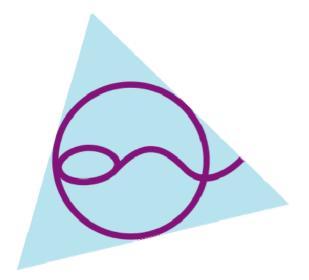


# **Oocyte donor information**



- about donating eggs

# Trianglen Fertility Clinic



# **Table of Contents**

Table of Contents	2
Collection and storage of information	3
About this guide	3
About egg donation	3
Before you can become an egg donor	3
Examinations	3
Contraception	3
When you want to get started	ł
Legislation	ł
Travel activity	5
Types of egg donation	5
How does the egg donation take place	3
Hormonal treatment for egg donation	3
Ovulation injection	7
Egg retrieval without pain	7
Complications and possible risks of being an egg donor	3
Side effects of hormonal treatment	3
Complications associated with egg retrieval	3
Is there an increased risk of cancer from hormonal treatment?	3
Could it be more difficult for the donor to become pregnant later on?	3
Lifestyle and fertility	)
Medication used for egg donation treatment	)
GnRH antagonists	)
Stimulation medication	)
Ovulation medication	)
Payment for medication10	)
Opening hours, telephone hours and contact information for the clinic10	)
Videos10	)
Social media and traceability10	)
Notes11	l

# **Collection and storage of information**

In connection with medical treatment and statutory medical record keeping we need to collect, organise and store information about the persons treated. Medical treatment is only possible if this is accepted. The information is collected and stored in accordance with the General Data Protection Regulation. For more information, please visit our website.

# About this guide

This guide is intended as a supplement to the information provided in connection with examination and treatment at the clinic. In case of doubt, you are always welcome to contact us on telephone 3940 7000. We strive to ensure that all information in the guide is updated and correct. However, we cannot be held responsible for errors.

# About egg donation

Becoming an egg donor is an important but also a major decision for the individual woman which should be considered carefully. There is no doubt that donating eggs for another woman is a great gift that you can give to an involuntarily childless person.

Egg donation treatment may be offered if the woman does not produce usable eggs. The reason for this may be early menopause, previous cancer treatment, surgical removal of the ovaries or because the woman was born without egg cells.

First, we will ask you to read this patient information, which describes an egg donation process.

When you start the egg donation treatment you will receive brief training on how to make injections in the skin of your abdomen, and you will receive a treatment plan. You will receive all the necessary medication for the entire treatment. Having to make self-injections can be challenging for some people, but the needle itself is small and thin, and you will hardly feel the prick.

# Before you can become an egg donor

If, after having read this guide, you are still considering donating unfertilised eggs you must first make an appointment for an interview with a physician, regardless of the form of donation. During the interview, you will receive detailed information about all conditions regarding donation of eggs, and you will have an opportunity to ask questions.

In connection with the interview, we will create a record and ask you detailed questions about your physical and mental state of health and any hereditary diseases in your family. We will also perform a transvaginal ultrasound examination of your ovaries and uterus.

If, after the interview, you still want to donate eggs, you must contact the clinic's egg donation team to determine the best time for you to donate eggs.

You must have a BMI (Body Mass Index) of 19-29. For the sake of the quality of the eggs you should preferably be a non-smoker.

# Examinations

In connection with the start of egg donation treatment you will also have a blood test and a cervical culture for infectious diseases. You must also sign a consent to the donation.

# Contraception

If you have an ordinary copper IUD you do not need to have this removed in order to donate eggs. If you have a hormonal IUD you may also keep it.

If you take birth control pills you must pause these during the treatment.

If you do not have an IUD we recommend that you use a condom from the 7th day of your cycle until 4 days after egg retrieval. Theoretically, eggs may enter the abdominal cavity in connection with egg retrieval. These eggs may be fertilized during intercourse in the days close to egg retrieval and be transported into the uterus, resulting in pregnancy.

# When you want to get started

When you plan to donate eggs, it will facilitate our planning significantly if you notify us in advance, preferably a few weeks or a month before you have the menstrual period on the basis of which you plan to start treatment. In this way, we are best able to plan the priming of the recipient for the eggs. This maximises the change of pregnancy in connection with egg donation.

# Legislation

We must of course comply with the provisions of the Danish Act on Assisted Reproduction (Lov om assisteret reproduktion). Some of the most important statutory requirements are mentioned below.

According to the legislation, you may donate a maximum of six (6) times in total. This includes egg donations at other clinics.

The woman donating eggs has no legal rights or obligations in relation to any children resulting from the treatment. As a donor, you may, however, give permission for children to obtain contact with you as the donor, for example when the child reaches the age of 18, if they do wish.

The woman donating eggs must not have reached the age of 36, must be in good health both physically and mentally, and there must not be any known serious or hereditary diseases in the immediate family (parents, siblings and own children). This applies to both physical and mental diseases.

The person donating eggs must be tested and must be free from HIV, hepatitis B and C and syphilis. This is tested by blood analysis, and these tests must not be more than 30 days old at the time of egg donation. You must accept that you will be informed if infectious diseases are detected in the blood samples taken.

Egg donation in Denmark may take place anonymously and non-anonymously, as cross-donation and as a known donation. Regardless of the form of donation, you cannot, as the donor, be legally considered to be the mother of the child/children.

Egg donation is voluntary, and you may withdraw your consent at any time during the course of treatment. In practice, this means up until and including egg retrieval.

An egg donor may receive financial compensation for the effort. The amount has been fixed by the authorities at a maximum of approximately DKK 7,000 per donation.

If you are an *anonymous* donor (including cross-donors), we will give you an amount of approximately DKK 7,000 per donation. The income received as an egg donor forms part of your total taxable income in line with your other income. You must remember to bring your bank account information.

If you donate eggs to someone you know it is considered an "act of friendship", and you will therefore *not* receive payment from us for the donation, and we *cannot* cover your medicine and transport costs.

If you want to donate eggs several times this is permitted. However, there is a maximum of six donations. There must be a break of at last one month between egg donations to allow the ovaries to rest.

# **Right of cancellation**

You may cancel your egg donation until the time of fertilization. You then waive all rights to the eggs that have now been donated.

# Genetic findings and examinations

In the event of the birth of a child created with your eggs with a possible hereditary/transmitted disease Trianglen will have to inform you of this. It is very important to identify the origin of any hereditary/transmitted disease, and if it may come from you as the donor. You must therefore be able to accept that you are obliged to participate in the investigation of any suspected hereditary/transmitted disease. This may involve genetic or other supplementary testing. I undertake to keep Trianglen updated with my contact data (email and/or telephone number) for this purpose.

You also accept that you are obligated to inform Trianglen if you or your close family (siblings, parents, grandparents, and any children of your own) develop a possible hereditary/transmitted disease in the future.

In that case, you are also obliged to cooperate in the investigation of the disease through genetic or other testing.

If Trianglen identifies a risk of hereditary/transmitted disease in your donated eggs you accept that you are obligated to notify any other clinics where you may have donated eggs about the findings by Trianglen.

#### **Disclosure of information**

If Trianglen is closed or merged with another approved clinic/tissue centre, you must be able to accept that your personal information is disclosed to the clinic to which Trianglen's information and obligations are transferred.

# Travel activity

When you are about to start a donation cycle it is important for us to know whether you have been travelling to a country where you might have contracted diseases that disqualify you from donating eggs until it has been confirmed that you have not contracted such diseases.

In connection with the start of a donation cycle, we will therefore ask you about any foreign travel within the last 6 months.

# Types of egg donation

There are different types of donation as described in more detail below.

#### Non ID-release donation

As a Non ID-release donor, neither the child(ren) who may be born from your donation nor the recipient and their possible partner will be informed of your identity by Trianglen at any time.

We would like to point out that even though Trianglen does not share your identity with the recipient or the child who may be born, it may still be traceable via the internet or similar, if, for example, people in your family and people in the recipient's family share their genetic "profiles" on the internet. You must accept that you may never take any action that can trace your identity.

#### **ID-release donation**

As an ID-release donor, you give permission for the child(ren) who may be born from your donation, when they turn 18, to be informed of your identity by Trianglen if they contact the clinic about this. You therefore undertake to keep Trianglen updated with your contact details (email address and/or telephone number) for use in this regard.

Your identity will not be disclosed by Trianglen to the recipient and their potential partner at the time of donation or later in life.

Once you have chosen whether you want to donate as a Non-ID-release or as an ID-release donor, this choice is binding for all donations you make. You cannot switch between these two options from donation to donation.

#### Known donation

With this form of donation, you will donate eggs to a woman whose identity you know at the time of donation. In other words, you will both know each other's identify. You must not, within the meaning of the law, be closely related to the male partner in the recipient couple. This means that you must not be the man's sister or cousin and must not be the man's cousin's daughter.

As a known donor, you have no legal rights or obligations in relation to the child/children. You will be asked to state to whom you wish to donate.

# How does the egg donation take place

The practical steps in the egg donation treatment include the following phases:

- Hormonal treatment of the woman, which is controlled by ultrasound scans and possibly blood tests
  - Ovulation trigger injection
- Egg retrieval

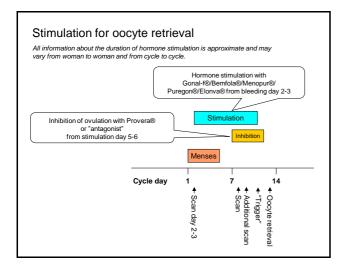
# Hormonal treatment for egg donation

The purpose of the hormonal treatment is to stimulate the ovaries to develop and mature more than the one follicle, which is normal in an ordinary cycle. With hormonal stimulation, we aim for the retrieval of 8-10 eggs, but the number may vary depending on your response to the hormonal treatment.

The development of the eggs is checked by vaginal ultrasound scan. This examination makes it possible to register the size and number of the eggs. The size of the follicle says something about the maturity of the egg inside the follicle. When follicles have a diameter of 17-20 mm the eggs are normally mature and ready for retrieval. The egg cell itself is so small, approx. 0.12 mm, that it is not visible on the scan.

#### Hormonal stimulation

Hormonal stimulation is started on day 2-3 of menstrual bleeding (the first day of the bleeding is called day 1).



You will come in for an ultrasound scan at the clinic before initiation of hormonal stimulation. At this visit, we will check that there are no cysts (actually" residue" of the corpus luteum") in the ovaries and that the endometrium of the uterus has been shed.

If everything in in order the daily injections with stimulation hormone (Gonal-f®, Bemfola® or Menopur®) start. The injections are administered once daily at approximately the same time of the day (within +/- a couple of hours). The injections are given under the skin (subcutaneously). You will receive instructions so that you can do the injections yourself. Anyone can be taught to do it. If it is not possible for you to do the injections yourself they may be given by a nurse at the clinic (during daytime).

#### Provera® or antagonist

Approx. 5-6 days after initiation of hormone stimulation, the treatment is supplemented with Provera® tablets in order to prevent that the follicles will ovulate before the oocyte retrieval. Alternatively, a so-called "antagonist" (Fyremadel® or Cetrotide®) may be given as daily injections.

The Provera or the antagonist prevents the body from issuing "ovulation signals" when there are mature eggs. In this way, the occurrence of ovulation before egg retrieval is almost always prevented.

Provera or antagonist is taken every morning. The daily injections with the stimulation hormone are continued.

# **Ovulation injection**

#### Ovulation with Gonapeptyl® (or other "GnRH agonist")

In connection with egg donation, a single dose of Gonapeptyl® (or another "GnRH agonist") is given as an "ovulation injection".

In some situations, in injection with hCG (Ovitrelle®) is used as trigger to prepare the eggs for retrieval.

# Egg retrieval without pain

During egg retrieval, the eggs are removed from the follicles. The eggs go directly to the laboratory.

Egg retrieval is practically painless since we will administer a local anaesthetic at the top of the vagina and frequent small doses of a strong morphine-like pain reliever directly into a blood vessel. It is important for you and for us that the retrieval is painless so that you do not need to worry about this part of the treatment. We have anaesthetic nurses to manage pain during egg retrieval.

On the day of the appointment, you (and perhaps a friend, if you want) will come to Fertilitetsklinikken, usually in the morning between 9.00 am and 11.00 am.

#### *Fasting prior to egg retrieval* You must come in for egg retrieval in the

fasted state. This means that:

- You must *not* have eaten or consumed dairy products for the last 6 hours before egg retrieval.
- You *may* drink "thin liquids" (not milk) up until 2 hours before egg retrieval. We recommend that you drink a large glass of juice approx. 2 hours before egg retrieval.

A nurse will welcome you, and a small plastic needle will be inserted in a blood vessel in your hand or arm. The plastic needle is used to administer pain medication during the egg retrieval.

The egg retrieval itself will be performed using ultrasound scan. A thin needle is inserted through the vaginal wall and into each follicle. The individual follicles are emptied by sucking out the liquid surrounding the egg. The liquid is examined immediately by an embryologist under the microscope to see if there is an egg cell. If there is no egg an attempt is made to flush out the egg. The needle that we use have two channels, one for sucking out the egg and one or flushing the follicle. You will be able to follow the ultrasound scan and the search for egg cells in the microscope on television monitors during the egg retrieval.

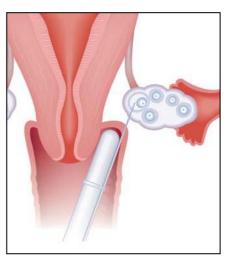
The pain medication that you are given during the egg retrieval may make you a bit drowsy but you will be awake during the entire egg retrieval. We will talk during the procedure and explain what is happening. Egg retrieval normally takes about 10-15 minutes.

After the egg retrieval, you will rest at the clinic for about 30 minutes, and then you may go home.

Due to the sedative medication and pain medication that you are given during the egg retrieval you must not drive a car the rest of the day.

You should expect to feel tired and need rest for the remainder of the day.

If you experience pain for the first 24 hours after egg retrieval you may take pain medication such as Panodil.



# Complications and possible risks of being an egg donor

There are generally no serious complications or risks involved with being an egg donor. For more details, see below.

# Side effects of hormonal treatment

#### Side effects caused by the hormones

Some women may experience side effects caused by the hormones, but many only have minor effects.

The stimulation is given with a pituitary hormone (FSH or hMG), which are natural hormones for the body. In connection with egg donation treatment, we are aiming for 8-10 follicles.

Some women may feel some abdominal tension due to the relatively high number of follicles maturing. In rare cases, an excessive number of follicles are produced. This may present a risk of ovarian hyperstimulation syndrome (OHSS). For more details, see below.

#### Hypersensitivity reactions

Hypersensitivity reactions may occur during hormone treatment.

These are often light reactions in the form of rash, redness at the injection site or itching. A change of drug will almost always help.

In very rare cases, there may be serious allergic reactions with rash, shortness of breath or fever. If you experience such serious reactions you must *not* take any more medication. You must contact us or another physician immediately.

#### **Ovarian hyperstimulation syndrome (OHSS)**

If too many follicles develop a condition called hyperstimulation syndrome may occur after the ovulation injection. With OHSS, the ovaries are significantly enlarged due to the many follicles. Since fluid may build up in the abdominal cavity at the same time your abdomen may become dilated.

We always try to avoid hyperstimulation by carefully adjusting the hormone dose to the individual woman. The aim is the production of a suitable number of follicles, but it is not always easy to control. Hyperstimulation is transient and leaves no physical impairment.

# Complications associated with egg retrieval

The eggs are retrieved through the vagina by inserting the needle through the vaginal wall. There may therefore be a bit of bleeding after the egg retrieval. In rare cases (<1 %), such bleeding requires treatment. Often, a few stitches may be made at the top of the vagina with a suture that disappears automatically. In extremely rare cases, the bleeding may result in hospital admission. After egg retrieval, there may be abdominal soreness, and some women may have pain that requires treatment with Panodil or the like.

Pelvic inflammatory disease after egg retrieval is very rare ( $< \frac{1}{2} %$ ) and is treated with antibiotics. In connection with egg retrieval, you will have antibiotics to prevent this complication.

In very rare cases, the ovary may twist around itself (torsion) in the days following egg retrieval. This will manifest itself with intense pain. If this happens, surgery may be required with reversal of the ovary so that it is not damaged.

# Is there an increased risk of cancer from hormonal treatment?

No. Several studies from Denmark and Sweden, among other countries, have shown that there does not seem to be an increased risk of ovarian or uterine cancer due to fertility treatment.

# Could it be more difficult for the donor to become pregnant later on?

There is nothing to indicate that donating eggs involves a risk of the donor having difficulty becoming pregnant later in life.

Egg donation does not affect the number of remaining egg cells in your ovaries and therefore does not reduce your chance of becoming pregnant later in life.

# Lifestyle and fertility

#### Medication, herbal remedies, dietary supplements

*We recommend* that you are cautious with all unnecessary medication and that you do not take herbal remedies and dietary supplements.

#### Smoking

We recommend that you do not smoke.

#### Body weight and BMI

The relation between height and weight is defined by the so-called BMI (body mass index). BMI is defined as weight (kg) / height x height in meters. A normal BMI is 20-25.

With a BMI below 19 or above 29, the woman's fertility is reduced. *For egg donors, the BMI should be 19-29.* 

#### Absence from work

You should expect not to be able to go to work on the day of egg retrieval.

# Medication used for egg donation treatment

#### GnRH antagonists

#### Fyremadel®, Cetrotide®

GnRH antagonists prevent the pituitary gland from secreting LH, which is the body's ovulation signal. Used to prevent early ovulation. We recommend that the antagonist is taken as an injection in the morning. Side effects. Itching and irritation at the injection site.

#### Stimulation medication

#### Gonal-f®, Bemfola®

Contain FSH, which stimulates the ovaries to produce eggs. It is the body's own ovulation hormone. At the doses used for egg donation treatment, the medication triggers the ovaries to mature more than one egg in a cycle. Given as injection once daily.

Side effects: Local soreness at the injection site. Abdominal soreness. May cause hyperstimulation.

#### Menopur®, Pergoveris®

Contain FSH and LH. FSH is the most important hormone that stimulates the ovaries to produce eggs. It is the body's own ovulation hormone. LH is required in small amounts to ensure optimal egg maturation. There is normally an adequate amount of LH in the body, also without injection.

At the doses used for egg donation treatment, the medication triggers the ovaries to mature more than one egg in a cycle. Given as injection once daily.

Side effects: Local soreness at the injection site. Abdominal soreness. May cause hyperstimulation.

#### Ovulation medication

#### Gonapeptyl® (GnRH agonists)

In connection with egg donation, a so-called GnRH agonist is used to mature the eggs completely and prime them for egg retrieval.Sedative medication and pain medication

#### **Propofol**®

Sedative effect. Is given intravenously in connection with egg retrieval. Side effects: tiredness and dizziness.

#### Rapifen®

Strong pain reliever - morphine-like. Is given intravenously in connection with egg retrieval. Side effects: nausea, tiredness and dizziness.

#### Panodil®

Light pain reliever. Is given as tablets. Side effects: none as long as the dose does not exceed 8 tablets (of 500 mg) daily.

# Payment for medication

As an egg donor, you will of course not pay for the medication.

# Opening hours, telephone hours and contact information for the clinic

#### **Opening hours**

The clinic is open during the day on all days of the week, including weekends and national holidays, all year round. On weekdays, opening hours are 8.00 am - 4.00 pm. On weekends and on national holidays, opening hours are 8.00 am - noon.

In emergency situations outside these hours you must contact an emergency doctor/emergency unit. We are unfortunately not able to remain open for enquiries 24 hours a day.

#### Telephone numbers and telephone hours

Phone: +45 3940 7000 Please find our telephone opening hours on weekdays and on holydays and weekends on our website.

#### Address

The clinic is located in a villa at the address Strandvejen 104A, 2900 Hellerup

#### E-mail addresses

If you send e-mails containing personal information such as health information or date of birth you must use our "secure mail". For contact information, visit our website under "contact".

For information on sending secure e-mails to us, visit our website.

Se also our website: trianglen.com and trianglen.dk.

# Videos

We have uploaded videos of procedures on our website and YouTube Channel. For example, egg retrieval, ICSI, blastocyst culture, assisted hatching and embryo transfer.

# Social media and traceability

Remember that you must not publish/post details (date, number of eggs retrieved etc.) about your egg retrieval on social media. This is to protect the traceability of your donation.

# Notes