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Original article

What influences oocyte donation when there is no financial compensation?



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ABSTRACT

Aim: To evaluate the influence of factors such as age, education level and previous treatment for infertility in the decision to donate or receive eggs.

Methods: Patients visiting our service for the first time answered the question: “Would you donate or receive eggs?”. We assessed whether the inclination to donate or receive was related to age, level of education and the previous unsuccessful treatment for infertility.

Results: 313 patients were included and most (56.9%) said they would donate eggs while only 34.5% would receive a donation. When giving and receiving were evaluated jointly we observed a positive correlation between them (Pearson correlation: $r=0.537$, $p<0.01$). Patients that underwent previous treatments for infertility were significantly more prone to egg donation (63.4% yes vs. 36.6% no, $p<0.05$ vs no previous treatment group), but not to receive (41.8% yes vs. 58.2% no). In high and low levels of education most patients were in favor of donation (55.4% and 61.3%, respectively), but against the idea of receiving (33.9% and 37.5%, respectively). There was no significant differences between groups. The age of the patients (< 35 years old or > 35 years old) did not influence the will do donate (58.2% and 56.4% respectively) or receive eggs (36.9% and 33.0%, respectively).

Conclusions: Our results help understand the factors that may influence the decision to participate in an egg-sharing scheme. We could speculate that patients who have previously undergone unsuccessful treatments are more open to egg-sharing, despite their age or educational background. It would also be relevant to investigate the psychosocial reasons that make couples more willing to donate eggs than receiving.

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O que influencia doação de óvulos quando não há compensação financeira?

R E S U M O

Palavras-chave:

Doação de oócitos
Infertilidade
Fertilização in vitro

Objetivo: Avaliar a influência da idade, grau de escolaridade e tratamento anterior na decisão de doar ou receber óvulos.

Pacientes e métodos: Mulheres atendidas em nosso serviço responderam à pergunta: "Você doaria ou receberia óvulos?". Avaliou-se a concordância de aceitação de ovodoação ou ovorecepção com a idade, o grau de escolaridade e tratamento anterior para infertilidade.

Resultados: Foram incluídas 313 pacientes e a maioria (56,9%) respondeu que doaria óvulos enquanto apenas 34,5% receberiam. Houve correlação positiva entre doação e recepção ($r = 0,537$, $p < 0,01$). Pacientes submetidas a tratamento anterior de infertilidade se mostraram significativamente mais propensas à doação (63,4% sim vs 36,6% não, $p < 0,05$ vs sem tratamento anterior), mas não a receber (41,8% sim vs 58,2% não). Em níveis altos e baixos de escolaridade a maioria dos pacientes se mostrou a favor da doação (55,4% e 61,3%, respectivamente), mas contra a ideia de receber (37,5% e 33,9%, respectivamente), não houve diferenças significativas entre os grupos. A maioria das pacientes com menos ou mais de 35 anos de idade doaria (58,2% e 56,4%, respectivamente), mas não receberia (36,9% e 33,0%, respectivamente).

Conclusões: Nossos resultados são relevantes para entender os fatores que podem influenciar na decisão de participar em um esquema de partilha de óvulos. Poderíamos especular que pacientes previamente submetidas a tratamentos mal sucedidos são mais abertas à ovodoação, apesar de sua idade ou formação educacional.

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Introduction

Egg sharing refers to a scheme in which a patient who is undergoing in vitro fertilization (IVF) treatment anonymously donates a portion of her eggs for an unknown recipient. In return, the woman who is receiving the oocyte grants to fund part of the donor's treatment or compensate her financially, depending on the laws of each country.¹ This procedure is indicated in cases of patients with premature ovarian failure, ovarian agenesis, in patients classified as poor responders to ovarian stimulation, patients with levels of FSH (follicle stimulating hormone) greater than 10 IU/ mL and older woman.² The egg donation schemes were first regulated in the United Kingdom in 1998³ and have been the focus of numerous ethical and political debates since its introduction.⁴ Over the years, discussions concerning the ethical acceptability of providing benefits in the form of IVF treatment as an incentive to donate eggs are being debated. In Brazil, seeking better regulation of this practice, the Federal Council of Medicine recently issued a resolution which states that the donation is never to be profitable or commercial and must be strictly anonymous. However, it is allowed that donor and recipient, both facing reproductive problems, share the biological material and financial costs involving the procedure, and the donor has the preference over the biological material to be produced.⁵ In addition to the ethical and legal aspects, a wide range of psychosocial implications, particularly for donors, is involved in the process of egg sharing.¹ Since in Brazil there is no financial compensation for donors, this study sought to elucidate the socioeconomic profile of women undergoing IVF treatment

and their willingness to donate or accept an egg donation, seeking to understand factors relevant to these decisions.

Methods

This study was conducted with patients attending our clinic for the first time between January 1 and September 20, 2012. All participants signed an informed consent form as part of the treatment protocol and this project has met all ethical principles in accordance with Brazilian law. When filling out the initial questionnaire on their first visit, patients were asked to answer the following question: "Would you donate or receive eggs as a treatment option?" We evaluated the association of answers to this question to factors such as level of education, age and any previous treatment for infertility. The results were evaluated using chi-square (χ^2) and Pearson's coefficient (r) provided the correlation analysis. All analyzes were performed using SPSS 15.0 software and the results were considered significant where $p < 0.05$.

Results

In the aforementioned period, 323 patients were treated for the first time in our clinic. Of these, 10 (3.1%) did not answer the question. Among the remaining 313 patients, the majority (56.9%) answered that they would donate eggs while only 34.5% would receive a donation (Fig. 1). When giving and receiving were evaluated together, we identified a positive correlation between them (Pearson correlation: $r = 0.537$, $p < 0.01$).

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