



Brussels IVF

# DONOR ACCEPTOR COUNSELING IN PRACTICE

THE MIDWIFE PERSPECTIVE

Britt Schoonjans

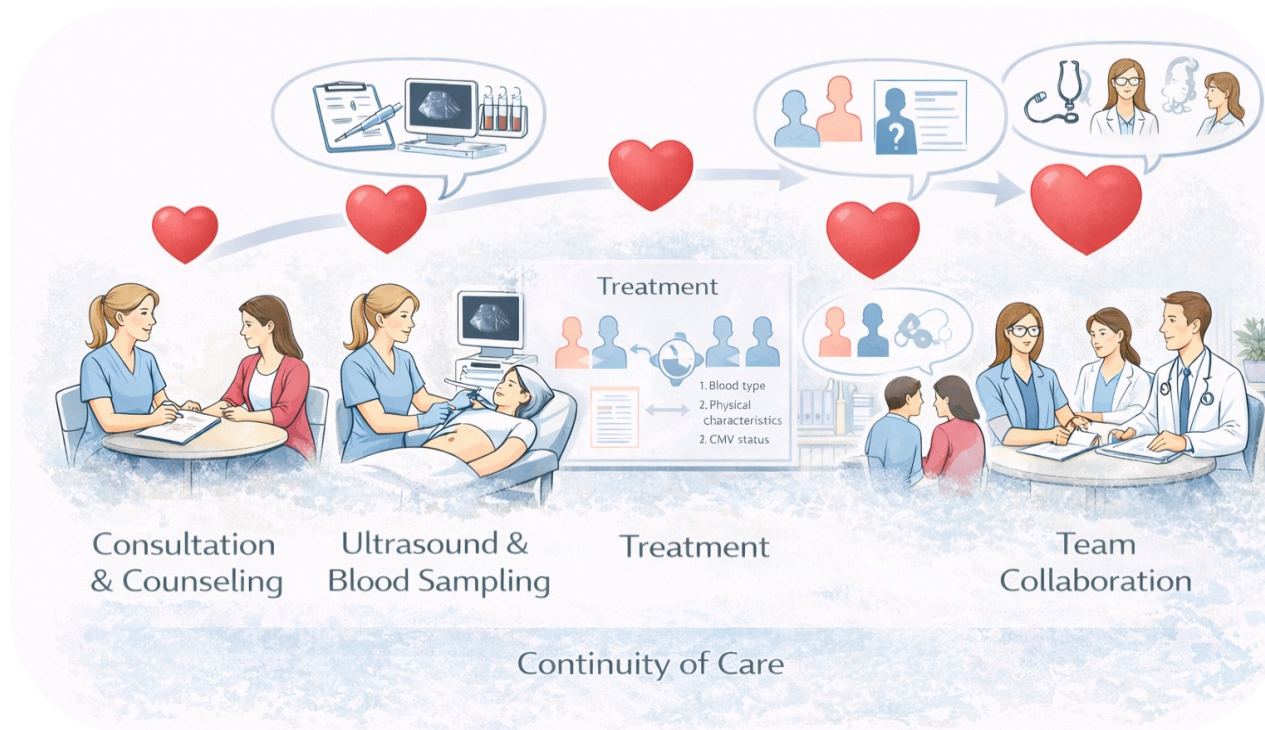
# OVERVIEW

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- Counseling at Brussels IVF
- Different donor pathways in clinical practice
- Donor matching and expectation management
- Current challenges in donor availability
- Evolving legal context
- Key messages

# Brussels IVF

## The Role of the Midwife



# Brussels IVF

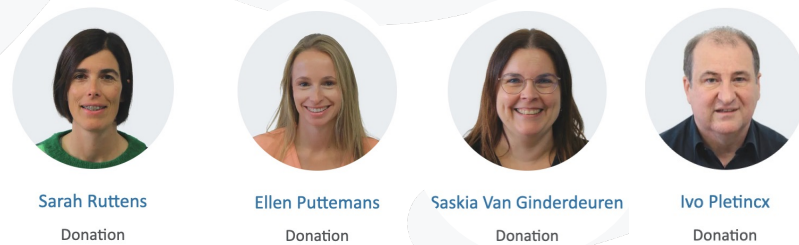
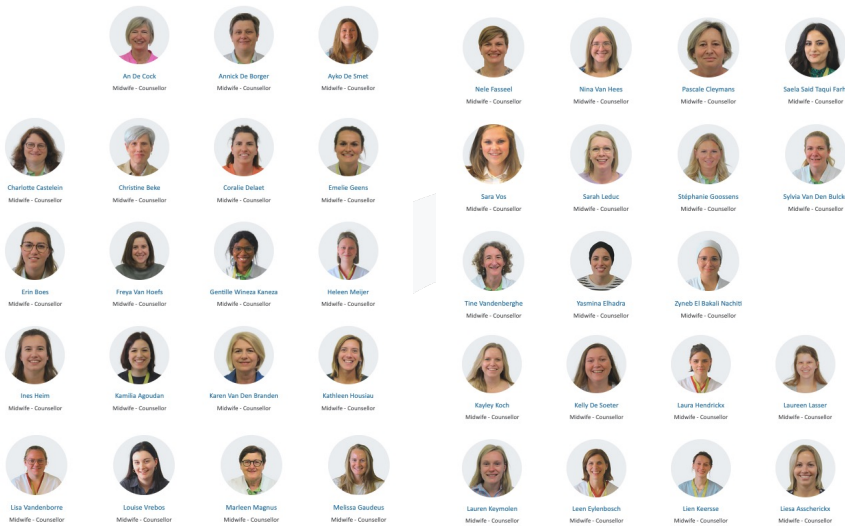
## Two-level Counseling Model

### General midwife-counselors

- Anonymous sperm recipients
- Known donation

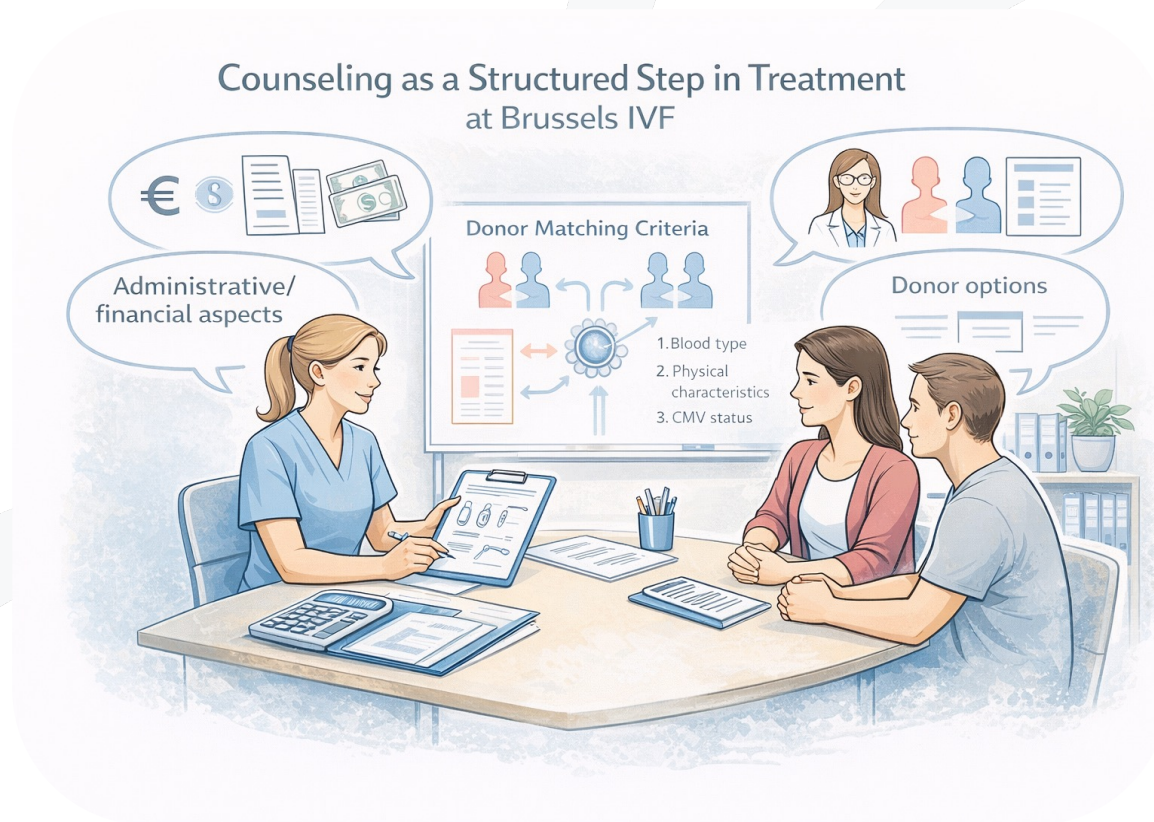
### Midwife-expert counselors

- Anonymous oocyte recipients
- Internal anonymous oocyte and sperm donors
- All donor matching



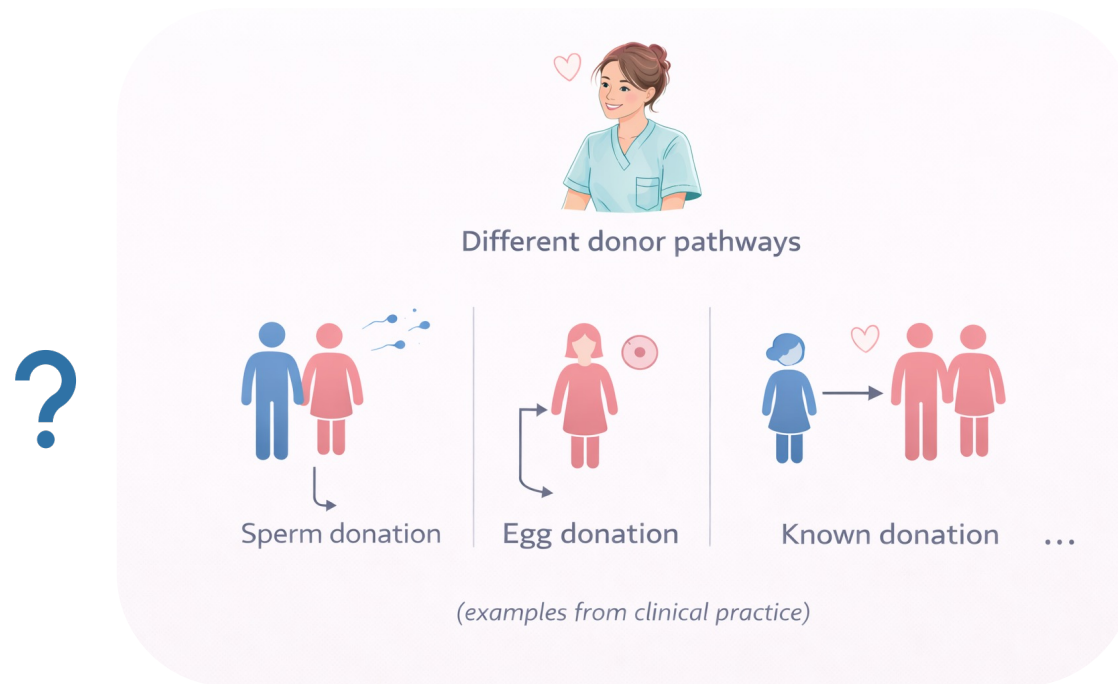
# Brussels IVF

## Counseling as a Structured Step



# Different Donor Pathways

## Clinical Practice Examples



*Identity, resemblance, disclosure*

*Genetic loss, meaning of motherhood*

*Boundaries, expectations, long-term*

# Different Donor Pathways

## Known Donation: a Structured Pathway

- Donor from family or social network
- Long-term effects <> screening
- Joint counseling for donor and recipients
- Practical aspects of the donation
- Informed consent signed together
- Multidisciplinary collaboration




# Donor Matching in Practice

## Part of Clinical Care



- Attempt to create resemblance
- Medical safety & legal criteria
- Available donor pool
- Goal = responsible donor selection
- Patient expectations

Fenotypekaart

Patiënt



B811110SS00J  
**SCHOONJANS, BRITT**  
HASSELTBERGSTRAAAT 21  
1860 MEISE (BELGIE)  
NATIONALITEIT: BELGIE

165 cm | 58 kg | BMI = 21,3 kg/m<sup>2</sup>  

Ethnische afkomst

Kleur haar

Kleur ogen

Bloedgroep

Studie

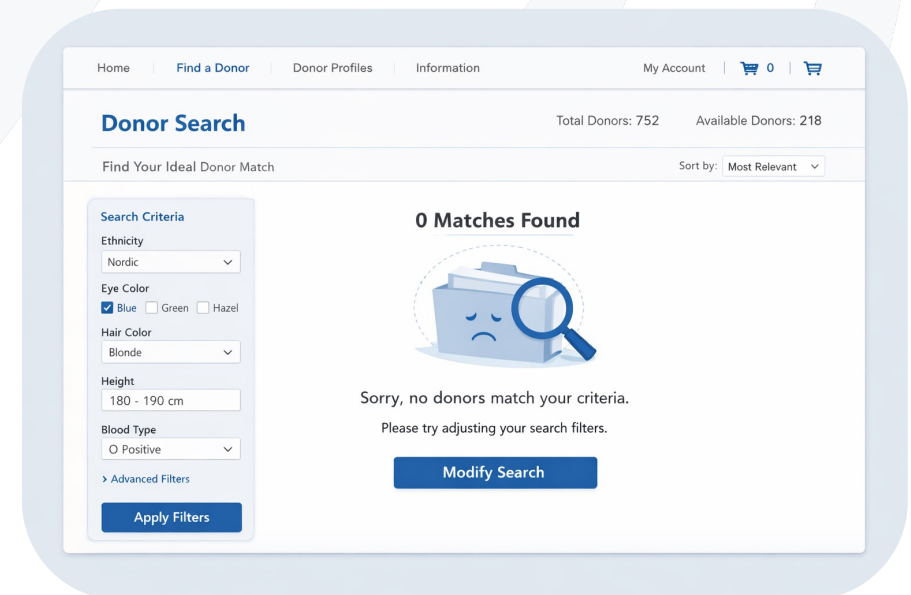
Job

*No perfect match*

# Donor Matching in Practice

## Managing Expectations

- Quick donor availability
- Strong resemblance
- Limited donor pools in practice
- Waiting times & higher expectations
- Explaining realistic possibilities



The screenshot displays a web interface for donor search. At the top, there is a navigation bar with links for Home, Find a Donor, Donor Profiles, Information, My Account, and a shopping cart icon. Below the navigation bar, the page title is "Donor Search" with statistics: "Total Donors: 752" and "Available Donors: 218". The main heading is "Find Your Ideal Donor Match" with a "Sort by: Most Relevant" dropdown menu. On the left, there is a "Search Criteria" panel with the following options: Ethnicity (Nordic), Eye Color (Blue checked, Green, Hazel), Hair Color (Blonde), Height (180 - 190 cm), and Blood Type (O Positive). There are "Advanced Filters" and "Apply Filters" buttons. On the right, the search results show "0 Matches Found" with a sad folder icon and a magnifying glass. The text reads: "Sorry, no donors match your criteria. Please try adjusting your search filters." and a "Modify Search" button.

# Current Donor Challenges

## Changes in Donor Availability

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- Internal pool decreasing
- External banks smaller pools
- Increasing prices
- Transparency towards patients



# Current Donor Challenges

## Anonymous Oocyte Waiting List

- ± 1 year waiting time
- Depends on phenotype
- Depends on blood group
- Flexible blood group (with consent)
- Foreign oocytes → on hold



**Brussels IVF**

**A28-E**

**INFORMATION TRANSFER ABOUT THE USE OF DONOR OOCYTES**

**CHECKLIST FOR PATIENTS**

and (if applicable) ▶

Brussels IVF wants to make sure that your treatment is clear to you in every aspect. Using the checklist below, you can verify whether you have received and understood all the necessary information about your treatment.

**CHECKLIST**

I know about the different donation programmes available at UZ Brussel. ✓	If my contact details change, I will inform Brussels IVF accordingly. ✓
I was given information about the cost of a treatment using donor oocytes: <input type="radio"/> actual medication and treatment costs of the donor (known donation or exchange donation - cost per cycle) ✓ <input type="radio"/> €4,500 (anonymous donation - cost per fresh cycle) ✓	I know that I can only start my treatment with a donor after confirmation from Brussels IVF. ✓
I know that the cost of donor material is not covered by reimbursement criteria and its cost is entirely at my expense. ✓	Brussels IVF respects all the legal provisions on screening when using donor material, and on anonymity in the case of an anonymous donor. ✓
I was informed about the lab costs for performing the ICSI treatment. This varies depending on my reimbursement. ✓	If my partner provides a semen sample for fertilisation of the donor oocytes, he must remain on call until two hours afterwards. This is to ensure the quality of the treatment. ✓
In case of treatment with anonymous donor oocytes, Brussels IVF guarantees at least one transferable embryo. If this is not the case, the donor eggs will not be charged. ✓	I am informed that if I have a desire for multiple children using the same donor, this is only possible if the donor is still available. ✓
I know that in the case of anonymous donation, depending on availability, the lab will perform a matching of the phenotype of the donor with that of the patient. ✓	I was informed that the donated oocytes are freshly fertilised and the obtained embryos are cryopreserved for me/us for a period of 5 years. This storage is included in the cost of my treatment. ✓
	I am aware that I can extend the storage period of the embryos, subsequent to the end of the previous storage period. I know that there is a cost associated with this. ✓

# Current donor challenges

## Counseling Internal Donors

- Counseling of sperm and oocyte donors
- Motivation and autonomy
- Understanding of the medical procedure
- Emotional aspects of donation
- Informed and voluntary decision



# Legal changes on anonymity

## Legislation in Belgium

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- Within the fertility centre <> Outside the clinic
- End of mandatory anonymity
- Current legal framework
- New technologies – DNA databases
- Long term counseling

# Reflection

## The Professional Role of the Midwife

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- Patients focused on pregnancy
- We introduce long-term aspects
- Continuity within clear care boundaries
- Future legal impact not always central
- Additional psychological support

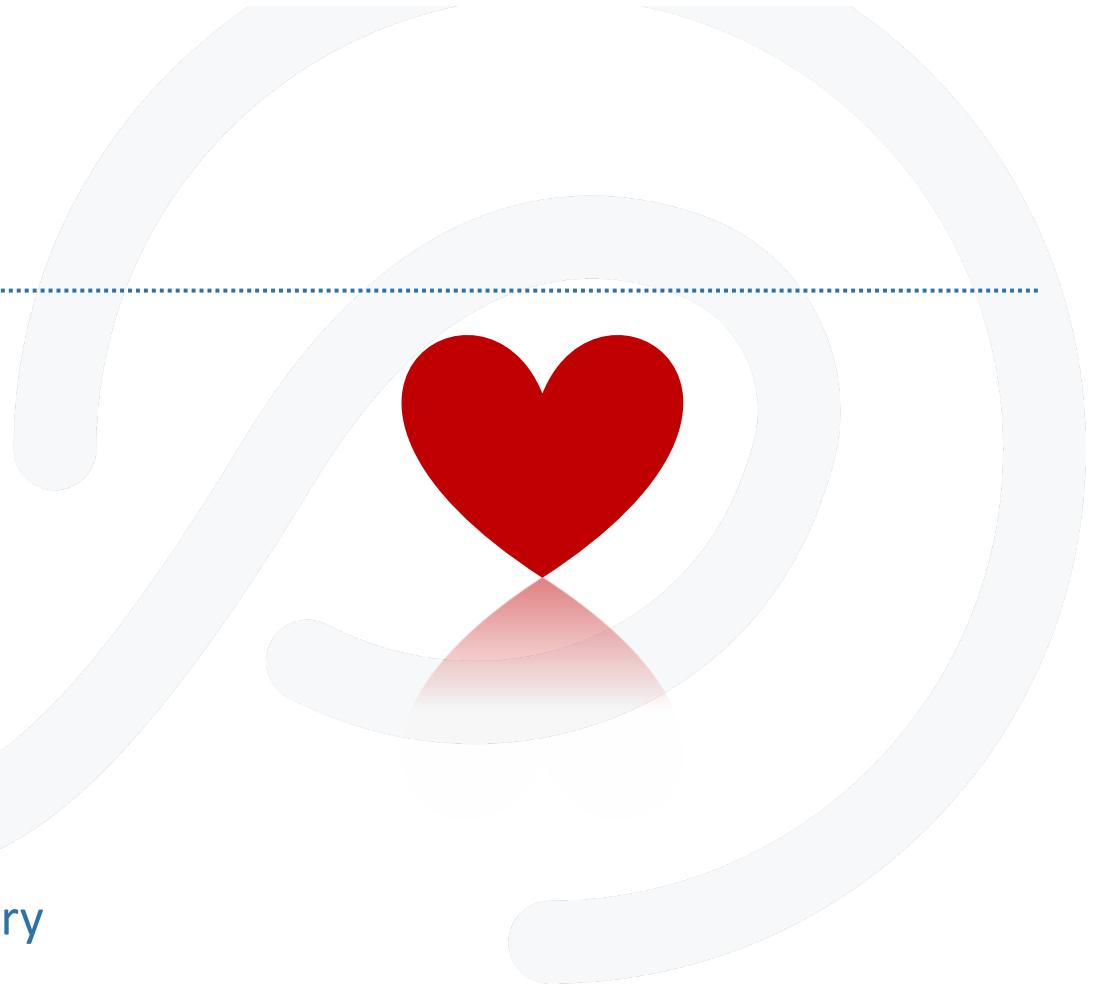


# Conclusion

## Key Messages

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- Counseling = part of treatment
- Continuity important
- Matching responsibility
- Changing context
- Connecting treatment with family story



# Thank you.

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