You can't buy them in the supermarket, but donor eggs or sperm may be your most important purchase ever.

By Leslie Pepper & Lorie A. Parch, Illustrations by Chuck Abraham

Using donor gametes—sperm and eggs—to conceive a baby may not have been your first choice for how to start a family, but for many couples it's the best choice. Here's what to consider.

tips for egg shoppers

By Leslie Pepper

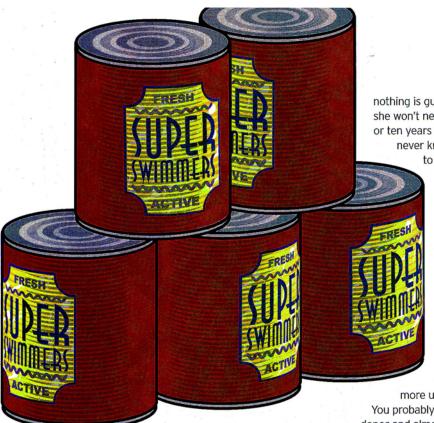
If you've decided to use an egg donor, you're not alone. More than 11 percent of all high-tech fertility treatments now involve donor eggs. In 2002, (the most recent numbers published by the Centers for Disease Control and Prevention) over 13,000 in vitro fertilization (IVF) attempts were made using donor eggs. With an average live birth per transfer rate of 50 percent, that means more than 6,000 babies are born each year as a result of their mothers using donor eggs.

While there are many reasons why a couple might decide that using a donor egg is their best choice for becoming parents, the mother's age is often the determining factor. Few women younger than age 39 use donor eggs, but the use increases sharply afterwards. By the time a woman is older than age 45, more than three-quarters of all ART (assisted reproductive technology) cycles use donor eggs.

For women younger than 39, a variety of medical conditions may lead to the donor egg option. Younger women who might choose to have a child using donor eggs include women born with poorly functioning or non-functioning ovaries, women with premature ovarian failure (which means they cannot produce usable eggs), women who had their ovaries removed as a result of cancer treatment, and women who know they could pass along a genetic disease to a biological child.

friend or stranger? the first choice

Once you've decided to become pregnant using donor eggs, how do you actually go about finding the donor? A handful of people use someone they know – either a family member, a good friend, or even someone they've met through a support group. Susan*, for example, is using someone she met at an infertility support group who could easily produce eggs but not carry a child. Susan already has one daughter through an open adoption which, she says, makes it easier for her to deal with the fact that another woman may also love her child. "We see my [adopted] daughter's birth mother regularly and it doesn't bother me a bit to see them kiss." Her egg donor has twins through a gestational carrier, so Susan is confident that the donor and her husband know what's involved in the egg donation process—both mentally and physically. "Because of that, I've



agreed to go into this relationship with them," Susan says. Using someone you know has certain benefits, says Andrea Mechanick Braverman, Ph.D., director of psychological and complementary medicine at Reproductive Medicine Associates of New Jersey in Morristown. "You know what kind of a person she is and what kind of family she comes from. No matter how detailed a history form you get on an anonymous donor, you'll never learn as much as you would if you actually know her." Using a known donor also means that if her medical history changes in the future, you'll know about it. And, if all parties are nothing is guaranteed for the future. Your donor may feel she won't need any parental contact with the child, but five or ten years down the line she may change her mind. "You never know until the child is born how things are going to shake out," says Braverman.

the kindness of strangers

Most women who need an egg donor will end up dealing with a complete stranger. According to Melissa Brisman, an attorney specializing in reproductive law in Park Ridge, New Jersey, the majority use the donor program provided by their fertility clinic. Check how long the clinic has been doing egg donation, and find out their success rates in the last few years in comparison with other programs. The Centers for Disease Control publishes reports at http://www.cdc.gov/reproductivehealth/ARTO2. Though the statistics only go up to 2002, all clinics should be able to show you their own,

more updated, numbers.

You probably won't be able to see a recent photo of the donor and almost certainly won't get to meet her, but as long as the clinic follows the guidelines of the American Society for Reproductive Medicine, you can be sure that the donors will be adequately screened both medically and psychologically. In general, donors should be younger than 35 years old, with lab evidence of normal ovarian reserve and no indication of impaired fertility. They should be screened for communicable diseases, such as hepatitis B and C, HIV, etc. Depending on ethnic background and family history, additional tests may be recommended. Jewish donors, for example, should be screened for Tay-Sachs. African American donors for sickle cell disease. It's also a good idea for your donor to be screened by an

use the short profile as a process of elimination, to narrow down your choice

amenable, your child will someday be able to meet the donor.

But there's also a downside to knowing your egg donor. "For a lot of people, it raises conflicting feelings - there will always be this other presence in their child's life," says Braverman. And that's exactly the reason Jeanne chose to go the anonymous route. "A good friend with four kids volunteered to be my donor," says Jeanne. "But I felt like it would be my friend's child-it was just a little too close."

If you do go with someone you know, make sure you talk about how you all see your roles in five years. "If you're using your sister, for example, will she be okay being your baby's aunt?" says Dorothy Greenfeld, L.C.S.W., director of psychological services at the Yale Center for Reproductive Medicine and associate clinical professor in the department of obstetrics and gynecology at Yale University School of Medicine in New Haven, Connecticut. Keep in mind that no matter how long or how often you talk with your donor beforehand,

independent mental health professional who specializes in egg donation; counseling and continuing communication can help prevent relationship issues later.

If you're not happy with the egg donor program offered by your fertility clinic-or your clinic doesn't have one-there are other options, including using an outside agency. The upside is that agencies tend to be more flexible with donor information than fertility clinics are. For instance, you might be able to see a picture of the donor, see what school she went to, even find out her SAT scores-and you may even be able to meet her.

To select the right agency, find out how well they screen their donors. "That might sound obvious, but some recruiters post profiles of young women who haven't actually been screened," says Greenfeld. Look for an agency that discloses their success rate of matches and births, their financial practices and policies. Brisman recommends you note how long the agency has been in business - if it's brand new, it may not be around in the next five years, or even next year. You also want to find out who runs the agency, who owns it, and if the Better Business Bureau has any complaints against them. The downside to using an outside agency is that you'll probably need your clinic's permission to use an "outside" egg, and that permission isn't necessarily easy to get. Some clinics don't permit their patients to use other agencies.

You can also try to find a donor on your own, especially if you're looking for a donor with very specific qualities-a Jewish medical student or an Asian athlete, for example. In this case, you may want a lawyer to take out an ad (in a newspaper or on a web site) on your behalf. Some couples take out their own advertisements, or answer donor ads themselves. If you go this route, be prepared to spend a lot of time and energy on it, says Brisman. If you take out your own ad you're likely to get many responses, most of which won't match what you want-and some of which may be downright wacky. And if you answer an especially appealing ad, it's likely that the potential donor will receive hundreds of answers, so you might not get her, and may even get into a bidding war. Or, you may get to really know a donor and become emotionally attached to her, but, after medical testing, find out she's not suitable and your doctor won't use her. If you find someone yourself, either through an ad or an agency, you'll need a lawyer to draw up a rock solid contract. Some clinics require one as well. It should include information about confidentiality-who gets to tell the child? Will the donor be available later in life to meet the child? Does the donor have a right to know if there was a pregnancy? What happens to any extra eggs? Can they be donated to another couple? Used for research? What

making the perfect match

about financial and medical responsibility?

There are dozens and dozens of factors on which you can base your decision, but choosing among them is up to you. Keep in mind that an agency may provide hundreds of

pages of information, and it may become overwhelming. "I think a lot of times couples get blinded by all the things they think they need to think about," says Greenfeld, who suggests you concentrate most on a donor's health history, her psychological profile, and her ability to produce eggs and cause a pregnancy.

Though most clinics and agencies will rule out candidates with certain physical or mental health problems on their own, you should beware of some red flags. The ASRM suggests a woman not donate her eggs

if she has a serious psychological disorder, abuses drugs or alcohol (or has several relatives who do), or currently uses psychoactive medication. But even here the guidelines are not set in stone. "Everybody's got a little bit of this and a little bit of that," says Braverman "The question is, what's your comfort level?"

For Karen, after all the factors to consider, the final decision on choosing an egg donor came down to a feeling. "My clinic sent me a packet of donor information – there were seven pages on each of the 13 donors. It was overwhelming," she recalls. She read about the donors' musical tastes, their favorite colors, how educated they were, and what languages they spoke. "But in the end, I just went with my gut. I wanted a proven donor, someone who didn't seem like she was in it solely for the money." And Karen made a good choice – her baby is ten months old now and the joy of her life.

*some names have been changed

A Healthy Baby

tips for sperm shoppers

Generally speaking, it's not a situation anyone really pictures themselves in. But one day you may find yourself needing to buy some sperm. It could be because your husband had cancer

or testicular or prostate surgery; because he has a genetic disorder you don't want to pass on to a child; or simply because his sperm levels are too low (what's called oligospermia) and/or not the best quality for conception. Or maybe you're a single woman who has decided to pursue motherhood on your own. Whatever the reason, choosing the right donor-and dealing with the emotional ramifications of not having an "ideal" start to your family - are among the biggest steps you'll need to take.



Once you've decided to use donor insemination (DI), selecting a donor will become the focus of your efforts. Thankfully, the Web has made it simple to search through hundreds of profiles on sperm bank sites the globe over. (In fact, the biggest bank in the world is Denmark-based Cryos International, which recently opened a branch in New York City.) This all-access (and private) pass to possible sperm donors means that many couples find a donor they like first, rather than choosing a bank first, says Sheridan Rivers, supervisor of customer service and sales at Xytex, a sperm bank in Augusta, Georgia. "People can choose a bank through a doctor referral, but donor selection is a huge deciding factor [since] we're all pretty competitively priced."



What can you look for in a donor? Most sites allow you to do an online search based on ethnicity, height, eye color, hair color, etc. Perhaps most important-at least in terms of a successful outcome-is whether the donor has had at least one pregnancy result from his sperm. "If I was looking for a sperm donor, I'd want to know, can these sperm do what they're supposed to do?" says Joe Conaghan, Ph.D., laboratory director at Pacific Fertility in San Francisco, "Having children already is a very positive sign."

Most sites allow you to read a short profile of each donor at no cost. "Use the short profile as a process of elimination, to narrow down your choice," advises Melonee Evans, client relations manager for California Cryobank (CCB), one of the biggest banks in the U.S. "Then decide what's important to you."

Don't rush through this stage. "You may go into this not being sure what's important to you, but as you read profiles you'll get a sense of what's comfortable for you and what's not," says Carol Frost, Lic.S.W., an infertility counselor in Woburn, Massachusetts, and a co-author of *Helping the Stork: The Choices and Challenges of Donor Insemination* (Wiley, 1997).

Once you've narrowed your choices down, you can order a longer profile of each donor, for which you'll pay a fee. These detailed profiles, 20-plus pages long, include a medical history of the donor and his immediate family, grandparents, aunts and uncles. "I highly recommend the long profile," says Evans. "It gives you more of an idea of what's in this person's background." Other for-fee options include audio interviews, temperament analysis, and baby photos (of the donors, not their offspring). Xytex was the first to offer adult photos of its donors, though a picture is not available for all of them. "People want to see photographs," says Rivers. "People want healthy babies and smart babies, but they want pretty babies too."

And not surprisingly, another reason couples want to see photos is that they'd like their donor—and their child—to look like the husband. Avail yourself of the bank's photo matching service, advises Frost. "You send a picture of [your husband] and they will look for someone with a similar facial structure." Family resemblance may be particularly important, says Frost, if you don't plan to tell your child that you used a donor.

consider this

Good looks and good health aren't the only considerations, of course. When choosing a donor you'll notice that vials are



available as ICI (intracervical insemination, meaning the sperm is to be inserted into the cervix) and/or IUI (intrauterine insemination, meaning the sperm will be placed in the uterus). The type of insemination you have—and the type of sperm vials you order—may depend on whether you're using a gynecologist or a reproductive endocrinologist for the procedure. Intrauterine insemination is a slightly more difficult procedure, and requires the ejaculate to be "washed" free of its seminal fluid, so that only motile sperm suspended in sterile saline solution remains. Says Robert Stillman, M.D., a reproductive endocrinologist and medical director of Shady Grove Fertility Center in Rockville, Maryland, "We use IUI because there's some degree of benefit from doing it, and for reproductive endocrinologists it's a simple enough procedure to do."

Lastly, you'll want to consider the future: Some banks offer a sibling registry, which allows parents who have had a child by the same donor to contact one another once the children have turned 18. The donor is not necessarily part of the registry—though he may be if you opted for a bank that has both a sibling registry and an "open donor" program, as California Cryobank does. That program stipulates that once your child turns 18, if his or her donor agreed to be an open donor, your child may contact him.

emotional rescue

It goes without saying that just being in the situation of choosing a sperm donor is extremely difficult. "It's often a tremendous sadness for couples. It's a time of realizing fully that this is a loss," says Carol Frost. And it may be that you feel differently about using donor sperm than your partner does, cautions Linda Applegarth, Ed.D., director of psychological services at the Center for Reproductive Medicine and Infertility

at Weill Cornell Medical College in New York City. "Men need to come to terms with the loss of the genetic connection to their child, [but] a man may be more open to conceiving a child with donor sperm than his wife is. He may say, 'I don't have a great attachment to my sperm, and the child will have a genetic connection to my wife,' " says Applegarth. "But a woman may grieve the loss of the connection to him through her child. Or she may feel some moral or religious issue, that this feels adulterous or uncomfortable. Those are all hurdles." In Applegarth's experience, this grieving process takes at least six months; she's found that couples can benefit from working together with a psychotherapist.

One thing couples should also discuss earlier rather than later is whether or not they plan to tell their child he/she was conceived using donor sperm. According to Frost, more parents are choosing to tell their children.

sperm safety

Beyond the obvious desire to find a sperm donor who looks like a member of the family and is free of medical problems, couples shopping for sperm often have two other concerns. First, even after reading the profiles, they wonder about the men who donate the sperm. And second, they want to know

sperm are screened for HIV, hepatitis B and C, chlamydia and gonorrhea, and genetic abnormalities.

While the government regulates the handling of the sperm specimens and the safety screening, there are no regulations to ensure the honesty of the donors. And it would be extremely difficult for sperm banks to verify the accuracy of all the information, including the medical history, that the donors fill out for their profiles. Says Charles A. Sims, M.D., co-founder and medical director of California Cryobank, "We do go to great pains to try to assess the integrity of the donor by going over the family history multiple times and looking for any discrepancies. If our staff thinks there's something not quite right with the donor, they can disqualify him." And indeed they do: Just 3 to 5 percent of applicants make the cut at CCB.

special delivery

So now you've found the perfect donor, pored over his medical history, listened to an interview with him (again and again), maybe even seen his baby photo. You liked his personal essay, that he played soccer in college, recently took up the guitar, and loves Mexican food. The last question is how many vials to request from the bank.

"Your physician will be able to give you a number," Conaghan

decide what's really important to you, then focus on that

how they can be sure the sperm they order is safe.

In answer to the first question, Mary Hartley, who heads up donor recruitment for Xytex, says she uses both a rigorous screening process and her intuition to find good candidates. "We take maybe 5 percent of those who come through the door," she says. "The top disqualifications are they aren't going to be here long enough - it takes months to be qualified and they need to have some type of college education or be enrolled in college." Xytex's age parameters are 18 to 40, which is typical of sperm banks. "Most important is the family medical history and the donor's own health status," says Hartley. "They must have no diseases and be on no prescription drugs for conditions like high blood pressure, high cholesterol or asthma. And then, of course, they need to have a high enough sperm count." For most banks, that's about 20 million motile (meaning they can propel themselves along) sperm per sample to be injected into the uterus, explains Joe Conaghan, whose lab oversees as many as 2,000 inseminations a year.

As to the question of safety, sperm banks are overseen by the U.S. Food & Drug Administration (FDA) and some states, like California and New York, also have local regulations for collecting, storing and using donor sperm. (New York's laws, in particular, are very stringent and well-regarded, so if the bank you're using is licensed in New York, that's a good sign.) Some banks, like CCB, are accredited by the American Association of Tissue Banks; this is one indicator of quality, and the new FDA regulations for sperm banks going into effect in May will incorporate many of the AATB standards. These standards specify that, among other conditions,

says. "For a given insemination you should have two vials on hand." That means if you're happy with your donor selection and want to be sure you can be inseminated again with his sperm in case you need a second try, you'll need to order four vials. Otherwise you might find you have to go through the whole donor selection process again if the sperm you want is no longer available.

Finally, although it may be hard to think beyond this hopedfor pregnancy, you should try to think much further ahead than that. Mary Hartley calls it especially heartbreaking when parents whose

first child was conceived with the help of donor sperm can't get more vials of the same donor's sperm later, when they're ready for a second child (and want their offspring to be biological siblings). So in this, as in so many things related to babymaking, it pays to think ahead.

