The Rough Guide to insemination: reproductive tourism for insemination due to different regulations.

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ESHRE campus Genk, 13-15 December 2009



## Cross-border movements

Three parts should be distinguished:

#### 1. Recipients cross borders

French lesbians

#### 2. Sperm cross borders

Cryos exports 80% of its 20.000 donations to 400 clinics in 60 countries

### 3. Donors cross borders

Canadians go to Australia (gives a new meaning to travel expenses!)

Caucasians go to India

Swedes go to Denmark

almost 20% of the UK sperm donors are from overseas



## Canada - United States

In 2008, Canada had 33 donors. Total population: 33.5 million Number of sperm banks has diminished

- before 2004 because of more stringent requirements for donor screening and semen processing
- after 2004 because the Assisted Human Reproduction Act forbade payment of donors above expenses
- Now transition period: import sperm from paid donors in the US and Europe!

| Patients<br>going to US | Canada | Europe | India | Latin America | Australia / New<br>Zealand |
|-------------------------|--------|--------|-------|---------------|----------------------------|
| Donor insemination      | 88     | 44     | 3     | 73            | 7                          |

Hughes, 2009



# Number of foreign patients per type of treatment between 2003 and 2007 in Belgium

|                           | Number of patients                      |            |            |      |      |      |  |
|---------------------------|---|------------|------------|------|------|------|--|
| Type of treatment         | Mean number of<br>cycles per<br>patient | 2003       | 2004       | 2005 | 2006 | 2007 |  |
| Sperm donation            | 4,0                                     | <b>518</b> | <b>491</b> | 572  | 726  | 764  |  |
| Oocyte donation           | 1,6                                     | 185        | 152        | 153  | 136  | 120  |  |
| Embryo donation           | 1,9                                     | 11         | 15         | 18   | 13   | 17   |  |
| IUI partner               | 3,3                                     | 34         | 46         | 45   | 48   | 58   |  |
| IVF own gametes           | 2,4                                     | 94         | 131        | 237  | 264  | 251  |  |
| ICSI ejaculated sperm     | 2,3                                     | 385        | 426        | 550  | 645  | 640  |  |
| ICSI non-ejaculated sperm | 2,1                                     | 131        | 126        | 146  | 122  | 125  |  |
| PGD                       | 1,9                                     | 99         | 104        | 131  | 166  | 141  |  |
| All treatments            |   | 1456       | 1491       | 1853 | 2119 | 2117 |  |

Pennings et al., 2009



## Foreign patients coming to Belgium from 2005 to 2007 for sperm donation





### Country of origin of patients going abroad for sperm donation



### Destination of patients for sperm donation



#### **Destination of patients from Germany**



#### Destination of patients from the UK



# Evolution in time of Dutch patients coming to Belgium per treatment type



June 2004: Law 'Donor data': abolishment of donor anonymity

**Bioethics Institute Ghent** 

### Italian patients coming to Belgium



June 2004: Law 40 on ART: prohibition of all gamete donation

**Bioethics Institute Ghent** 

## Conclusions

- There is a strong correlation between restrictive laws or guidelines on sperm donation and the number of patients leaving a country. These restrictions may be focused on
  - the donors (altruistic, identifiable etc.) frequently resulting in scarcity and long waiting lists
  - the recipients (single, lesbian etc.)
  - may be a downright prohibition.
- Restrictions on import of sperm will lead to more travelling by patients.
- Greater efforts to recruit donors in each country could reduce the need to look for sperm abroad either by patients going there or by clinics importing sperm.

