Phase 2 – Node coding report Belgium data (2018)

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| **Name** | **Sources** | **References** | **Description and/or related research questions** | **Examples (translated into English)** |
| Alternatives for donation | 1 | 3 | All mentioning of alternatives for treatment with donor eggs | Couples who want to stay in the system of anonymous donation but for whom the waiting time has run up significantly (e.g. because a first attempt failed), will also be informed about the alternatives of embryo donation or of adoption. |
| Altruism in a broad way\giving | 4 | 7 | All quotes that frame egg donation in terms of giving or eggs in terms of gifts | The woman who gives her eggs (the donor) [schenken: same word for offering someone a present]  Donation is literally a matter of giving and talking: sometimes you as a wish parent only have a chance seeing your child wish fulfilled when you can have at your disposal sperm, eggs or embryos from others;] The other way around, you can, as a patient who undergoes a  Medically Assisted Reproduction treatment, be prepared to donate (a part of) your eggs, sperm, or embryos to help other wish parents.  The egg donor gives the eggs anonymously to the fertility centre. These anonymously donated eggs will be fertilized with sperm cells of the male partner of the egg acceptor. |
| Altruism in a broad way\giving\gratitude of recipients | 1 | 1 |  | [testimonial of recipients] 'It is very difficult for us because we are fully dependent on someone else for our most intimate, greatest dream. Still, we are grateful that this technique exists. When our parents became mother and father, egg donation did not exist.' |
| Altruism in a broad way\happiness or dream of recipients | 2 | 3 |  | Anonymous donors - join in building happiness  We are very aware of the investment that we ask for, given that we underwent already 5 attempts ourselves. Still, we remain hopeful that someone will want to give us a small building stone of happiness. By donating [af te staan: to give away/to relinquish] eggs, you give us a small building stone for new life. |
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| Altruism in a broad way\helping or solidarity | 6 | 8 | All text where the donor or the donation is framed as helping or as solidarity | This technique has helped a lot of couples up till now.  Help others with their child wish. Get acquainted with our egg donation program.  The purpose in donating gametes or embryos is to help the person who cannot, for whatever reason, use their own gametes, to still get pregnant.  Do you consider to donate eggs? GREAT! You help people in making their dearest wish, their child wish, come true. |
| Anonymity | 7 | 19 | All referrals to anonymity |  |
| Anonymity\advantages and disadvantages of anonymous vs known donation | 1 | 1 | Preventing pressure from the donor; protecting parties from conflicts, conflicting interests; preventing problems by questions of blame when things go wrong; avoiding differences of opinions about disclosure; avoiding differences in expectations about the level of involvement of the donor (from both perspectives) | 'When you as an acceptor couple bring your own donor, the pressure can be big to opt for a known donation.' |
| Anonymity\anonymity just mentioned | 3 | 4 | In describing aspects of egg donation anonymity is mentioned when this is not the focus of the sentence. |  |
| Anonymity\anonymity mentioned as an advantage in its own right | 1 | 1 |  | Two advantages: by bringing a donor, you can be helped quicker, the anonymity of the donor is guaranteed. |
| Anonymity\anonymous donation is preference of the centre | 3 | 4 |  | Both the [centre] and the law maker prefer anonymous donation. Anonymity is namely a good method to protect all parties from disappointment, conflicts, opposite interests. How well your relationship today is, it is unpredictable how it will be in five or ten years time. [followed by five bullet points describing potential conflicts and problems]  Known egg donation can only be done after a thorough psychological screening by the psychologist of our centre. Our preference goes to anonymous donation. |
| Anonymity\Explaining anonymity | 6 | 8 |  | Data of the donor are inaccessible in anonymous donation  Am I anonymous as a donor? Both anonymous and non-anonymous donation is possible. When you opt for anonymous donation, neither the aspiring parents, nor the potential children that would result from this, know who you are. Vice versa, you will also not know in what lawparents your eggs will be used and or if there are any children born from it.  Anonymous donation. This means that the donor does not know to whom she gives eggs and the accepting woman will never know the identity of the donor.  The Belgian law guarantees absolute anonymity for you as egg donor before, during and after the egg donation. The recipients and the child will never find out who the egg belongs to.  You stay anonymous. Just like with blood donors, you as an egg donor remain anonymous. |
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| Anonymity\law makers preference for anonymity | 2 | 3 |  | Should anonymous donation be kept or does each donor child have the right to know the identity of his or her donor? Also in Belgium, that question lies on the table [is open for discussion]. In the Netherlands and the UK, anonymous donation was forbidden, after which the number of candidate-donors plummeted. Also Belgian research shows that a third to half of the potential donors would drop out when their anonymity would not be guaranteed. |
| Anonymity\link with number of donors | 1 | 1 | Especially the abolishment of anonymity is linked to a decline in number of donors | See quote above |
| Anonymity\pledges and requests | 1 | 2 | Centre promises anonymity to the donor or recipient; centre asks donor and/or recipient not to search for the other party | Do you let me know how many eggs will be aspirated, how many eggs were fertilized and whether the recipient became pregnant? No, you will not get any information about the number of aspirated eggs and the number of children that were conceived with your eggs. As an egg donor you are bound by law not to track down the identity of the recipients. Inversely, we guarantee you that the recipients will likewise not get any information about who you are. |
| Anonymity\procedural aspects regarding anonymity | 1 | 1 |  | Naturally, in anonymous donation, there will be strict insurance that that the acceptor and the donor will never meet each other. |
| Anonymity\Types of anonymous donation | 3 | 5 | Mentioning and/or describing types of anonymous donation, specifically announced or described as such: anonymity is central feature |  |
| Centers' aim | 2 | 2 | The centre makes efforts to increase the supply | There still is a lack of egg donors. The centre is always looking for new egg donors.  The [centre] is doing everything possible to excite [stimulate; 'warm maken'] couples who have a surplus of material at their disposal, to donate that. |
| Child wish |  |  | Overarching theme for nodes related to the child wish | Sperm and egg donation give couples who do not have (usable) eggs or sperm the opportunity to become pregnant anyway thanks to 'foreign' material. |
| Child wish\child wish depending on egg donation | 8 | 16 | Couple's child wish cannot be fulfilled but for the availability of donor eggs | When a patient does not have any eggs or does not have any good eggs, she can still get a child of her own with the help of an egg donor who undergoes an IVF treatment. […] The eggs from the egg bank can be donated to women who do not have eggs of their own anymore or who cannot use their eggs because of a genetic problem. Some women go through menopause very early (before the age of 40), others have lost their eggs because of cancer or a medical treatment. By fertilizing these donated eggs via ICSI with the sperm of their own partner these women can become pregnant anyway.  Sperm or egg donation is for many couples and single mothers the only chance for a child of their own.  Sometimes the child wish of a woman or a couple can only be fulfilled when they can get sperm cells or egg cells from others. |
| Child wish\child wish described as paramount | 1 | 2 | Texts where recipients' child wish is described as 'the dearest wish', the most important wish' etc. |  |
| Communication style and material |  |  | Way information is communicated on the sites | Help others with their child wish. Get acquainted with our egg donation program |
| Communication style and material\confirmation messages ADVERTISING TYPE | 3 | 4 | Type of feel good messages or endorsement of the potential donor ; sounds like marketing strategy (perhaps we need to look at that type of literature to categorise these messages) |  |
| Communication style and material\inconsistencies | 1 | 1 |  | In our centre we only do anonymous donation. This can be done in three ways: either you are a voluntary anonymous donor or you also do a fertility treatment and you want to donate a part of your eggs. It is also possible that a friended couple with fertility problems has talked to you about donating eggs. By donating your eggs anonymously to someone else, that friended couple will receive other eggs from the egg bank without a waiting time. This is called cross donation. Only sisters can conduct known donation between themselves. |
| Communication style and material\Sounds like 'to dissuade from' | 3 | 8 | Text that can be read as advise to think things through really well, say that it might not be for you, possibly advice against. Could be read as a form of discouraging | Egg donation is not evident. It is a complex treatment about which you and your potential partner should reflect carefully.  [About conversation with counsellor] This conversation is not easy and can be confronting. However, it has a protecting function. The aim is to talk through all facets of egg donation and to estimate the psychological implications of those facets. Some people do not feel completely at ease during this first conversation. There will be a lot to discuss and about some things you may not have thought before. The fact that one can be refused [as an egg donor] will definitely play a role here  Donating eggs is not straightforward. It demands a lot of a woman, both physically as well as psychologically. |
| Communication style and material\testimonials of donors | 1 | 1 |  | I have been able to donate 21 good eggs! So that is very good! I have been able to help several people, the people for whom I donate and still a few extra eggs for people on the waiting list! Terrific! |
| Communication style and material\Testimonials of recipients | 1 | 3 |  | It is very difficult for us because we are fully dependent on someone else for our most intimate, greatest dream. Still, we are grateful that this technique exists. When our parents became mother and father, egg donation did not exist.' |
|  |  |  |  | We are very aware of the investment that we ask for, given that we underwent already 5 attempts ourselves. Still, we remain hopeful that someone will want to give us a small building stone of happiness. By donating eggs, you give us a small building stone for new life. |
| Communication style and material\Use of campaign material of others | 1 | 1 |  | Not my egg, very much my daughter.' |
| Comparison with sperm donation | 3 | 3 |  | From a medical point of view, egg donation is not as straightforward as sperm donation.  Donating eggs is more radical/drastic than donating sperm cells. The procedure will run over a number of weeks and can cause physical discomfort. Therefore, egg donors need to be strongly motivated. That is way there is a great lack of egg donors. |
| Contract | 1 | 6 | Mentioning of the contracts between donor and centre or between recipient and centre | Before any medical treatment related to medically assisted reproduction can be started, the fertility centre has to be in possession of the contract between the aspiring parent(s) and the [centre]. The signing of an agreement, depending on the treatment, by both parties, will indicate that the aspiring parent(s) are well informed by [the centre] and that they consent to their treatment. |
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| Couples as prototype of recipient | 1 | 1 | All text referring to couples as the prototype of recipient (this takes attention away from single moms for instance). | This technique has helped a lot of couples up till now. |
| Donor profile | 7 | 14 | What characteristics or criteria are specified? | Who can become a donor? In principle each healthy woman between 18 and 35 years old. However, we mostly choose candidate donors who have been pregnant.  When you, as a woman, undergo an IVF-treatment with donor material (in casu donor sperm), the [centre] will try to motivate you to become a (partly) donor of eggs via a system of 'solidary donation'.  It is obvious that not everyone can be considered an egg donor. There is a factor of age: for sperm donors the limit is 44 years; for egg donors (and embryo donors) it is 35 years. There will only be allowed an exception to this rule in case of known donation and with explicit consent of the acceptor couple.  Who can become a donor? Young women between 24 and 36 years old who may or may not have fulfilled their own child wish can become a candidate donor. Donating eggs is more radical/drastic [ingrijpender] than donating sperm cells. The procedure will run over a number of weeks and can cause physical discomfort. Therefore, egg donors need to be strongly motivated. That is way there is a great lack of egg donors. |
| Egg bank | 3 | 8 | All text that mentions the banking of eggs but also of sperm and embryos when mentioned in relation to egg donation | Each month we match all available eggs in the egg bank to acceptors on the waiting list.  Become a sperm or egg donor. With us you can donate sperm or eggs anonymously and thus help people with fertility problems. We offer a bank with anonymous egg donors and sperm donors.  What is an egg bank? Just like with sperm cells, also egg cells can now be frozen and stored in an egg bank. The eggs from the egg bank can be donated to women who do not have any eggs anymore or whose eggs cannot be used because of a genetic problem. |
| Egg donation within lesbian couple | 1 | 1 |  |  |
| Ethical aspects |  |  |  |  |
| Ethical aspects\autonomy | 2 | 3 | All text quotes referring to the free choice of the donors | The first meeting with the counsellor always happens before the start of the treatment. The aim of this first conversation is to assess the motivation for the donation, check whether this is a well-conscious choice and assess what your capacity/strength [draagkracht] and that of your potential partner is. Together we will assess whether there could be possible problems during the treatment and doubts are discussed |
| Ethical aspects\Beneficence | 1 | 1 | All texts where protection of the donor or acceptor are mentioned (sometimes parts of texts coded under risks can fall under this code; I did not double code those yet = To do) | [Especially when something goes wrong with the pregnancy of if the child would have an inheritable condition, chances are significant that the relationship between donor and acceptors would become clouded because of guilt questions. But even if everything goes well, conflicts are not a priori ruled out. There could be a difference of opinion about the level of openness towards the child about his or her origin |
| Ethical aspects\donor responsibilities, rights or duties | 7 | 17 | All text where things are framed in terms of responsibilities, for example avoiding a certain complication (pregnancy) in terms of taking adequate precautionary measures. | In case, as a consequence of the donation, children would be born with inheritable and/or physical and/or mental defects [afwijkingen], then the physician will inform the donor(s) of this in his/her own interests and when they want that. Therefore, it is important that the donor signals every address change to the hospital. On the other hand, the donor will report to the centre every serious worsening of his health condition as well as all inheritable diseases that are currently unknown.  [Described in light of risks] … At the end of the stimulation treatment sexual abstinence has to be complete; but also after that, until some days after the egg retrieval, you have to abstain from sexual intercourse without condom. This to avoid that a left behind egg would be fertilized.  As an egg donor you are bound by law not to track down the identity of the recipients. Inversely, we guarantee you that the recipients will likewise not get any information about who you are.  Egg donor: rights and duties. As a donor, you have a number of rights and duties: You remain anonymous. Just like blood donors ; Known egg donation is only possible after a thorough psychological screening by the psychologist of our centre. Our preference goes out to anonymous donation  A (temporary) smoking cessation is expected during the treatment. |
| Ethical aspects\ownership of eggs | 5 | 6 | Quotes about who received the eggs / to whom they were donated / whom they belong to | What happens after the donation? Once donated, you fully give up the donor material. A donation is thus irreversible.  The egg donor gives the eggs anonymously to the fertility centre.  Can I repeal my egg donation? Donating eggs is unconditionally and irreversible. This means that you will give up all your rights to the donated eggs. You cannot claim the children that are conceived by the use of the donated eggs. |
| Ethical aspects\Use of personal data | 1 | 1 |  | Use of medical data. The aspiring parent(s) will agree in the contract that their medical data will be available for the physicians of the [centre] who are involved in their treatment and also give permission to pass on these data to internal and external organizations for the national and international registration\* and inspection (\* this will happen in a coded format, so the receiver of this information cannot find out the identity). |
| Financial compensation payment or reward | 5 | 6 |  | The donation is free, but possibly the consulted fertility centre can offer a compensation of expenses. Trade is forbidden.  Is there a financial compensation? The Belgian law does not allow trade with human body tissue. You will therefore not be financially rewarded for your donation. The law does allow a compensation of expenses.  Compensation. The medical tests, hormonal treatment and egg retrieval will be fully compensated. The in between invoices will be paid by you. [this one sentence is repeated further in the information] After the egg retrieval you will be reimbursed for these payments. Besides this, there is also a compensation of expenses  Do you get a compensation? You do not get a financial reward for egg donation. That would be seen as 'trade with human bodily material' and is forbidden by the Belgian law. With egg donation you cannot make a profit, but it will also cost you nothing. The tests, the intervention and the follow-up are free and the expenses you make, for instance for transport, will be compensated. |
| Framing egg donation |  |  | Very wide overarching node: everything where egg donation is explained, described or given meaning |  |
| Framing egg donation\Definition of egg donation | 2 | 4 |  | In egg donation, a donor donates her eggs to a couple that would like to have children. In the lab one brings one or more donated eggs together with the sperm cells of her partner. When the fertilization is successful, the embryo or embryos will be transferred to the womb of the woman of the couple. This transfer is painless.  Egg donation is the donation of unfertilized eggs by a donor. These eggs will be given to a woman who has a well functioning womb but has problems with making eggs, or produces no suitable eggs. |
| Framing egg donation\new life | 2 | 3 |  |  |
| Genetic link (versus nurture) | 2 | 2 | All text about the genetic link between parents and children or within families OR descriptions where the impact (on upbringing and the child itself) of a genetic link versus nurture is described | [in relation to known donation] For you the argument of loyalty can play a role: you asked someone as a donor whom you trust, with whom you share (family) ties, whom you resemble, with whom you have or have not a shared genetic history.  How important is the genetic link? In our culture we attach a lot of importance to the genetic link between parent and child. Although we know well enough that parenthood is far more than that. The genes (DNA) that you pass on, are only one aspect in a complex whole. The interaction with the environment and the upbringing make the child tho who it is. As an egg donor you have a genetic link with the children, but that is not parenthood. Parents of donor children sometimes here that the child resembles the mother. That is not so strange. A child will copy behaviour and interests of the parents. Moreover, the fertility centre tries to match the physical appearance of the donor and the parents as much as possible. |
| Information FOR the donor | 3 | 3 | All text referring to information for the donor about number of eggs, pregnancies, births, recipients, etc. | In case, as a consequence of the donation, children would be born with inheritable and/or physical and/or mental defects [afwijkingen], then the physician will inform the donor(s) of this in his/her own interests and when they want that. Therefore, it is important that the donor signals every address change to the hospital. On the other hand, the donor will report to the centre every serious worsening of his health condition as well as all inheritable diseases that are currently unknown.  After the treatment, there will be no information given about the number of eggs, the distribution amongst acceptors or the result of the treatment.  Do you let me know how many eggs will be aspirated, how many eggs were fertilized and whether the recipient became pregnant? No, you will not get any information about the number of aspirated eggs and the number of children that were conceived with your eggs. As an egg donor you are bound by law not to track down the identity of the recipients. Inversely, we guarantee you that the recipients will likewise not get any information about who you are. |
| Law and policy | 5 | 13 | Referrals to law, policies or to debates about policy or law adaptations | The general rule is that the 'recipient' (acceptor) does not know the donor, and vice versa. The law from 2007 on medically assisted reproduction and everything that is related to that related to donation, admittedly leaves the option of known donation open, but implies in the formulation of the rules however, a clear [big; 'grote'] preference for anonymity.  Who are legally the mother and father? In Belgium the law makes no distinction between couples who conceived naturally and couples who used donor material. [Now a number of bullet points are listed about how the law considers parenthood; I will list only the first] the woman who gave birth to the child, is always the mother |
| Mentioning of the donor child | 5 | 10 |  | As a donor, you bear no legal, financial or other responsibility towards the child that is born from your eggs. Before the donation, you sign a statement which states that you give away your genetic material. The aspiring parents are the legal parents from the moment of the fertilization. |
| Parenthood | 3 | 3 |  | From the moment of the insemination [interesting that this is also used in the material about egg donation], the rules of lineage count in the advantage of the aspiring parents, as stated in the civil law.  Who are legally the mother and father? In Belgium the law makes no distinction between couples who conceived naturally and couples who used donor material. [Now a number of bullet points are listed about how the law considers parenthood; I will list only the first] the woman who gave birth to the child, is always the mother; |
| Partner of egg donor | 1 | 3 | All mentioning of the partners of egg donors | It is a complex treatment about which you and your potential partner should reflect carefully; [...] In contrast to known donation, the presence of the potential partner during the conversations is not obliged in anonymous donation [...] The first meeting with the counsellor always happens before the start of the treatment. The aim of this first conversation is to assess the motivation for the donation, check whether this is a well-conscious choice and assess what your capacity/strength and that of your potential partner is. Together we will assess whether there could be possible problems during the treatment and doubts are discussed |
| Patient organisations | 1 | 1 | Referrals to patient organisations for more information on egg donation |  |
| Procedure or procedural requirements | 8 | 33 | practical descriptions of the procedure for the egg donor (administrative steps to be taken, etc.) | Despite the thorough selection of donors, there is always a danger that there are unwanted or unknown inheritable defects present in the donor gametes.  How does a donation proceed? To make sure that several eggs would ripen, hormones will be administered. This hormonal treatment can bring along some physical discomforts which will disappear spontaneously afterwards. The pick up of ripe egg cells is done under a light anaesthesia. There is always a small risk for infection, however, usually this procedure passes without problems.    What is expected from you as a donor? You have to (be able to) make time for the tests and visits to the hospital. Because of repeated blood tests and ultrasounds, it comes down to you being available for a while; You have to be prepared to undergo a hormonal treatment that will stimulate your ovaries to produce several ripe eggs. The total treatment lasts about two weeks. The last days before the punction of the eggs [collection] you can experience a light swelling of the abdomen. Sometimes cysts will be formed, a rather innocent phenomenon in itself. Only when they produce hormones themselves, the cysts will be removed via aa light procedure under ultrasound verification.    For the collection of the eggs, you have to undergo an intervention. The egg punction is a light intervention. All necessary medical precautions are taken by the chance of an infection can never be completely excluded. And each infection is a risk for your fertility. |
| Procedure or procedural requirements\matching | 3 | 7 |  | Furthermore, we strive for a good 'match' between donor and acceptor (couple). We try, when possible, to create a fit with the blood group of the donor and his/her physical characteristics. Therefore the following tests are done: [1] the blood group and the rhesus factor of the donor is identified [2] the phenotypical profile of the donor is mapped, this means the characteristics of the appearance [or external characteristics] like colour of skin, colour of eyes, hight, etc. |
| Procedure or procedural requirements\Number of times you can donate | 1 | 1 |  | Most fertility centres allow three egg donations. The number of donations is limited because it is an intensive procedure for you as a donor. The fertility centres follow this carefully. With one donation, you can help one or more women. |
| Procedure or procedural requirements\SPARE eggs and number of eggs | 4 | 11 | All descriptions of what happens to eggs that are not immediately used for a recipient. Also texts where number of eggs are mentioned. | Supernumerary eggs will be cryopreserved  With one donation you can help 1 of several women to get pregnant.  I have been able to donate 21 good eggs! So that is very good! I have been able to help several people, the people for whom I donate and still a few extra eggs for people on the waiting list! Terrific!  After the treatment, there will be no information given about the number of eggs, the distribution amongst acceptors or the result of the treatment. |
| Recipient and maximum number of pregnancies | 7 | 41 | All text referring to the (potential) recipient; including maximum no of pregnancies with your eggs | In egg donation, a donor donates her eggs to a couple that would like to have children. In the lab one brings one or more donated eggs together with the sperm cells of her partner. When the fertilization is successful, the embryo or embryos will be transferred to the womb of the woman of the couple. This transfer is painless.  Another group [of recipients] consists of women who are carrier of a serious inheritable disease. Women who do not have their own eggs, also lack the hormone production in the ovaries that is needed to ripen an egg and to manage a pregnancy. Therefore the woman to whom the fertilised egg will be transferred will receive hormone replacement medication.  As a woman, you produce no (good) or too few eggs, [1] either because of premature (untimely) menopause, [2] or because your ovaries have been removed or damaged because of a cancer treatment, [3] from the time you are older than 43 years, we will not use own eggs for medically assisted reproduction: the chances of success are too small to justify a treatment. In all these cases, egg donation can offer a way out. You as a man, as a woman, or both, are carrying a genetic risk and because of that your own gametes cannot be used (just like that). When a PGD-treatment is no option for you, you can, depending on the situation, possibly be helped with donor sperm, donor eggs or donor embryos. |
| References to other centres | 2 | 6 |  | This procedure can change depending on the centre. Try to collect good information.  In case these conditions are not fulfilled, the [centre] will refer you to anther fertility centre or, after all, anonymous donation will be opted for. |
| Risks | 7 | 19 |  | What are the eventual risks for the donor? [title in bold and bigger font] The hormonal stimulation and the growth of the ovaries can give temporary discomfort with bloating of the abdomen. In very rare cases it happens that the ovaries produce too many follicles (egg bubbles) (ovarian hyperstimulation). With the current protocols of hormonal stimulation serious consequences like a hospital admission are as good as always avoided. Collecting eggs can in very rare cases cause an internal bleed or infection. Everything will be done to avoid this but a collection of egg cells remails a procedure with possible complications. A donor can of course also become pregnant when she does not use adequate contraceptives during the treatment. To avoid unwanted pregnancies it is advised to abstain from unprotected intercourse during the treatment until several days after the collection of egg cells.  The egg donor has to go through a part of a normal IVF-procedure, which is pretty stressful and not completely without risks  The risks of egg donation are comparable with an IVF-treatment: [1] Bleeding or infection during the aspiration of egg cells, [2] hyperstimulation |
| Risks\Refusal | 2 | 2 | All mentioning of the fact that refusal is possible | Naturally, in anonymous donation, there will be strict insurance that that the acceptor and the donor will never meet each other.  [About conversation with counsellor] This conversation is not easy and can be confronting. However, it has a protecting function. The aim is to talk through all facets of egg donation and to estimate the psychological implications of those facets. Some people do not feel completely at ease during this first conversation. There will be a lot to discuss and about some things you may not have thought before. The fact that one can be refused [as an egg donor] will definitely play a role here [literally 'play in mind'] |
| Scarcity | 7 | 22 | There is not enough supply of donor eggs. Also scarcity when it is linked to the waiting list | This technique has helped a lot of couples up till now. However, the demand for donor eggs is still a lot bigger than the supply  Unfortunately, demand and supply for these forms of fertility treatment are still not in balance. The [centre] will therefore do everything possible to excite [stimulate; 'warm maken'] couples who have a surplus of material at their disposal, to donate that.  There is a lot of demand for egg donation; but eggs are unfortunately scarce. [...] Egg donors have to be very strongly motivated. That is why there is a major shortage of egg donors. |
| Sperm donation or other | 4 | 13 | Information that is (or should be) targeted at egg donors but is about sperm donation and or other treatments (like surrogacy) | When there is a choice for non-anonymous donor sperm, there will only be proceeded with frozen sperm cells. This implies a waiting time of minimum 6 months before this donor sperm can be issued, conform the current legislation. |
| Treatment that the recipient needs to undergo | 1 | 2 | Descriptions about the treatment the recipient needs to undergo (sometimes this makes the information sound as if it is written not only for the donor, or not mainly for the donor but also or mainly for the recipient). |  |
| Types of donation | 8 | 20 | type of donation done by the centre or described in general. | See above in quotes listed with other codes. |