Egg sharing: a vehicle for compulsory counselling?

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Egg sharing, a scheme in which women undergoing IVF donate half their eggs in exchange for reduced-price treatment, has been practised in the UK for some years, but not without controversy. The Human Fertilisation and Embryology Authority's (HFEA's) decision in 1998 to 'regulate not ban' egg sharing was itself a controversial decision; the HFEA explicitly refraining from giving egg sharing ethical approval. The HFEA has recently revised its policy concerning egg sharing, through the sixth edition of its Code of Practice, published in January.

In its original guidance egg sharing, the HFEA specifically restricted centres from disclosing to a donor whether or not the recipient of the eggs had successfully conceived. This was an attempt to protect a woman donating eggs in an egg sharing scheme from the possible consequences of learning that a recipient had been successful while she herself had not. While the HFEA's position was justified on the basis of responses to its consultation on the withdrawal of payment to donors, there is some evidence that even unsuccessful donors in an egg sharing scheme would welcome the opportunity to know if their donation had brought success to another woman.

The HFEA's policy had been criticised for its overt and excessive paternalism and it is understood that its intention in the revised Code of Practice was to facilitate release of this information to a donor who wanted it, subject to the written consent both of the recipient and her partner, and of the donor, subject to all parties being offered counselling. The additional focus on counselling provided to the donor, and any partner she may have, is concerned with the implications of knowing the outcome of the recipient's treatment. This requirement would have been consistent both with existing HFEA policy and the requirements of the Human Fertilisation and Embryology Act 1990 regarding the provision of counselling.

However, both the revised Code and the accompanying Chair's letter to persons responsible, confuse the new arrangements. The Code's reference to the 'Agreement between a licensed treatment centre and the egg provider' permits the release of non-identifying information to the donor 'only where ... appropriate counselling has been offered to all parties involved in the egg sharing arrangement' (p136). However, the 'Agreement between a licensed treatment centre and the egg recipient' refers to the release of non-identifying information to the donor 'only where... appropriate counselling has been given to all parties involved in the egg sharing arrangement' (p138). The Chair's letter compounds the error by stipulating that 'appropriate counselling has been given to all parties'.
While it is common knowledge that some treatment centres impose mandatory counselling for certain services and for certain groups of prospective donors and treatment recipients, British legislators certainly did not envisage enforced counselling. The merits (or otherwise) of mandatory counselling would seem to be a legitimate focus of debate during the forthcoming reviews of the Human Fertilisation and Embryology Act. However, this is certainly not a step to be lightly undertaken and the ambiguities accompanying the revised Code of Practice should not provide a back door by which egg sharing is singled out by the HFEA for obligatory counselling without discussion with counsellors, other treatment centre staff and prospective participants in egg sharing programmes, either as donors or recipients.

It is a pity that presentation has confused the extent to which the HFEA has shifted from the previous paternalistic regime regarding disclosure of treatment outcomes in egg sharing to one that respects individual choice. It is incumbent on the HFEA, therefore, promptly to clarify its position and remove the current uncertainty facing centres and prospective participants in egg sharing programmes.

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**SOURCES & REFERENCES**

**HFEA Code of Practice (6th Edition)**
HFEA | 12 January 2004

**Paid egg sharing to be regulated, not banned**

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