



Saint Mary's Managed Clinical Service
Division of Reproductive Medicine

PATIENT INFORMATION LEAFLET

A GUIDE TO USING DONOR SPERM

This leaflet has been provided to you by the donor team to guide you through the next steps of your treatment in selecting donor sperm for use in your treatment cycles from the comfort of your own home.

FAIRFAX CRYOBANK

The Department of Reproductive Medicine is licensed to use The Fairfax Cryobank storage facility in which there are more than 250 HFEA (Human Fertilisation and Embryology Authority) UK-compliant donors who are registered. It may be that when you come to see the nurse specialist in the clinic you have already found your donor. The nurse will discuss this with you and ensure they are a suitable choice and then process your request via the department's Andrology Service. It may be of benefit for you to select three preferences of a donor to ensure that you have an alternative if your first choice is unavailable. Some of the reasons that a donor may not be available include all family slots being taken, Fairfax does not have any vials for us to place an order, genetic risk being too high, or sperm vial concentrations that are not suitable for your type of treatment.

To start your search please now go to www.fairfaxcryobank.com/uk and ensure that you are on the UK- English version and the Union Jack flag is displayed on the web page to ensure that you are on the correct website. Now continue to the tab that states donor search and select ID for the donor category. You can now begin your donor search by entering the specific attributes that are most important to you, for example, ethnicity, hair colour, eye colour and many more. Please note that the more attributes that you select will mean a reduction in the donors available for selection. As a unit we require you to select ICI and IUI premium under the specimen type, these vials have the highest number of motile sperm. This is still applicable if you are having IVF/ICSI treatment, despite there being an ICSI specimen type.

**** If you have any issues navigating the website or selecting a donor, we will be able to assist when you attend to see the donor nurse coordinator. ****

CYTOMEGALOVIRUS

All donors are screened for cytomegalovirus (CMV). A blood test indicates whether a donor has an acute infection or a past infection with CMV and developed antibodies to it. Any sperm samples provided when there is a concern of an ACTIVE infection would be destroyed by Fairfax. CMV is a flu-like virus to which most adults have been exposed and have developed immunity, therefore around 80% of donors will show as CMV positive. After the initial infection, the virus remains dormant within that person's body for life. It is unusual for recurrent infections to occur. It is usually a harmless virus but can go on to cause problems in babies if contracted during pregnancy (congenital CMV). A pregnant woman can pass CMV to her unborn baby via her bloodstream across the placenta. Babies born with congenital CMV infection can develop health problems that are apparent at birth or that develop in later childhood, such as hearing loss. However, the Royal College of Gynecologists advises that only 5-10% of babies born with congenital CMV will be affected. If you are CMV-negative, you should consider restricting your selection to CMV-negative donors to minimise the risk to a new-born. We will conduct this blood test for you in the department and advise you of the result. You may wish to wait for your result before selecting a donor or choose a selection of donors that are CMV positive/negative to bring back to the donor clinic to discuss.

GENETIC STATUS

Fairfax donors have had extended carrier screening; this is intended to identify a range of genetic conditions, specifically recessive and X-linked disorders, to reduce the risk of passing on inherited disorders and may require recipient testing for donor matching. However, we appreciate this can lead to difficult decision-making and a potential overemphasis on rare conditions. Extended carrier screening is not currently recommended by the HFEA but is performed by Fairfax. As the panel screening for genetics has become so vast (currently 549 genetic conditions) many of the donors are carriers of genetic conditions. Details of a donor's genetic screening and carrier conditions can be viewed by clicking on the donor and then accessing the genetic testing document. Please pay attention to this document when selecting a donor. Donors accepted are carriers and not themselves affected by the condition. When the egg and sperm provider are both carriers of the same genetic condition the chance of a child being born affected is increased to 25%.

If donors have tested negative for the genetic panel, this does not exclude other genetic conditions or any new mutations during conception. We do have access to refer onwards to genetics counsellors if you have any specific questions or concerns, however, a donor cannot be held whilst awaiting these communications or potential testing. In some cases, we may be able to offer a genetic screen (blood test) however this is very rare due to the complexities and timescales required for genetic testing. Should you wish to have extended carrier testing yourself, this would be on a private basis with a genetics company, and their panel may not match that of a Fairfax donor. Should you opt for this, the donor team may request your test results to aid donor matching.

Our donor team can provide advice and support regarding genetic status of donors. Due to reasons above if you chose a donor that is a carrier, the condition(s) will be ran through a populational studies database to find the carrier frequency rate (how common it is to carry this condition in the general public). It is our clinic policy that we only order donors if the carrier frequency for the condition(s) a donor is highlighted to carry is above 1 in 70 if you have not undertaken genetic screening for the highlighted condition(s) to minimise a child being born affected.

If you are aware of any family genetic history, please avoid donors who are carriers of this same genetic condition. Furthermore, If any new medical information is shared by the donor at later stage, we will contact you and discuss potential implications therefore it is important you always update us with your contact information even once your treatment is complete.

BLOOD GROUP AND RHESUS FACTOR

Most people are unaware of their blood group and Rhesus factor unless they have been admitted to hospital for surgery, tests/investigations or have donated blood. In selecting your donor, it is not imperative to know your blood group. This will only be required if you achieve a pregnancy. If a baby has a different rhesus blood group to the mother, it can be possible for maternal antibodies to form against the foetal blood cells. Your midwife will discuss this in more detail if a pregnancy is achieved and what we can do.

DONOR SPERM VIAL ORDERING

Your donor order will be placed from your donor clinic appointment, please do not try to order yourself through the website as several safety checks need to be undertaken. The donor coordinator nurse will discuss your choices, and you will be required to sign an order form in clinic for your selected donor. The donor coordinator nurse will then liaise with Fairfax and the andrology department to formalise this order. The consent forms of the donor and blood tests will be thoroughly checked to ensure safety in matching. This is due to the donors not being recruited by our department and therefore we are obliged to check all documents ahead of allocating to ensure HFEA standards have been maintained. A review of confirmed and potential family slots will also take place. The donor would need to be listed as under the UK 10-family limit to ensure your treatment with this donor would not breach this threshold. If there are any concerns during the processing stage this would be fed back to you as the recipient, and you may be required to select another donor. Mostly a shipment will be required from Fairfax in America for the procurement of these vials. This may take a couple of weeks. You will be contacted by the donor coordinator once the vials have arrived at Old Saint Marys Hospital ready for your use in treatment. You will then be advised

that you can request treatment once vials are allocated. The number of donor sperm vials ordered for your treatment will depend on your planned treatment cycle/s and payment received if you are a fee-paying patient. We advise for payment of the donor sperm vials to be made ahead of the ordering appointment or on this same day for an order to be processed. We require 1 vial per treatment cycle and order a maximum of 3 vials at one time. Alternative options can be discussed during your clinic appointments. If you achieve a pregnancy, you will be given the option to purchase any further vials for potential future siblings if all vials allocated have not been used or paid for previously. Only the number of vials ordered and allocated at the time is what is secured for your treatment. Due to the high demand for donor sperm, it is not always possible to secure further vials of the same donor as this also relies on a donor to bank further samples. Whilst the family slot is reserved at point of order this again does not guarantee further vial requests can be processed unless vials are available. Therefore, depending upon your family plans and if you wish for full genetic siblings this may be something to consider once pregnancy is achieved. **Legally sperm will only be stored in the department in line with the donors consent up to a maximum of 10 years from import.**

DONOR SPERM CONSENTS

Every donor will complete consents in line with HFEA requirements, this sets out the terms for their donation regarding the use and storage, etc. This is something that the donor team and laboratory services will review during the ordering and allocation process to ensure suitability. Some donors may rarely consent only to the use of their sperm in IUI procedures and not to create embryos. This would therefore exclude a donor from being able to be used in IVF/ICSI cycles. At the point of reservation, this will be checked and fed back to you. Whilst donor sperm vials can be legally stored for 10 years from import or fewer based on the donors consent. The number of years an embryo can be stored for is a part of both the donors and your own consent. An embryo has the potential to be stored for 55 years as the maximum consenting period. However, this relies upon you as the recipient reconsenting each 10 years to extend storage providing the donor has also consented to this number of years.

If the donor has consented for fewer than 10 years you will be notified ahead of starting your treatment cycle. Unfortunately, it is not always possible to inform you about the duration of storage they have consented to ahead of an order. This is due to the confidentiality policy regarding donor consents, that these will only be shared with our department once the donor vials have been ordered and allocated. It is important to highlight that whilst we hope this does not happen, a donor has the

right to withdraw consent up until the point of IUI/embryo transfer. You will be notified as soon as the department is made aware and scheduled the required consultations.

Please be aware our counselling team are available at any point for supportive contact appointments throughout and after treatment.

FREQUENTLY ASKED QUESTIONS

WHAT WILL THE DONORS HAVE BEEN SCREENED FOR?

Before donation, the donors will complete rigorous screening tests which is completed by Fairfax to reduce the risks of passing on diseases or deformities to any resultant child. These tests will include:

- HIV 1 & 2
- Hepatitis B
- Hepatitis C
- Syphilis
- Human T cell Lymphotropic Viruses (HTLV 1 & 2)
- CMV
- Herpes simplex virus 1 & 2
- Human papillomavirus
- Chlamydia & Gonorrhea
- Karyotype (Their genetic make-up)
- Cystic Fibrosis (to see if they are a carrier)

Expanded Genetic Disease Carrier Screening panel

Other tests may have been performed depending on a potential donor's ethnic group.

All samples are then quarantined for 180 days and the donor will have a virology rescreen to ensure all results remain negative due to the window of detection.

WHO WILL BE THE LEGAL PARENT(S)?

The woman who gives birth is always considered to be the child's legal mother. The law only recognises one person as the legal mother of a child.

Where the woman who gives birth is married or in a civil partnership, her husband/wife will be the legal father/parent of the child, unless it can be shown that he/she did not consent to their treatment. A female second parent is not the legal mother of the child; the law does not allow a child to have two legal mothers.

When the woman giving birth is not married or in a civil partnership, the legal father or second parent of the child will be the person who is named on the 'consent to parenthood' forms. Both the named person and the woman giving birth must consent to the second parent being recognised as the child's legal parent.

DONOR FAMILY LIMIT

It is UK policy that each registered donor can provide sperm to UK clinics to create a maximum of 10 families. A family slot is reserved at the point of order as a treatment cycle with donated sperm could result in one child, twins, or possibly even triplets for each recipient, and of course sometimes the treatment will be unsuccessful. There is no limit on the number of donor-conceived children a parent can have within this family slot. If both partners in a same sex couple relationship give birth to children from one donor, then for the 10-family limit they are still regarded as one family, whether still in a relationship with each other or with a new partner.

Sperm imported from an overseas sperm bank for use in the UK can also only be used to create a maximum of 10 families in the UK or lower if a specified number is chosen on the donor's consent form. Fairfax ship to fertility clinics globally who have differing regulations to the UK. This means a donor may still be shipped and used in other countries regardless of whether the UK's 10 family limit has been reached, making the total number of global families higher. Fairfax donors have a maximum global family limit of 40 families of which Fairfax have the ultimate responsibility to not over distribute a donor. This includes 25 family slots available to the US population and 15 internationally, of which the UK 10 can make a portion of.

Donors may also have their own children at the time of donation or may go on to have children in the future. They are not included in the 10-family limit.

WHAT CAN RECIPIENTS BE TOLD ABOUT THE SPERM DONOR AT THE TIME OF SELECTION?

During your clinic consultation -you will have been shown how to navigate the Fairfax website. This website holds all information surrounding the donors to help make your choice. You can see non-identifying information such as physical characteristics (height, hair colour, eye colour and blood group) and a picture of the donor as a child.

The donors also provide other non-identifying information about themselves, such as hobbies or interests, alongside an in-depth medical history of themselves and family.

WILL THE DONOR REMAIN ANONYMOUS?

You should be aware that donors are no longer able to remain anonymous due to a change in the law.

From the age of 16, a donor-conceived child is entitled to access non-identifying information about the selected donor, such as height, hair colour and hobbies.

From the age of 18, any child born from a donation can apply for identifying information about the donor such as name, date of birth and last known address.

These details will be held on a register at the (HFEA) and are accessible to a child born of donation from their 18th birthday.

This will be further discussed at your implications counselling session, and there are a vast amount of support groups and networks available to guide you through this. Please access the HFEA website also for further information on using donated sperm in your treatment cycle.

Please see this link for further information: <https://www.hfea.gov.uk/donation/donor-conceived-people-and-their-parents/>

You may also want to contact the Donor Conception Network, a self-help network for families created with the help of donated eggs, sperm or embryos: www.dcnetwork.org.

CONTACT DETAILS



0161 276 6000



<https://www.mft.nhs.uk/saint-marys/services/gynaecology/reproductive-medicine/>