



Planning a family using egg donation: a letter from Rachel

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Dear Would-Be Parents

I would like to share with you our journey, how we became the parents of three children through egg donation. You may find echoes of some of your own thoughts and questions, fears and worries. It may clarify some concerns or raise some new issues. I hope it will also lead you to see that you are not alone and though egg donation would not have been a first choice for most of us, we now wouldn't have it any other way. This is how we got there.

When I finally met the man I wanted to have children with I was in my early forties. He and I were ready for parenthood but unfortunately my body was not in a state to co-operate. Two attempts at IVF later we were faced with the options of childlessness or using a donated egg from a younger woman in order to create our family. We were considered too old to adopt a baby.

Some people are amazed by the lengths we have gone to in order to have children, but for me, the alternative – childlessness – was even worse. Often I believe only those people who have suffered the emotional pain of infertility can really understand and these people can be a source of great support.

Of course, I was an older woman who could not necessarily have expected to become pregnant easily or at all. Many other women need to use donated eggs because of early menopause, either as a result of treatment for cancer or for a range of complex and sometimes unexplained reasons. For a young woman, finding out that she has lost the capacity to have her own biological child is devastating news. Several Network members have spoken of grieving for their lost sense of womanliness, as well as for the children they could not have with their own eggs. One member said, 'I had to grieve for my own lost eggs before I could move on'.

Nevertheless, for those women producing any eggs at all, however 'poor' their quality, it is hugely tempting to try 'just one more' IVF treatment with ones own eggs.

Like me, Deborah, another Network member over 40, was facing her own falling fertility. She decided she needed to face the fact that her chance of success using her own eggs was very small. She also had to accept that using egg donation with a younger woman's eggs was more likely to be successful. And there would be less risk of having a child with abnormalities.

Another member found the lifting of pressure from her biological clock, once she and her partner had made the decision to use donated eggs, very liberating.

Here are some of the other mixed feelings and concerns experienced by Deborah, and which may be shared by any woman contemplating egg donation –

How will I cope with the feelings of failure at not being able to conceive with my own eggs, even with IVF?

For Deborah, the feeling of failure was short-lived. Feelings of sorrow and regret took its place and, she thinks, will always be with her in some way, although very much in the background. Her euphoria on becoming pregnant, and then a parent, outweighed anything else.



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I don't think I can cope with the feeling that I would be carrying another woman's baby. This feeling is often, but not always, dispelled by actual pregnancy. As Deborah said, 'Once I was pregnant I was clear that I was carrying our baby. Another woman had made it possible, yes, but it was my husband's sperm and the embryo was now in my womb. I was very proud to be pregnant.'

Many women have strange dreams and fantasies during the time when they are thinking about and hoping to have a baby. These are recognised as absolutely normal. Those of us needing to use a donated egg are no different but may have fantasies that are stronger and go on for longer. This is almost certainly because of sub-conscious fears about using an egg from an unknown source. These fears often subside with pregnancy and almost always with the birth of a healthy child. It may help to obtain as much background information as possible about the donor from your clinic.

My child won't have any of my genes, won't inherit anything from my side of the family. This can be a really difficult issue because, genetically, it is true. However, Deborah turned the question on its head: 'What about all the positive traits my child may take from her donor – they may not be mine, but they may be wonderful traits to have!'

By the time I've sorted out all my ambivalent feelings about egg donation, the thought of being on a waiting list for a further two years is too awful to contemplate. Deborah has some clear advice in this area: 'Some ambivalence may never be resolved and some may only resolve itself on the birth of a child. My advice is not to wait until you have sorted out all your feelings before you even go on the waiting list. You will be "wasting" valuable time. You can always come off a waiting list later if you decide that egg donation is not right for you.'

Do some research about clinics. Use the HFEA Guide, which lists them. Phone and ask about waiting times. Send for literature from the most promising ones. Take into account accessibility (you will have to go there a lot), staff attitude (on the phone, language used in brochures, etc.) and of course, price. Register with two or three clinics to maximise your chances of coming to the top of the list. Some members are comfortable registering with clinics that use egg sharing schemes (where women are offered IVF treatment free in return for becoming egg donors); others are not. But the waiting lists in clinics that operate them tend to be shorter.

It is also possible to go abroad for treatment, to countries where egg donors are more available. If you are thinking of taking this route, bear in mind that the laws on the anonymity of the donor will differ from the UK. There may also be limited non-identifying information available about the donor. If it is important to you that your child has the choice, as an adult, to trace their donor, it is probably better to have the treatment in the UK. Alternatively, you could research the processes and laws on anonymity in the other country.

Waiting times

Problems with conceiving a child can feel very disempowering. You may feel immense grief and anger at discovering you have to use the eggs of another woman. Having to wait up to two years for a suitable donor can feel as if all power and control has been removed from your life. You are in the hands of others. Here are some suggestions from other women and couples as to how you can remain active and positive during this time:



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- find a well-qualified counsellor to talk through remaining issues and to help you both think through the long-term consequences of using donated eggs (your clinic or the British Infertility Counselling Association can help with this)
- talk to and link up with other couples in your situation through the Network
- plan a 'looking after ourselves' project – a piece of work or leisure activity to absorb you both during the waiting time.

Choosing a donor

All clinics will try to match you with a donor of a similar physical type and blood group. Beyond that, there may or may not be a choice, according to availability and/or clinic policy. One Network couple has spoken poignantly about having to let go of 'trying to create a perfect image of us'. They found that having a little bit of information about potential donors was tantalising but ultimately unhelpful. Now their children are growing up, however, they wish they had more information to pass on to them. I understand how they feel: it is a source of regret that my children will be unable to find out anything about their donors.

Since July 2004, all donors in the UK have been required to provide some background information about themselves, including details of their religion, job, hobbies and interests, their reason for donating, as well as their physical characteristics. If your donor was recruited before July 2004, you may want to ask your clinic if there is more non-identifying information which was not given to you at the time.

Donors recruited since April 2005 will have agreed to be available to be traced by any children they have helped create, after the child's 18th birthday. It will be up to the child to start this process through the HFEA, probably after seeing a counsellor. If you feel unsettled or threatened about your child, at 18 or older, seeking out the donor, you may want to talk about your feelings with a counsellor. Ask your clinic or the British Infertility Counselling Association to put you in touch with someone appropriate.

A child's desire to find out more about their donor is probably a wish to fully understand their identity, rather than a rejection of their parents. If, as parents, you have been relaxed and open with your child or children about their genetic origins, you will probably want to support them through this important step when the time comes. After all, you may be just as curious to meet this generous woman!

Treatment issues

Even once a donor has been found, things do not always run smoothly. In our case, our first donor did not respond to drug therapy and so the procedure was unable to go ahead. Such a big disappointment felt like a bereavement to me and I was very depressed. Fortunately another donor was found and our wonderful first child was born when I was 45. There were several more disappointments and failed cycles before I finally became pregnant again three years later with twins.

On talking to many other women and couples who have children by IVF and by IVF/egg donation, I find that these wonderful ups and awful downs, the roller coaster of emotions experienced, are by no means unusual. These are very testing times. Relationships can be strengthened or undermined by them.



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What do the men feel?

It's not always easy to tell how men feel as their emotions are often less readily revealed than those of women and typically they find the language of feelings unfamiliar. However, conversations with several dads of children conceived through egg donation, revealed some anger (why us?, and why me? in the case of one man whose own fertility also came under suspicion during the investigation period), but on the whole they seemed to have less (or at least showed less) strong feelings than those experienced by women.

All the men I spoke to were very practical in their approach whilst at the same time being protective of their partner's feelings. Any sense of loss came during the pre-pregnancy time when they feared that they and their partner might not be able to become parents. Pregnancy was greeted with great joy, although experienced by two of the men as a time of high anxiety. One man expressed some, but not acute, sadness that his children did not carry genetic material from his partner and he, like the others I spoke to, found themselves avoiding calling attention to physical likenesses in the family. 'There are some conversations we just don't have,' one dad said.

My own husband very much mirrors these sentiments. When one of our donors did not produce any eggs he was disappointed but not as devastated as I was. He adores our children and like all the men I spoke to is a very involved, hands-on father. But throughout the whole process of investigation, treatment, birth and parenting, his feelings have been less extreme than mine and this has been both a source of irritation and support (i.e. only one of us can afford to fall apart here!). Like others, we have had to learn that having different responses is OK, even helpful sometimes.

The joy of becoming parents

It is hard to describe our joy at becoming parents or our sense of debt to our donors. Those not knowing the circumstances cannot understand why we are so besotted with our children and feel the novelty should have worn off by now! However, our feelings, if anything, are even stronger. I still find it hard to believe, and I always will, that I am a mother solely due to the selfless generosity of two women I will never meet (our children having been conceived before April 2005).

Of course not everyone falls in love with their child or children instantly. Bonding often takes a few weeks to fall into place. One couple found themselves feeling very remote from the ecstatic feelings expressed by relatives and friends following the birth of their twins. Pregnancy had been an anxious time and they needed space to adjust to the reality of at last being parents and time to 'tune in' to their babies, before the deep bonds of father and motherhood could be fully felt.

Sharing the information — who, what and when

I know someone who is adopted and if asked when they first knew they were adopted, replies, 'When did you know you weren't?'

I believe the same can be true with children born as a result of egg donation. All the literature and research suggests that honesty is the best policy. Not to disclose the facts until teenage years or adulthood can undermine trust in relationships and this is hard to re-build if someone feels they have been deceived for years. Secrecy creates distance and is nearly always felt at a sub-conscious level. Adults conceived through donor insemination have



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spoken about feeling different, not knowing why and assuming it was something awful to do with them.

Telling friends and family

Staff at our clinic advised us to tell relatives that we had used donor eggs (not all clinics are as forward-thinking as this one). This we did with no real negative results. We also told some close friends, all of whom, bar one, were overjoyed that we were to become parents, irrespective of the circumstances.

I know that there are some people who do not tell anyone, not even their GP, and some who will share the information with anyone who will listen. We are all different. Our way has been to follow the middle path.

Sharing information with young children

Children can start to be told how their family came into being from very early on and information added as they get older and can understand more. Some people chat to their babies about it to get used to expressing themselves and talking about the subject. There are some useful publications about how to tell children available through the Network, particularly *Our Story*.

One Network parent told her egg donation twins 'their story' – daddy gave mummy the seed, a kind lady gave mummy the egg and mummy had a nice warm place to put it.

I am, however, aware that no matter how precious our children are to us that we must not burden them with a sense of 'specialness' or with the trials and tribulations attached to their conception. Children want to be just like other children and not regarded as different, even if they will always be special to us.

Worries about teenagers

Like all parents we are keen to do 'the right thing'. Knowing that teenagers can sometimes say hurtful things to their parents may make you fear your children may one day reject you as 'not their real mother'. It is important not to get such comments out of perspective: remember children and especially teenagers can use whatever ammunition they can in the heat of an argument. It is quite normal for them to want to test our love and challenge the boundaries we establish. Provided we have been honest with them about their beginnings, we are in a strong position to handle provocative comments such as these sensitively and calmly. What children need for a healthy upbringing is security, nurture, care and boundaries provided in the context of a loving home. If these are present, then worries about the genetic relationships will be less of an issue.

Egg donation, motherhood and difference

Nurturing our baby in the womb, giving birth and breast or bottle-feeding foster a very close bond. All these things proclaim us as mother and separate us very clearly from the role of the donor, no matter how vital her part or how grateful we are to her for playing it. Children born through donated sperm have no difficulty in differentiating between their dad and their donor. Egg donation children have even better reasons not to confuse the two!

The wider world

Deciding who in the wider world should know the facts of our children's conception is an issue we grapple with constantly. Many Network parents inform the school, so that teachers are forewarned and can support a child who chooses to speak about their origins in the



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classroom or playground. Other parents believe it is the child's information, and when old enough to understand the consequences of sharing that information, the child can decide who to tell.

I hope that our children are never rejected because of the circumstances of their conception. Research tells us that growing up knowing how loved and wanted they are will give them resilience to cope with adversity of all sorts. One of the advantages of telling them the facts from an early age is that they take it in their stride and to them it seems perfectly normal.

To end I'd like to share with you some thoughts from another Network member, mother of a daughter conceived through egg donation –

'What we realised with hindsight is that those issues that were major obstacles (emotionally) when contemplating egg donation, paled into insignificance soon after our daughter was born. To our surprise, she was not born with flashing lights embedded in her forehead announcing to the world that she was the product of donated gametes. Many of the people, friends and family, with whom we shared the trials of five IVF attempts, two miscarriages and the subsequent search for an egg donor seemed to 'forget' the facts of her conception, once our daughter was born. It was simply a non-issue for them. They shared our joy at becoming parents.'

If you are contemplating using egg donation to build your family:

- make use of information meetings and support groups at your clinic, and join the DC Network, it is tailor-made for you
- don't cut yourself off from family and friends while you go through this whole process – they are a vital source of love and support
- give yourselves permission to be sad, even to grieve, that the mother of this future child is not also the genetic parent – then celebrate that medical science may make it possible to create a family in a different way!
- keep talking with your partner, but remember it's OK for each of you to handle things in your own way
- get on waiting lists quickly you will have plenty of time whilst waiting to come to terms with this new possibility and to try to resolve the many concerns and issues that inevitably will arise for each of you
- remember that the Network, family and friends will be there for you during all stages of treatment, pregnancy, and in the long haul of parenting – you do not have to do this alone.

With very best wishes

Rachel



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Further support and information

The Donor Conception Network was started in 1993 by a group of families who had all chosen to be open with their children about their origins. We wanted to help break the isolation felt by so many people using donor assisted conception methods, and to share our experiences of talking to our children, and family and friends, about how our families came into being. We have two national meetings a year, one in London and one outside, local groups in many areas, produce a Newsletter twice yearly, have a library of books, videos, audio tapes and articles that can be borrowed and, most importantly, we put people in touch with each other.

Network membership

You can join the network as an individual or a couple. Annual subscriptions are £15 (£5 unwaged). Join on-line using the PayPal facility,

download a membership form from the website or simply send a cheque to our PO Box below.

The Donor Conception Network is a registered charity, registration number 1041297

Useful addresses

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Website: www.hfea.gov.uk
Tel: 020 7291 8200

British Infertility Counselling Association
Website: www.bica.net

Daisy Network – Premature Menopause Support Group
Web site: www.daisynetwork.org.uk

Letters in the Planning a Family Series

A letter from Walter to would-be DI Dads
A letter from Olivia to would-be DI Mums
A letter from Olivia to would-be DI Parents about 'telling'
A letter from Emily to would-be single mums
A letter from Rachel to would-be egg donation parents
A letter from Bridget and Andrea to lesbian women

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