In the name of Allah

Pregnancies of Donor Egg



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Ovum donation is indicated for:

✓ Older women

- Primary ovarian failure
- Surgical oophorectomy
- After radiotherapy or chemotherapy
- ✓ Poor oocyte quality
- ✓ Multiple failures of IVF
- ✓ Genetic disorders
- ✓ Turners syndrome
- ✓ Advanced maternal age





Donor egg should be:

✓ <u>Under 35</u> years of age, ideally (<u>23-30</u> years) Due to the increased risks of birth defects (such as Down's syndrome) and miscarriage Eggs from older women may also affect pregnancy rates

✓ It is a requirement for donors to have a BMI<30

For their own safety



✓ Donors are screened for:

- karyotyping
- Virology
- •Psychometric testing
- Detailed family history taking

It is important that donors are recruited carefully to ensure there are no adverse effects for the subsequent pregnancy



IVF treatment can increase the risk of obstetric complications:

Hypertensive disorders ✓ Gestational diabetes (GDM) Rate of caesarean section (CS) Preterm delivery ✓ Post-partum hemorrhage (PPH) Low birthweight Small for gestational age infants (SGA)



Obstetric Complications in donor egg pregnancies





Hypertensive Disease

Most common complication in pregnancies with OD

Pregnancy-induced hypertension (PIH) and pre-eclampsia (PET): 16 to 40% of women with OD

 PET specifically affecting 3-5% of all pregnancies



✓ Both OD & IVF pregnancies with autologous ovum increased the risk of PIH and PET compared to those who conceived spontaneously

✓ PET rates were 3 times higher in OD pregnancies than those with spontaneous conception

Rates of hypertensive disease in OD pregnancies compared to autologous IVF:
OD were at significantly higher risk, nearly 4 times

✓ Twins have a statistically significant increase in both PIH (2.5 times higher) and PET (3.1 times higher) when comparing women with OD to those with autologous ovum

•Age factor

•Immunological effects on the placenta:

Rate of hypertensive disease is higher in those who had donor ovum from an unrelated person, compared to when the donor was a sibling



Gestational Diabetes

GDM were increased in those with OD pregnancy, not statistically significant





Small for Gestational Age

 Risk of an SGA infant was nearly 2 times more likely in OD pregnancies than autologous IVF pregnancies

A meta-analysis of 23 studies found that OD pregnancies are associated with a significantly increased risk of low and very low birthweight

OD were found to be diagnosed with oligohydramnios more often



Intrauterine Death

Increased risk, although this was not statistically significant

There are no meta-analyses reporting on early pregnancy loss or birth defects



Preterm Delivery

 Increased risk of preterm delivery in OD pregnancies compared to autologous IVF pregnancies (nearly 1.5 times, with an incidence of 17%)





Risk of C/S

 Increased nearly threefold in OD pregnancies compared to autologous IVF pregnancies

- •Both maternal age and multiple pregnancy were also noted to increase the rate of CS
- •More elective CS due to the anxiety of the obstetrician with OD pregnancies & IVF due to premature ovarian insufficiency or who were poor responders



Post-partum Hemorrhage

- Increased risk in PPH (3.5 times, with an incidence of 4.2-17.3%)
- Statistically significant increased risk of blood transfusion and hysterectomies
- Risk factors for PPH in OD:
- ✓ Multiple pregnancy
- ✓ Obesity
- ✓ Advanced maternal age

Increased chance of requiring an operative delivery

Finally:

Ovum donation is an effective method of ART for women who are unable to utilize their own ovum for IVF

✓ IVF pregnancies are known to be associated with increased risks for both mother and baby, and we now know that OD increases this risk further, specifically with regard to hypertensive disease in pregnancy, PPH and risk of CS







- Increased risks of ovum donation pregnancies
- •Preconception medical review

•Screening for pre-existing disease such as hypertension and diabetes prior to any fertility treatment



Advice regarding eSET (elective single embryo transfer)

Careful follow-up during the antenatal period

 Ensure that hemoglobin is optimized prior to delivery, whether that is with oral iron, iron transfusion or blood transfusion

Women should deliver in a unit with access
to blood transfusion and cell salvage



Future research:

 Effective strategies to decrease the risks of OD pregnancies to both mother and baby antenatally, in labor, and postnatally

 Maybe OD should be considered a risk factor for starting aspirin antenatally

 Uterine artery Dopplers may be useful in this population to identify those more at risk of hypertensive disease in pregnancy

Psychological impact of OD pregnancies SBMU



