



Midland Fertility Services

Egg Sharing for Donors



'Building futures,
transforming lives'

Why become an egg share donor?

Becoming an egg share donor is a way of reducing the costs of your IVF treatment. Your treatment can also help another woman have IVF treatment, as some women's only hope of getting pregnant is to receive donated eggs from another woman.

Egg sharing is not suitable for everyone and your fertility specialist can discuss all the options with you and also provide you with information about alternative treatments.

Who are egg share donors?

Potential donors must be under 36 years old, non-smokers, within a normal weight range and have no personal or family history of inherited illnesses or abnormalities. Egg share donors' eggs must also be of sufficient quality to optimise their - and the recipients' - chances of conceiving. MFS will arrange blood test to assess this.

Like other donors, potential egg sharers and their partners are screened for cytomegalovirus (CMV), sexually transmitted diseases (syphilis, chlamydia and gonorrhoea), hepatitis B and C and HIV (the AIDS virus). They also provide a blood sample which MFS checks for chromosomal abnormalities and the common mutations for cystic fibrosis.

MFS will contact your GP for details about your medical and family history. You will be seen by a doctor and a specialist nurse or midwife for assessment and you will also be offered the chance to see an independent counsellor. Every case may be discussed at a meeting of the unit staff.

Who are egg share recipients?

Women may require donor eggs for reasons including:

- age
- premature menopause
- infertility due to cancer treatment
- ovarian failure
- a risk of passing on hereditary diseases

What do donors pay for?

Egg share donors are responsible for the following costs:

- your first visit and baseline tests*
- the reduced cost of standard IVF or ICSI treatment*
- any drugs you require over and above the standard dose
- any frozen embryo transfers and yearly storage fees (applicable only if frozen embryos are created and/or if the embryos are not used within 12 months of their creation)*
- the HFEA levy on treatment*

* details of current treatment costs at MFS and of HFEA levies are available in the Patients' Guide to Services or via www.midlandfertility.com

How are eggs allocated?

- if six intact eggs or more are collected, the donor shares her eggs with the recipient. If an even number of eggs is collected, both receive half. If an odd number is collected, the extra egg is given to the recipient
- if the donor produces only one or two eggs, then we ask her to keep them herself as there is a chance these eggs could be of poor quality
- if three, four or five eggs are collected, splitting the number will not give either

the donor or recipient a good chance of pregnancy, in which case there are two options:

- the donor gives the recipient all the eggs and is then able to go through another cycle and keep all of her eggs from this second attempt at no additional charge (other than the HFEA levy)
- the donor keeps all of the collected eggs

MFS makes every effort to ensure a good response from the donor, but cannot guarantee that the minimum number of eggs will be retrieved.

How are egg sharers matched?

MFS matches, as closely as possible, the following characteristics of the donor and recipient:

- ethnicity
- eye and hair colour
- height and build

Donors can state any preferences about who receives their eggs. This may include restrictions on the age of the recipient or where they live. As far as possible, MFS tries to take into account any preferences when matching a donor with a recipient.

Will you know the identity of your egg share recipient?

You will not be told the identity of the woman to whom you donate your eggs and you will also remain anonymous to her, although she may receive some non-identifying information about you, such as a description of your physical characteristics or hobbies and interests. However, in 2005 the law regarding donor anonymity changed so that any child conceived after 1 April 2006 from eggs from donors registered after 1 April

2005 will be able on reaching the age of 18 - or sooner if they plan to marry - to access identifying information about the donor. If you wish, you may be informed whether your recipient achieved a pregnancy, but no further information can be supplied.

The Human Fertilisation and Embryology Act 1990 means you will not be the legal parent of any child born as a result of eggs you have donated to another woman.

Any implications about the removal of donor anonymity for donors, recipients, children or their families can be discussed with MFS staff or a counsellor.

Using frozen embryos

Donors are asked to return to MFS six months after their donation so that blood can be taken for a repeat infection screen. Recipients of donor eggs cannot use any frozen embryos created from these eggs until these results are known.

How successful is egg sharing at MFS?

Results of egg donor and egg sharing treatments at MFS are available in the current Patients' Guide to Services or via www.midlandfertility.com



List of Services

- In Vitro Fertilisation (IVF)
- Intra Cytoplasmic Sperm Injection (ICSI)
- Surgical Sperm Recovery (PESA/TESA)
- Embryo Freezing
- Blastocyst Culture
- Intra Uterine Insemination (IUI)
- Sperm Storage
- Assisted Hatching
- Egg Freezing
- Egg Donation
- Egg Sharing
- Tubal Patency Testing
- Fertility Investigation Package
- Phospholipid Auto-antibody Screen
- Sperm Analysis
- Recurrent Pregnancy Loss and Implantation Failure
- Genetic Screening
- Ovarian Reserve Testing
- Vasectomy Reversal Back-Up

How to get to Midland Fertility Services

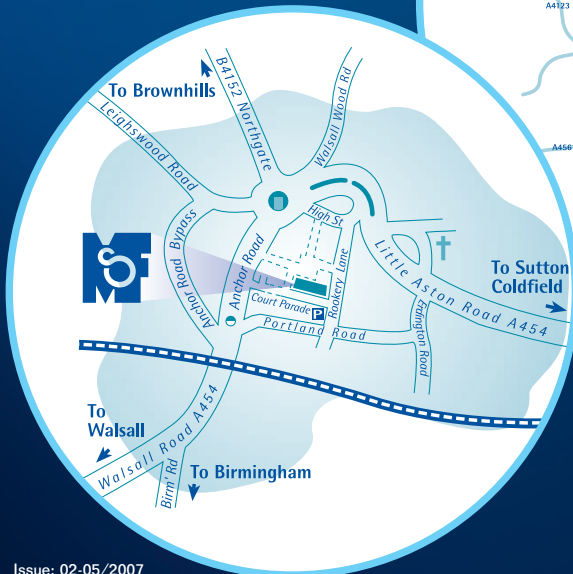
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