

## Fact Sheet for Donors and Recipients

Donating or using donor eggs, sperm and embryos for fertility treatment has major implications for both the donating and receiving individuals. The National Health and Medical Research Council (NHMRC) released revised Ethical guidelines in 2017 on the use of assisted reproductive technology in clinical practice and research (Assisted Reproductive Technology (ART) guidelines). These guidelines are used by professional organisations to set standards for the practice of ART.

The following information has been derived from the NHMRC Ethical Guidelines (2017) and Fertility Solutions policies and is a summary of the information that all potential donors or donor recipients should consider:

- The gametes (eggs and sperms) used in Assisted Reproductive Services (ART) activities can either be provided by the person receiving treatment, their spouse or partner, or provided by a donor or donors.
- Gametes may be donated to a specific recipient who is known to the donor ('known donation') or to anyone who is receiving ART treatment ('unknown donation').
- If the donor specifies recipients they know personally (a known donation), clinics must respect the wishes of the donor unless the donation is prohibited by law or is contrary to the Ethical Guidelines.
- Clinics must not accept donations from any donor who wishes to place conditions on the donation that the gametes are for the use only by individuals or couples from ethnic or social groups, or not to be used by particular ethnic or social groups. This type of donation ('unknown directed donation') is considered unethical on the basis that it is discriminatory and inequitable.
- Donors wishing to direct their donations to individuals or couples from a particular ethnic or social group can only do so through known donation. This also applies to gametes and embryos in storage that were not allocated to a specific individual or couple prior to the introduction of these guidelines.
- Clinics must meet regulatory requirements and have policies and procedures in place to minimize transmission of infectious diseases from the donor to the recipient or the person who would be born. These policies and procedures must be constantly reviewed in light of new evidence.
- There is to be a limit to the number of families created from a single donor: Clinics must take all reasonable steps to minimize the number of families created through donated gamete treatment programs. In Queensland this number is a total of 10 families of which the donor's family makes up one of these families.

Fertility Solutions policy is 10 families in total. If the donor already has a family this accounts for 1 of the 10 families that can be created.

- As referenced above, gametes from a single donor must be used to create only a limited number of families. In Australia there is currently no national registry for gamete donation nor is there a state registry in Queensland. To encourage disclosure of multiple donations at multiple clinics, potential gamete donors should be reminded of the importance of limiting the number of families created from a single donor.
- In addition to these guidelines clinic's must take account of the following factors when deciding on an appropriate number of families to be created:
  - There is a risk of a person born from donor gametes inadvertently having a sexual relationship with a close genetic relative (with reference to the population and ethnic group in which the donation will be used)
  - The donor may restrict the number of families created. It is also important to

consider when donor sperm is being used, the donor can withdraw consent to use the semen up until the treatment cycle of the recipients commences.

- It is Fertility Solutions policy to ask all donors during the screening process, if they have ever donated to other clinics or persons and take these donations into account when establishing family limits.
- It is Fertility Solutions policy, should a donor disclose that they have previously donated, to obtain consent from the donor to request a copy of relevant records pertaining to the donation(s).
- When the gamete donor has not specified a recipient for their gametes (unknown donation), the clinic has responsibility for the decision making about the use, storage and discard of the gametes or resulting embryos, subject to any directions or limitations expressed in the consent of the donor.
- When a donated embryo (including one created using donated gametes) is no longer required by the individual or couple to whom the embryo was donated, the embryo may be reallocated to another individual or couple, subject to any directions or limitations expressed as part of the consent from the embryo donors or imposed by law.
- Gamete donors and recipients should be aware that embryos created with donated gametes are able to be re allocated, the recipient couple are responsible for the decision-making processes of any such embryos after donated gametes have created an embryo subject to direction, or limitations expressed by the gamete donors.
- Guidelines for reasonable donor expenses that can be claimed for. The current situation in Australia is that gamete donation must be altruistic, and that commercial trading in human gametes or the use of direct or indirect inducements is prohibited by legislation. This position reflects concerns about the potential exploitation of donors (particularly egg donors) and the potential risks to all parties.

While direct or indirect inducements are prohibited, it is reasonable to provide reimbursement of verifiable out-of-pocket expenses directly associated with the donation, including:

- ❖ Medical and counselling costs, both before and after the donation;
- ❖ Travel and accommodation costs within Australia;
- ❖ Loss of earnings. Donors who access paid leave during the donation process cannot be reimbursed for loss of earnings. Loss of earnings can be demonstrated by the donor providing pay slips verifying that unpaid leave was taken as well as providing proof of hourly rate being claimed.
- ❖ Childcare costs where needed to allow for the donor's attendance at donation-related appointments and procedures.
- ❖ Legal advice.
- ❖ Travel Expenses (what to provide): Completion of vehicle log for travel relating to appointments/treatments (supplied by Fertility Solutions)

You can find further information on the NHMRC Guidelines and how they relate to assisted reproductive technologies, <https://www.nhmrc.gov.au/guidelines-publications/e79> .