Egg Donation

Egg donation is a method of treatment for female fertility problems which may help women who have premature ovarian insufficiency or failure (early menopause), or who have been born without normal functioning ovaries. Others who have a low ovarian reserve and may have had repeatedly unsuccessful IVF treatment cycles or those who are carriers of genetic disorders may also be suitable for this treatment.

The recruitment of egg donors has been a challenge and some, but not all clinics in the UK have shortages of donors. Some clinics do not offer donor treatment, or may only offer egg donation to those who are happy to use an anonymous donor from overseas, so you may need to contact a few clinics to find one which has UK egg donors.

There are two main sources of egg donors: young women undergoing IVF treatment who agree to share their eggs with a recipient or young women who offer to give their eggs for altruistic reasons. HFEA guidelines allow altruistic egg donors to receive up to £750 as compensation, with a provision to claim an excess to cover higher expenses (such as for travel, accommodation or childcare). Egg donors should usually be no older than 35 years of age. Some women may choose to use known donors, such as a sister or a friend, and this is permitted. Most donors in the UK are not known at the time of treatment, but a child born from the donation will be able to find out about them once they reach the age of 18.

Treatment cycles for the donor and the recipient can be run at the same time. Treatment of the egg donors is the same as for normal IVF, with drugs to control the donor’s hormones following which stimulation of the ovaries with one of the gonadotrophin drugs takes place. The cycle is monitored as for a normal IVF cycle and the eggs are collected by the transvaginal ultrasound recovery technique, which is carried out under sedation. The collected eggs are inseminated with the sperm of the egg recipient’s partner or a donor and, if fertilisation occurs, embryos are transferred “fresh” directly to the recipient.

Another method is to obtain eggs from the donor, inseminate them with the recipient’s partner’s or donor’s sperm, freeze any resulting embryos and transfer these at a later date to the recipient. Some couples prefer the latter system, as it can be confirmed that the egg donor is HIV negative six months after first freezing the embryos. Unlike treatment with sperm donation, the six months wait for the HIV status of donor eggs is not mandatory. The success of treatment using donor eggs is usually better than that of normal IVF. Egg donation is a complex procedure, and requires extensive consultation and counselling of both the donor, the recipient and their partners.

Some people who need egg donation opt to travel overseas as it can be cheaper and some UK clinics offer egg donation through links with overseas clinics rather than recruiting their own donors. This does often mean using an anonymous donor so any future children will not
be able to find out anything about their donor when they reach adulthood. On 1st April 2005 the law was changed to allow children born as a result of sperm, egg or embryo donation procedures here in the UK to access the identifying details of the sperm or egg donor (i.e. their genetic mother or father) once they reach the age of 18. If you are considering going overseas because your own clinic doesn’t have any donors, you may want to consider looking at other clinics which have UK donors first.

The essence of successful treatment using donated eggs, sperm or embryos is to seek treatment in units which are experienced in these treatments and where in-depth advice and independent counselling are available.