



Fact sheet 3: Treatment with donor sperm or eggs

This fact sheet provides information for people who are thinking about treatment using donated sperm or eggs (donor-assisted conception) as a way of having a family. It is important to take time to consider the implications of donor-assisted conception.

Access to information

When a person conceived with the assistance of a donor on or after 1 December 2004 reaches 16 years of age they have a legal right to identifying information about their donor. This information can only be released after the donor-conceived person has undertaken counselling.

Fertility clinics are required by law to provide your details to the Department of Health. This information is recorded in a secure computer database called the Reproductive Technology Registers, which can only be accessed by specially appointed officers.

The fertility clinic can provide you with non-identifying information about the:

- number of families with the same donor
- the gender of the children
- number of children born
- year of birth of the children.

In Western Australia, a donor can create a maximum of five families. There is no limit to the number of children in each family. You can seek more information about your donor or donor-related families (see Fact sheet 7 [Access to Information](#)).

Open disclosure

People who have children by donor-assisted conception are encouraged to tell their children early and often about their origins (open disclosure). In the past, this was often kept secret and it is now known that this causes great distress to everyone involved. The timing of when to tell children about their origins will vary from family to family, Fact sheet 9: [Talking with children about donor conception](#) provides further details.

Access to treatment

People need access to donor-assisted conception treatment for different reasons. This may be the only option for people with a medical condition, genetic condition or a specific fertility issue. There are a number of treatment options that may be available depending on individual circumstances:

- Artificial insemination involves placing the sperm into the woman's genital tract or uterus.
- In vitro fertilisation (IVF) involves fertilising the egg (ovum) outside the body and placing the resulting embryo into the uterus.

Single women who do not have a fertility issue can access treatment with donor sperm through artificial insemination. IVF can only be accessed if there is a fertility issue or a medical or genetic condition.

Your clinic is required to ensure that the risk of transmission of infections and genetic conditions between donors and recipients is minimised.

Treatment with donor sperm

Treatment with donor sperm may be needed when there is a genetic condition or male fertility problem such as a low sperm count. Treatment with donor sperm may be via artificial insemination or IVF depending on the circumstances. Donor samples are usually frozen and not used for six months (quarantine) to check that the donor is free from infections such as HIV.

Treatment with donor eggs

Treatment with donor eggs may be needed when there is a genetic condition or a fertility problem such as repeated miscarriage or falling egg reserves. The donor eggs are usually fertilised immediately and then frozen. Usually, the embryos are not used for six months (quarantine) to check the donor is free from infections such as HIV. A fresh embryo transfer may be undertaken in some circumstances. Clinic staff will advise you on the indications and must explain the potential risks of transmission of infection.

Donation programs

Most fertility clinics have a donor coordinator who is often the first point of contact for people who are thinking about sperm donation. A list of service providers is available on the Reproductive Technology Council website <http://www.rtc.org.au/consumer-information/>

Unknown donors and known donors

Unknown donors are volunteers who provide donations to the clinic and are unknown to the people who use their donation. People sometimes bring their own donor to the clinic. This might be a relative or friend. This is termed known donation as the donor and recipient are known to each other. There are special requirements for known donation due to the close relationship (see Fact sheet 8: [Counselling](#)). Donors cannot be paid for their donation, but the clinic may provide reasonable expenses.

Donors complete a lifestyle questionnaire and undergo screening to check their health (see Fact sheet 6: [Donor Lifestyle Questionnaire Example](#)). The clinic provides donor profiles as part of the treatment plan. A donor profile includes a description of the donor's physical appearance, health and personal background (see Fact sheet 5: [Donor Profile Example](#)).

The fertility clinic is also required to provide information about the law relating to donor-assisted conception. This is called the *Artificial Conception Act 1985*. This makes clear that a donor is legally not a parent of any child that is born as a result of their donation. The person(s) who consent to the donor-conception procedure are the legal parent(s).

Counselling

People who are considering treatment with donor sperm or eggs are required to see an approved counsellor. Some complex issues can arise when people are thinking about treatment options. The counsellor provides information and support so that you can carefully consider your treatment options.

Donors also go through counselling so they understand the significance of their donation and consider the complex issues that donation involves. There are special requirements for known donation due to the close relationships see Fact sheet 8: [Counselling](#) for further details on counselling.