



## Article

# Shared motherhood IVF: high delivery rates in a large study of treatments for lesbian couples using partner-donated eggs

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## KEY MESSAGE

Shared motherhood IVF is an increasingly requested assisted reproductive technique among lesbian couples. The autonomy of lesbian patients is increasingly being respected even though complex IVF treatment is mostly carried out for non-medical indications. Ovarian stimulation with single blastocyst transfer provides a uniquely safe and highly efficient treatment.

## ABSTRACT

Shared motherhood IVF treatment is becoming increasingly accepted among assisted reproductive technique practitioners and patients in Europe, although data on its overall efficiency remain scarce. This 6-year retrospective study from a single, private, UK HFEA-regulated centre included consecutive lesbian couples ( $n = 121$ ) undergoing shared motherhood IVF treatment (141 cycles). Recipients were more parous and had undergone more previous intrauterine insemination and IVF treatments than donor partners, who had slightly higher ovarian reserve markers than recipients. Indications in most cycles (60%) were non-medical. Most (79%) egg-providers were stimulated with gonadotrophin releasing hormone antagonist protocol, and no moderate or severe cases of ovarian hyperstimulation syndrome (OHSS) arose. A total of 172 fresh and vitrified-warmed embryo transfers were carried out: 70% at the blastocyst-stage and 58% involved a single embryo. Cumulative live birth rate per receiver was 60% (72/120), and twin delivery rate was 14% (10/72). Perinatal outcome parameters were better for singleton than twin pregnancies, although the latter also achieved generally favourable outcomes. No significant difference in cumulative outcomes were found between synchronized and non-synchronized cycles. Shared motherhood IVF combines ovarian stimulation with single blastocyst transfer to provide a safe and effective treatment modality offering reassuring obstetrical and perinatal outcomes.

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## Introduction

Over recent decades, changes in attitudes towards lesbian couples (as well as unmarried single people and gay couples) have meant that assisted reproduction technique treatment has become increasingly accessible to them. In the UK, the right to civil partnership for same-sex couples was recognized in 2004, and same-sex marriage was introduced in 2014. In 2008, amendments were made to the Human Fertilisation and Embryology Act removing previous requirements for 'a child's need for a father' and allowing female partners to become legal parents. Subsequent equality legislation outlawed discrimination based on Protected Characteristics and prohibited refusal of fertility treatment based on sexual orientation (Priddle, 2015). In Europe and the USA, some professional bodies have issued concordant guidelines recognizing the right to access fertility treatments for singles, lesbian and gay couples as well as transgender people (Ethics Committee of American Society for Reproductive Medicine, 2013; De Wert et al., 2014).

Shared motherhood IVF treatment was first described in 2010 (Marina et al., 2010) and has generated extensive ethical debate. Whereas donor insemination or IVF with donor sperm (if a medical indication is present) was deemed acceptable for lesbian patients, for some practitioners and clinics, intra-couple egg donation for non-medical reasons was considered to be non-justifiable, risky and not

cost-effective. According to a number of leading ethicists, however, this reasoning is weak and does not justify undermining autonomy by refusing to treat lesbian patients who wish to share their biological parenthood and accept undergoing a more complex procedure (Dondorp et al., 2010; Zeiler and Malmquist, 2014). Currently, shared motherhood IVF treatment can only be practised without restriction in a few European countries, including Spain, from where the first published series has originated. Extensive ethical debate has led to it becoming gradually accepted in others, such as Belgium and Sweden; however, in many, such as France, Germany and Italy, shared motherhood IVF is either prohibited or discouraged (Table 1).

The current terminology describing shared motherhood IVF treatment is relatively heterogeneous, reflecting its unique clinical context. Although the term 'intra-couple or intra-partner egg donation' correctly describes the medical procedure itself, it might be perceived as too medical for lesbian couples who are not donating or receiving their own eggs for the same reasons as participants of altruistic egg-donation programmes (Woodward and Norton, 2006). Similarly, the uniquely Spanish acronym ROPA/REPA, established by the Barcelona group, which was the first to publish its experience, also underlines the medical aspect of 'receiving eggs/embryos from the partner' (Marina et al., 2010) and might be difficult to adopt in the English-language medical literature. The original term of 'Co-IVF' (or the similar sounding 'Reciprocal IVF') was coined by a US group emphasizing an equal contribution to the IVF process (Yeshua et al., 2015).

**Table 1 – Regulation of family law, assisted reproductive technique access and shared motherhood IVF for lesbians across the European Union (as of October 2017).**

Region	EU countries (28)	Family law, (year coming into effect)	Access to assisted reproduction techniques (single women/lesbian couples)	Shared motherhood IVF
Northern- and Western (9)	Belgium	ME, 2003	Singles/couples	Yes
	Denmark	ME, 2012	Singles/couples	No
	Finland	ME, 2017	Singles	Yes
	France	ME, 2013	No	No
	Ireland	ME, 2015	Singles/couples	Yes
	Luxembourg	ME, 2015	Singles/couples	No
	Netherlands	ME, 2001	Singles/couples	Yes
	Sweden	ME, 2009	Singles/couples	No
	UK	ME, 2013–2014	Singles/couples	Yes
Southern (6)	Cyprus	RP, 2015	Singles	No
	Greece	RP, 2015	Singles	No
	Italy	RP, 2016	No	No
	Malta	ME, 2017	No	No
	Portugal	ME, 2010	Singles/couples	Yes
	Spain	ME, 2005	Singles/couples	Yes
Central (3)	Austria	RP, 2010	Couples	No
	Czech Republic	L-RP, 2006	No	No
	Germany	ME, 2017	Singles/couples	No
Eastern (10)	Bulgaria	No	Singles	No
	Croatia	RP, 2014	Singles/couples	No
	Estonia	L-RP, 2016	Singles	No
	Hungary	RP, 2009	Singles	No
	Latvia	No	Singles	No
	Lithuania	No	No	No
	Poland	No	No	No
	Romania	No	No	No
	Slovakia	No	No	No
	Slovenia	RP, 2017	No	No

Adapted from 2017 Annual Review of ILGA-Europe (the European Region of the International Lesbian, Gay, Bisexual, Trans and Intersex Association): <https://rainbow-europe.org>; and by inquiring at ESHRE country representatives.

EU, European Union ME, marriage equality, RP, registered partnership, L-RP, limited registered partnership.

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