is possible that donors, donor conceived people and their close genetic relatives could become identifiable to each other. This will be discussed further at your implications counselling session.

## Could the donor be sued for any reason?

Any donor-conceived person born with an inherited condition could sue for damages if it can be proven that the donor had deliberately withheld information about her medical history at the time of the donation. All donors understand this and know how important it is to tell us about any inheritable disabilities or illnesses that affect her or her family.

## Does the donor get paid for donating?

No. The law prohibits payment for donating embryos. However, the law does permit compensation and benefits-in-kind. This allows us to compensate donors £45 per visit to the clinic. We are careful to ensure that our donor's motives for donation are altruistic and that they have a genuine desire to help childless people realise their dreams.

## Where can I find out more information?

### Human Fertilisation & Embryology Authority (HFEA)

The authority that regulates and monitors all licensed fertility treatments.

Tel: 020 7291 8200

Website: <https://www.hfea.gov.uk/>

### Donor Conception Network

A national support group, for people who have conceived through donation and those considering being donors.

Tel: 020 7278 2608

Website: <http://www.dcnetwork.org/>

British Infertility Counselling Association (BICA)

The professional association for infertility counsellors and counselling in the UK. The website includes a list of counsellors providing specialist infertility counselling.

Website: <http://www.bica.net/>

Fertility Network UK

The largest network in the UK offering information and advice by phone and face to face. It has groups throughout the country and also produces a range of publications on infertility.

Tel: 01424 732361

Website: <https://fertilitynetworkuk.org/>