Genetic Screening Practices for Oocyte Donors in the United States

Grace VanNoy, Laurel Calderwood, Kathleen Berentsen, MaryAnn Campion Boston University School of Medicine, Boston, Massachusetts Counsyl, Inc., South San Francisco, California

<u>Objective</u>: To assess the practices associated with genetic carrier screening of potential oocyte donors in the United States.

<u>Methods</u>: A survey was designed to assess: 1) who is involved in genetic screening of potential oocyte donors, 2) which conditions are being screened for, 3) the informed consent process, and 4) how the results of genetic screening are managed. The survey also collected information on the demographics of participants. Setting: Oocyte donor facilities. Participants: Representatives from oocyte donor facilities. Intervention: None. Main Outcome Measure: Descriptive data.

Results: Responses from twenty-three eligible facilities were received. Most facilities (21/22) screen for certain genetic conditions regardless of ethnicity or family history, with the majority using an expanded panel (14/20). One quarter (4/16) of facilities addressed all components of informed consent as defined by the American Society of Reproductive Medicine (ASRM). Many professionals were involved in screening potential oocytes, and the minority of facilities (6/20) reported employing genetic counselors.

<u>Conclusions:</u> Expanded genetic carrier screening for potential oocyte donors is widely occurring with much variability in practices, including the informed consent process. Most facilities are not covering all ASRM-defined aspects of informed consent. In order to ensure appropriate protections are provided to potential oocyte donors undergoing genetic carrier screening, the voluntary nature of existing recommendations may need to evolve in the face of rapidly expanding testing platforms.