

OOCYTE (EGG) DONOR RISK SHEET

Thank you for your interest in becoming an egg donor. There are many couples whose infertility is caused by either the absence of or the poor quality of the woman's oocytes (eggs). Your willingness to donate eggs will make it possible for them to achieve their goal of having a child, becoming parents and having a family. The donation of eggs from one woman to another is a simple concept which is nevertheless somewhat complex in execution. If you become an egg donor, you will be given one or more injectable or orally administered medications which will prepare your ovaries for the egg collection or harvest. The harvest procedure (follicle aspiration) requires the use of narcotics and sedatives in order to minimize the associated discomfort. By giving your eggs to an infertile couple, you establish a relationship with this couple which may lead to possible personal or legal interaction in the future.

It is the purpose of this document to make you aware of as many of the potential risks (real or imagined) which may be associated with the act of being an egg donor.

I. Physical Risks

A. Short term risks

The short term risks and side effects of this procedure are related to the physical requirements associated with the egg donation. You will be required to transport yourself to and from the Family Fertility Center office for approximately ten visits required for ovarian stimulation. In addition, you will need transportation to and from the Family Fertility Center (provided by someone else) on the day of oocyte (egg) retrieval. Since you are acting as an independent contractor, the responsibility and liability for the risks associated with this travel are yours. The risk associated with the injection of the medication and with the blood drawing is for the most part limited to pain at the injection (or phlebotomy) site and possible formation of hematoma (bruise). Prior to the egg retrieval procedure, you will have an IV started, which may be uncomfortable. You will be given an injection of narcotics and sedatives in order to make you feel sleepy and make you comfortable for the aspiration. The egg retrieval itself involves the placement of a needle directly into each ovary and the aspiration (withdrawal) of the fluid from all the ovarian follicles. In this manner, the eggs are obtained from the ovary. There is a theoretical risk of infection and bleeding associated with any surgical procedure no matter how small. In addition, both antibiotic preparations as well as antiseptic solutions are used in conjunction with the procedure to help minimize the risk of infection. However, the theoretical risk remains and is estimated at somewhere less than 1%. In extreme cases of pelvic infection and/or bleeding, admissions to the hospital, intravenous antibiotics, blood transfusion and/or surgical operation may be required. Permanent sterility may result from such serious pelvic infection and/or bleeding.

B. Risks of the medications

The medications which you will be injecting yourself with are all of a hormonal nature and are used to prepare your ovaries for the follicle aspiration procedure. Since they are hormonal, there may be an associated emotional response associated with the use of these medications. This response varies from individual to individual but may include depression, euphoria, restlessness, irritability, and sleeplessness. Other side effects which may or may not happen to you include hot flashes, temporary visual changes (blurring and accommodation changes), headache and ovarian cyst. Some ovarian cyst may cause pain in the lower abdomen or may require drainage with a needle. For a full description of the side effects of all of the medications, you are encouraged to ask for the product package insert.

OOCYTE (EGG) DONOR RISK SHEET

One of the side effects that you will be monitored for is ovarian hyperstimulation syndrome. When young fertile women are given fertility drugs the ovary may over-respond and produce very many follicles and very high levels of estrogen. When this happens, by a mechanism that is not well understood, some women will develop ovarian hyperstimulation syndrome, which is associated with ovarian swelling above and beyond that seen with normal response as well as with fluid collection in the abdomen ("ascites"). Patients may become nauseous and feel bloated. In extreme cases admission to the hospital may be required in order to given intravenous liquids. The approximate incidence of severe ovarian hyperstimulation syndrome is approximately 1% and a moderate form is expected in about 5% of cases.

As most oocyte donors are young and fertile, unintended pregnancy may result in the cycle when fertility drugs are used. It is your responsibility to care for or to terminate the unintended pregnancy, as well as the birth of the child as a result of this unintended pregnancy. We strongly advise you abstain from sexual intercourse during the months you undergo egg donation.

Several recent publications link the use of "fertility drugs" in women with infertility with an increased likelihood of ovarian cancer. The findings of these studies were preliminary and it is unclear what ultimate impact, if any, it may have on oocyte donors like you.

C. Long term risks

The ultimate long term risk of undergoing ovarian hyperstimulation and egg retrieval are not known. While many thousands of cycles of ovarian stimulation and egg retrieval have been performed worldwide, most of these have occurred in infertile women themselves. Less total cycles have been performed on donors. Since most donors have had children in the past, and infertile women were infertile to begin with, it is not known whether this type of procedure can have an adverse impact upon your future fertility.

There is nothing about the stimulation of the procedure that would make one think that fertility would be compromised, unless an infection were to occur. The ovarian stimulation and egg retrieval does not remove from your body any eggs that would otherwise remain there. All of these eggs would naturally be lost each month either by ovulation or by a process of degeneration and resorption called atresia, which is the fate of the majority of the eggs in your ovaries. As a result, the process of egg donation is not thought to speed up ovarian aging or the depletion of eggs in your ovaries. However, since the procedure is relatively new, we do not have the reassurance that 30 or 40 years down the line; some side effects will be found. In addition, 15% of all couples in the United States are infertile. Many of these are cases of secondary infertility, meaning that they had fertility before and now are unable to conceive again. You may find that in the future you will have a fertility problem. This may happen regardless of whether you become an egg donor or not. However, you must understand that we do not know with complete certainty that your donating eggs will not in some way compromise your future fertility. Because of this uncertainty, the American Society of Reproductive Medicine recommends a maximum of six cycles of oocytes donation per life time.

II. Emotional Side Effects

In addition to the physical effects described above, you may find that the process of donating eggs to another woman may cause you some amount of emotional distress in the future. As mentioned above, the use of hormonal medication may be associated with a variety of emotional swings. You should also understand that certain religious groups (notably Catholics and Orthodox Jews) do not approve of any form of infertility treatment, including oocyte donation. You may meet with disapproval from individuals who belong to these groups. You should also ask yourself what emotional impact you will feel if a child is born as a result of your egg donation. Will you feel a need to seek this child out years down the line? If you

