



Fact Sheet

From ReproductiveFacts.org



The Patient Education Website of the American Society for Reproductive Medicine

Embryo donation: what should I know?

What is embryo donation?

Patients who are undergoing in vitro fertility (IVF) often create more embryos (fertilized eggs) than they plan to transfer at once. The extra embryos may be cryopreserved (frozen) for transfer later and sometimes they may not be used. These patients have the option to have their extra embryos discarded, donated to research, or donated to another person/couple to achieve pregnancy.

Who receives donated embryos?

Embryo donation makes it possible to have a child when one or both partners are not able to contribute their own sperm, eggs, or embryos. Using donated embryos may be considered by women with untreatable infertility that involves both partners, untreatable infertility in a single woman, recurrent pregnancy loss thought to be related to the embryo, and genetic disorders affecting one or both partners. Donation can also be used for social reasons such as same-sex couples or for single men or women.

How are the embryos screened for disease?

The Food and Drug Administration (FDA) has strict guidelines for the testing of people who are donating eggs, sperm and embryos. However, most embryos that are donated were originally intended to be used by the people who created them. In these cases, the FDA-recommended testing may not have been performed within the appropriate period. The embryos may still be donated as long as the recipients are aware of the risks.

Donors should provide a detailed medical history and be tested for communicable diseases including HIV, hepatitis, syphilis, gonorrhea and chlamydia at the time of donation. If the donors are unavailable or refuse to be tested at that time, the recipients are warned about the chances of transmission of disease.

How should recipients be evaluated?

Evaluation of the recipients is similar to that of patients undergoing routine IVF or donor egg/sperm. This includes a thorough medical history of both partners. This should include record of blood type and Rh factor, and testing for sexually transmitted diseases including HIV, hepatitis, gonorrhea, chlamydia and syphilis. Recipients should speak with a mental health professional about the decision to use donor embryos and potentially parent children that are not related to them genetically. The recipient should have a pelvic exam and an assessment of her uterus (womb). If she

is over 45 years old, a more thorough evaluation should be done, including an assessment of heart function and risk of pregnancy-related diseases. She may also be advised to see a doctor who specializes in high-risk pregnancy.

Is counseling necessary?

Both the donor and recipient should be counseled by mental health professionals trained in third-party reproduction about their decision to donate and receive embryos. The recipients should discuss their feelings about parenting children they are not genetically related to including disclosure (or nondisclosure) to the potential children. Both parties should discuss future contact between the donors, recipient(s) and subsequent children born after embryo donation..

What are the legal implications of donor embryo usage?

Recipients should seek legal counsel from a lawyer specializing in family issues. Laws vary from state to state. This lawyer should be familiar with state laws concerning who is considered the parent of transferred embryos during pregnancy and after birth for the states where the donors and recipients live. Legal agreements should be drawn up so that both donors and recipients understand their obligations, roles, and expectations. In states without clear rules about the use of donor embryos, the American Society for Reproductive Medicine (ASRM) recommends that the recipient accept full responsibility for the transferred embryo(s) and resulting children.

ASRM also recommends that the recipient release the donors and the assisted reproduction program from any and all liability from any potential complications of the pregnancies, congenital abnormalities, heritable diseases, or other complications of the embryo donation.

How successful is embryo donation at achieving pregnancy?

Success rates with embryo donation depend on the quality of the embryos at the time that they were frozen, the age of the woman who provided the eggs, and the number of embryos transferred.

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For more information on this and other reproductive health topics, visit www.ReproductiveFacts.org