

Donor Insemination treatment (DI) involves the use of sperm from a donor. It can be used if the male partner has no sperm or very poor sperm or risks passing on an inherited disease. DI may also be used to treat single women or lesbian couples.” (HFEA-The Patients’ Guide to DI, 2000, p2).

Changes in the law which came in to effect in April 2006 mean that donor anonymity has been removed. This means that when a child conceived as a result of using donated gametes reaches the age of 18, they are now legally allowed to obtain identifying information about the donor and could potentially then trace their genetic parent. Couples receiving treatment will not have access to this information and can still only be given non-identifying information regarding the donor.

All our semen donors are carefully screened to ensure that they do not carry any sexually transmitted infections or have any family history of genetic diseases. All semen is quarantined for at least six months, after which the screening tests are repeated. Only then do we use the semen for insemination.

Under regulations governed by the Human Fertilisation and Embryology Authority (HFEA) we can only store donated sperm for a maximum of ten years from the date it was frozen. At the end of the ten year storage period the sperm must be discarded. Donors are limited to creating a maximum of 10 families.

Donors are matched to couples for height, build, eye and hair colour where possible.

Due to the shortage of sperm donors in the UK it may unfortunately not always be possible to match patients who wish to use UK donated sperm. This becomes even more difficult if the couple wishes the donor to come from a specific ethnic or religious background.

All couples receive counselling before starting treatment. The counselling provides the opportunity for a discussion concerning the implications of using donated gametes and regulations of the Human Fertilisation and Embryo Authority (HFEA) are also discussed. Further independent counselling is also offered to all couples.

Patients will be offered three donor insemination treatment cycles. Our data shows that of the women who achieve a pregnancy 78% of them will be pregnant within the three cycles of treatment. If a pregnancy does not occur, a consultation will be arranged with a unit doctor to discuss future options.

This service is patient funded. Charges are therefore made for the DI treatment cycle, as well as for the initial consultation and for any drugs which may be prescribed.

Please see Current Unit Price List

Please note that many issues influence the chance of pregnancy, particularly the woman’s age, weight and lifestyle factors, such as smoking and alcohol intake.

We strongly advise you to go to the Food Standards website: www.eatwell.gov.uk/agesandstages for up to date advice.