

The Process of Egg Donation

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**Abstract**

Facts about egg donation are scanty and depend on past researchers that are quite a few. This capstone describes the process of egg donation in brief and then goes ahead to discuss the consequences. Particularly, the article categorically states that egg donation in the US is a loosely managed process and clinics have the leeway to decide how they do their work. By discussing the process of egg donation, the article sets the foundation for evaluating the risks associated with the practice which include the introduction of IVF associated infections. About benefits, the article identifies personal and community benefits, where the US donors are cited to be interested in egg donation in exchange for the \$5000 check that is often given. In conclusion, the article states that egg donation has the overall impact of societal continuity where mothers that could not conceive can now have the chance to undergo the complete feeling of womanhood.

*Keywords:* Egg donation, IVF.

## The Process of Egg Donation

### **Facts about Egg Donation**

Over the course of this semester, I had the honor to go behind the scenes at the Idaho Center of Reproductive Medicine. It was very insightful working side by side with the doctors that were making egg retrievals happen. As I became more passionate about this topic, I wanted to share my experience with anyone and everyone. However, because there is lack of education, many people would dismiss or judge this topic in the wrong type of way. There are very few facts about egg donation since little research and reporting has been done over the years. Thus, this capstone limits its view of facts about egg donation to past research and more so the timeless ideas such as egg freezing through vitrification. As Kenney and McGowan (2010) state, the only official figures available today are those released in 2005, and most of them will form the basis of this discussion. Most importantly, Kenney and McGowan (2010) claim that most of the egg donors always opt to remain anonymous, and even though it is crucial fertility treatment, the US government has not put in place rigorous measures to regulate its practice.

According to Kalfoglou and Gittelsohn (2000), the human reproduction technology of using oocytes to transfer life from one woman to another which began in the early 1980s has grown exponentially. Yoon, Kim, Park, Hong, Chung & Cha (2003) define an oocyte as a cell within the ovary which if undergoes meiotic division can form an ovum. Besides its long-standing history, egg donation has continued to trail sperm donation in the past three decades. Kalfoglou and Gittelsohn (2000) cite some differences between sperm donors and egg donors claiming that oocyte donors were more interested in knowing who receives their egg. Apart from the socially biased characteristics, Kalfoglou and Gittelsohn (2000) reveal that most oocyte donors are young women in their mid-20s and early 30s. The average age of egg donors is 21 to

36 years providing a fifteen year period within which women are most productive and can offer eggs that are healthiest compared to those of older women. In their study, Kalfoglou and Gittelsohn (2000) also found out that the financial compensation motivates most oocyte donors. The current average price for an egg donation in the US is \$5000 (Johnson, 2017); and even though experts believe it is on the higher side, donors are motivated by the value as much as the infertile women are motivated by the ability to conceive. However, while the practice of reimbursing donors is rampant in the US, other countries such as Canada and those in Europe have strict laws that regulate egg donation. Part of the regulation is to restrict compensation to donors. Therefore, as it is at the moment, every government around the world has its way of handling the egg donor practice with some finding it socially and legally acceptable to casually have mothers undergo the process of receiving eggs from others and others finding the need to restrict such practices.

### **The process of Egg Donation**

Since its discovery in the early 1980s, egg donation has been used as a method of curing infertility among infertile women. Over the years, doctors have been finding the most secure and patient-friendly method of infusing fertilized eggs into the uterus of a surrogate mother and standard practices exist today. According to Idaho Center for Reproductive Medicine Consent for Recipients of Donor Eggs (2018), the process is long and entails the following:

1. Donor screening- Here, the donor is checked for any medical, genetic, psychological and family history issues that may negatively affect the child born thereof. Most of the procedural actions are mandated by the FDA. Above all, the donor must be screened for any infectious diseases including HIV Aids within 30 days of egg retrieval.

2. Matching and synchronization to the donor- This step requires that the identified donor's cycle is synchronized with that of the recipient so that at the time the recipient is ready to receive the egg, the donor is ready to produce. In case it is not possible to synchronize the ovulation cycles, then ovarian stimulation of the donor becomes necessary.
3. Egg retrieval from a donor- Once screening and matching of the ovulation cycles are successful, then egg retrieval is done. The eggs are removed using a needle under the guidance of ultrasound.
4. IVF and embryo culture- an embryo culture is made by placing sperms and the extracted egg together in specialized conditions. This step allows the medical team to distinguish the embryo with more potential from the others.
5. Transfer of the embryo to the carrier- This is done a few days after embryo development under the specialized conditions. The best appearing embryo is selected and placed in the uterine cavity using a catheter. The remaining embryos may be frozen for future use.
6. Hormonal support of the recipient- due to the nature of conception, hormonal support is necessary for the support of the uterine lining. Thus, progesterone is given, though in some other instances estradiol is also administered.

### **Consequences/Risks of Egg donation**

Egg donation is a laboratory process, and just like many other surgical procedures bears both speculative and pure risks. However, the risks associated with egg donation can be categorized into main facets. They include side effects associated with the medicine provided; risks associated with egg retrieval; risks in embryo transfer; complications in pregnancy; and the risk of a child being born with a defect (*In vitro fertilization (IVF): what are the risks?* 2018).

All the risks mentioned above present with varied levels of severity and research is still being done to prove their relationship to egg donation.

For instance, the risks associated with infertility medicine that is introduced during egg donation have similar effects as other specialized prescriptions. Side effects include, but not limited to nausea, mood swings, fatigue, breast tenderness, and ovarian hyperstimulation syndrome (OHSS). However, the symptoms associated with medication used in egg donation are mild and often go by themselves (*In vitro fertilization (IVF): what are the risks?* 2018). On the other hand, risks associated with egg retrieval include: mild to moderate pelvic pain; injury to organs that near the ovaries such as the bladder and bowels; and the need for surgery in case of severe in vitro fertilization (IVF) associated infection (*In vitro fertilization (IVF): what are the risks?*, 2018). On its part, embryo transfer is safe and slight inflammation may be caused by the abrasion of the catheter containing the embryo.

Perhaps the most significant risk with IVF is multiple pregnancies which carry several substantial perils. These risks include preterm labor and or delivery; maternal hemorrhage; gestational diabetes; and, high blood pressure related to pregnancy (*In vitro fertilization (IVF): what are the risks?* 2018). On the same note, babies born before term may develop the usual conditions linked to preterm birth including cerebral palsy, learning disability and intestinal complications (*In vitro fertilization (IVF): what are the risks?* 2018). However, despite the many risks associated with egg transfer, the perils related to having children with defects and also developing an ectopic pregnancy remain almost equal to those of natural conception.

### **Benefits of Egg Donation**

The benefits of egg donation vary from one individual to another. However, the universal benefit is that egg donation helps women who are not able to have a reason to smile. While the

key beneficiary of egg donation is the recipient, donors also express their satisfaction with the actions. Generally, on the part of the donors, the benefits may be fluid, but many who have been interviewed expressed their change of attitude from the initial thought of pecuniary benefit to the feeling of having done something noble (Kalfoglou and Gittelsohn, 2000; Kenney & McGowan, 2010).

### **Regulations/ Standards of Egg Donors**

The laws that govern IVF are not uniform around the US and reflect the will of the people of every state. Unlike in Canada and European countries, the US authorities do not require clinics that conduct IVF to be licensed. Besides, there is no clear authority to address the plausible ethical dilemmas that may arise out of any IVF related activity. However, there are general guidelines provided by the American society of reproductive medicine (ASRM) which give general advice on what clinics should do. Some of the guidelines include ("IVF Egg donation law and legislation in the USA," 2018):

1. A woman must be between 21 years and 34 years to donate
2. Donors must undergo screening to single out any genetic or infectious diseases including downs syndrome, HIV Aids, chlamydia, and many others
3. A clinic must deny treatment to patients whom they have all the reasons to believe may not be in a position to properly take care of the child born out of the process
4. Clinics must ensure that compensation to egg donors does not go beyond the set limit of \$5000.

Apart from the guidelines by ASRM listed above, there is also the Uniform Parentage Act (2002), which states are free to adopt for their use. While UPA is not exactly a law, it provides a framework upon which the practice of egg and sperm donation can be controlled.

However, Idaho does not apply the law to egg donation but rather is stricter with sperm donation. Therefore, the legal environment of egg donation in Idaho is loosely held, and ethics play a more crucial role in protecting patients and practitioners more than legal consequences.

### **Overall Impact on Community/Society**

From the preceding discussion, it is apparent that egg donation is a necessary evil in the current world. Mothers that are not able to conceive but can carry babies can afford the chance of going through what womanhood entails without the world ever knowing about their deficiency (Shepherd, Kardzhieva, Bussey & Lovell, 2018). The process also gives mothers who do not want to carry babies to have the services of a surrogate mother with whom they share the identity of the child. Moreover, while the process remains useful to infertile couples mostly, advanced practices should be able to allow for regular couples to use it for other motives such as choosing the right quality of child that they want. With the ability to select the best embryo among many, medics can extract and chose the best seed for parents based on certain characteristics. The financial compensation that is given to the donors also plays a vital role in the redistribution of income within the economy. Poor mothers that donate can now have an opportunity to afford something that they could not with the \$5000 check they receive. Above all, egg donation plays an integral part in bringing forth children that may never have been born.

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