

Change Notification for the UK Blood and Tissue Services

Notification date	8 September 2026
Effective date	6 October 2026
Implementation	To be determined by each Service

CN 36-2026

Fertility

Content changed	Type of change	Guidelines affected
1 Fertility	Updated entry	Bone marrow



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Note: this document indicates inserted and ~~deleted~~ text. This formatting will not apply in the published text.

1. Fertility

Guidelines affected	Reason for change
Bone marrow	The eligibility of recipients of donated eggs or embryos is now specified. Inclusion of criteria regarding underlying or associated conditions. Replacement of reference to specific drugs with criteria to preclude donation whilst being monitored for pregnancy. Addition of 'See if relevant' link to Surgery entry to facilitate assessment of donors who have had fertility-related procedures. Further additional information for donors who have had a fertility-related procedure not due to a primary fertility problem.

Essential information

Includes	Infertility
Obligatory	Must not donate if: - Under investigation Any underlying cause or reason for fertility treatment precludes donation Undergoing current fertility treatment and monitoring for pregnancy, or being monitored for pregnancy following recent completion of fertility treatment Less than 12 weeks after completion of treatment with clomiphene (Clomid®) Less than 12 weeks after completion of treatment with tamoxifen - Has ever been given human gonadotrophin of pituitary origin - The donor knows that they have ever been treated with Metrodin HP®. Note that any donor who has only received fertility treatment after 2003 in the UK will not have received Metrodin HP®.
Discretionary	If the donor: Is not undergoing fertility investigation or treatment, and Is fully recovered from any fertility-related procedure as applicable, and Is not being monitored for pregnancy, and

- d. Does not have any underlying or associated condition that precludes donation, and
- e. Has never received treatment with human gonadotrophin of pituitary origin, and
- f. Has never received any other treatment that precludes donation, accept.
- 2. If a recipient of donated egg(s), embryo(s) and/or sperm is otherwise eligible in regard to fertility investigation and treatment, and any underlying or associated condition, accept.

~~Take care to exclude pregnancy.~~

~~If treated exclusively with non-pituitary derived gonadotrophins, accept.~~

Supporting information

See if relevant	• Prion-associated diseases • <u>Surgery</u>
Additional information	The use of human gonadotrophin of pituitary origin (follicle-stimulating hormone [FSH] and luteinizing hormone [LH]) had stopped in the UK by 1986. The situation in other countries varied so specific dates cannot be given. The <u>exclusion of donors undergoing current monitoring for pregnancy following fertility treatment</u> 12-week period is an additional safeguard to avoid taking a donation early in a pregnancy. There is no evidence that transfer of tissues (eggs or embryos) between individuals might lead to the spread of vCJD. Metrodin HP® was withdrawn by the Committee on Safety of Medicines in 2003 and, following advice from the Medicines and Healthcare products Regulatory Agency (MHRA), the precautionary principle has been applied to withdraw donors who have been treated with this product. Donors treated for infertility after 2003 in the UK will not have been treated with this product, <u>and there is then no need to confirm that the donor was not treated with Metrodin HP®. Donors who received fertility treatment prior to 2003, or who received treatment outside the UK after 2003, could potentially have received Metrodin HP®. However, such donors who have no recollection of having received Metrodin HP® may be accepted, with the Transplant Centre informed.</u> <u>Recipients of donated eggs, embryos and sperm are eligible to donate. This is in accordance with the Advisory Committee on the Safety of Blood, Tissues and Organs (SaBTO) microbiological safety guidelines. Donors who have undergone egg donation, egg collection for fertility preservation, or surgical</u>

sperm retrieval should be assessed regarding any hormone treatment they have received and by using the 'Surgery' entry.

Fertility preservation is available for:

- individuals undergoing treatment (for cancer but also for some benign conditions) that puts them at risk of becoming infertile
- individuals considering gender transitioning
- elective social egg freezing for individuals who wish to delay fertility

Reasons that donors may be undergoing treatments and procedures for fertility include polyendocrine metabolic ovarian syndrome (PMOS; formerly polycystic ovary syndrome, PCOS), endometriosis, testicular problems and genetic conditions. For 1 in 4 individuals, the cause of their fertility problems may not be known. Sensitive questioning may be needed to establish any underlying cause or associations that may be relevant to the donor's health and eligibility.

Donors with inherited conditions (e.g. mitochondrial disease) may undergo fertility-related diagnostic and assistance treatments and procedures. Unaffected carriers may be eligible to donate if they otherwise fulfil the criteria.