Title:

THE DIRECTED SPERM DONOR: AN SREI STUDY OF PHYSICIAN ATTITUDES AND PRACTICE PATTERN VARIATIONS

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Objective:

To assess national practice patterns and physician attitudes regarding the management of directed sperm donors.

Design:

Online survey

Materials & Methods:

The study included reproductive endocrinologists and infertility specialists (REIs) who completed a 23-item web-based survey. Questions included multiple-choice, Likert-type scales, percentages and open-ended formats, with 11 items addressing practice patterns, 6 items regarding physician attitudes, and 6 demographic items. The study was approved by the Western IRB and the Society for Reproductive Endocrinology & Infertility (SREI) Research Committee, and was disseminated online via the SREI listserv. Statistical analysis was performed using Stata v15.1 (College Station, TX).

Results:
A total of 143 physicians (19.0% board-certified REIs) across 36 U.S. states and territories participated in the survey; 51.7% were female, 77.6% White, and 88.8% heterosexual, with a broad age distribution. REIs were overall accepting of donor sperm use: 141 (98.6%) would use donor sperm for azoospermic males, 139 (97.2%) for single females, and 138 (96.5%) for lesbian couples. A majority of REIs (89.5%) allowed directed donors, though 72% preferred anonymous donors. Providers estimated that lesbian couples were more likely than heterosexual couples to utilize directed donors (15.4% +/- 20.7 vs. 10.8% +/- 17.8) or than single women (9.6% +/- 18.6) (p=0.04). Most clinics (79.7%) have a sperm quarantine policy, which range from 7 days to 12 months, though most (85.1%) are 6 months. While 60 (42.0%) respondents permit no quarantine protocol deviation, 41 (28.7%) allow a complete waiver, and 16 (11.2%) allow shortening the duration.

REI’s views of quarantine varied widely: 47 (34.8%) see it as “an absolutely necessary protection”, while 41 (30.4%) view it as a “risk reduction option patients should be able to waive.” Nearly half (47.4%) considered mandatory quarantine an undue burden, with doctors younger than 60yo (p=0.02) and LGBT physicians (p=.04) more likely to think so. LGBT physicians were also more likely (p=0.03) to treat donors participating in home inseminations as a SIP of the biological mother, though this was overall an uncommon (30.4%) view.

Conclusions:

The management of directed sperm donors varies greatly, as do physician views regarding length, flexibility and duration of quarantine. In particular, younger and self-identified LGBT physicians expressed concern that mandated quarantine would restrict patient autonomy, while older REIs focused on the benefits of risk reduction. Given these findings, further detailed study may allow for an updated consensus that balances patient safety with expansion of treatment options for patients using directed sperm donors.

Support:

None