

College-age Women, Donor Eggs, and Assisted Reproduction

Overview

An egg donor is recruited when a woman undergoing in vitro fertilization is not able to conceive using her own eggs. Egg donors are recruited through fertility clinics, egg brokers, or by private solicitation. The most common target of egg donation ads are women on college campuses. Campus newspapers are viewed as the best way to reach the ideal candidate: an educated young woman who may be interested in receiving payment for her eggs and helping another woman have a baby. Specific desired qualities (high SAT scores, athletic ability, specific ethnicity) are often listed in ads, along with compensation available, ranging from \$5,000 to \$100,000. There are a variety of health and ethical concerns related to egg donation that are rarely discussed. These issues need to be addressed in order to ensure the health and safety of young women.

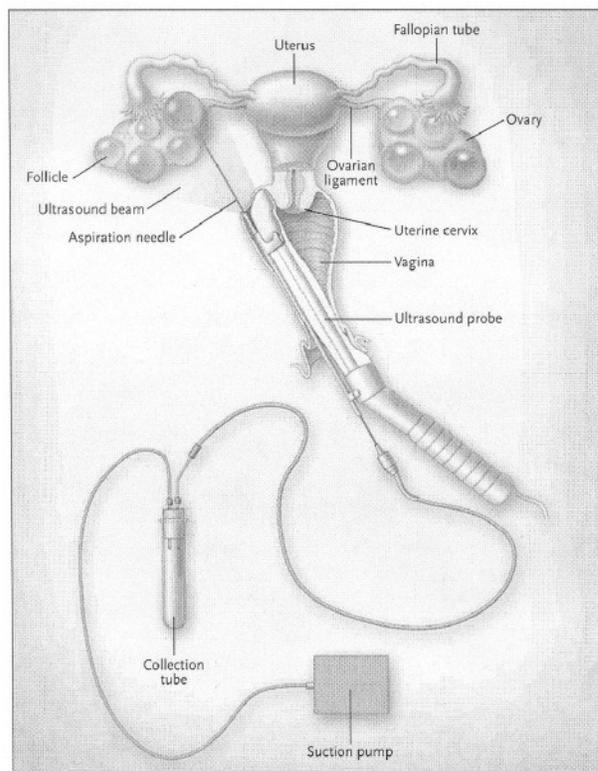
Procedure

Women inject three different hormones over the course of 4-6 weeks to "shut down" their ovaries, then "hyperstimulate" them, and to control the timing that the mature eggs will be released. This is followed by a surgical procedure under light anesthesia, in which an ultrasound-guided needle is inserted through the vaginal wall into the ovary and the eggs are suctioned out. Eggs are then fertilized in a laboratory with sperm, and the resulting viable embryo(s) are implanted into the uterus of the woman intending to become pregnant. Usually multiple embryos are implanted to increase her chances of pregnancy, often resulting in the birth of twins or triplets.

Concerns

Health risks

- The long term effects of the hormonal drugs are not well studied and researchers have not ruled out a link to reproductive cancers.
- 20-33% of women taking the hormonal drugs experience mild forms of ovarian hyperstimulation syndrome (OHSS). Severe cases (1%) can lead to hospitalization, renal failure and, though rare, death.
- The information women are given on the health risks varies. There is no standard ensuring medically accurate information, including information about long term risks.



Retrieval of Oocytes.

(Continued on reverse)



Financial incentives

- While fertility clinics generally offer \$5,000-8,000 for third party egg donation, private solicitation offering \$10,000 or more is not uncommon. Some ads offer as much as \$80,000 or \$100,000. Offering large sums has created a disturbing commercial market.

Lack of regulation

- There is no limit on the amount women can be paid for their eggs. The American Society for Reproductive Medicine (ASRM) recommends women not be paid more than \$5,000, or \$10,000 in rare cases, but it is a voluntary guideline and women are routinely paid more in private agreements.
- The ASRM recommends that women not undergo more than 6 egg retrieval cycles, but there is no system tracking donors who might sell eggs to different clinics, brokers, or individuals. Multiple cycles also put women at greater risk for OHSS and potentially for longer term effects.

Policy is needed in the following areas:

1. Investigating alternatives to hormonally-stimulated egg retrieval.
2. Developing standards of care for procuring eggs for fertility treatments.
3. Collecting data on the health effects of egg retrieval, particularly long-term effects.
4. Determining appropriate amounts of compensation.