

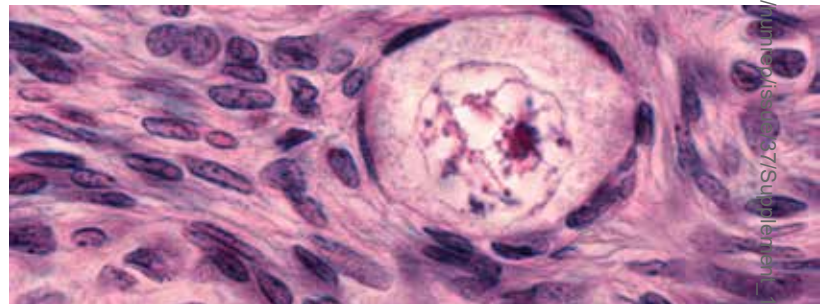
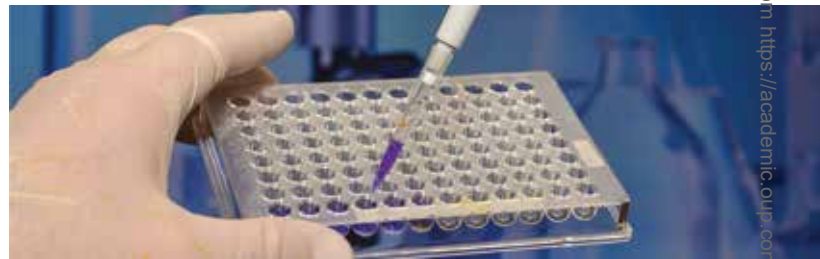
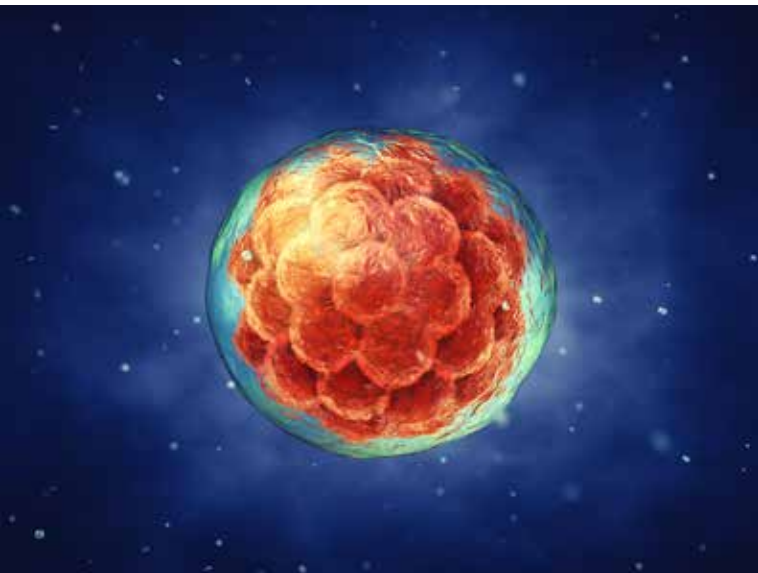
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3 July to 6 July 2022

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38th Hybrid Annual Meeting of the
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Summary answer: In Spain, 5% of frozen embryos are destined for donation to other patients, 17% are fated for research, 17.7% for destruction and 12% are abandoned

What is known already: According to the latest data from the Spanish Fertility Society (SEF) registry, the total number of embryos stored in Spain in 2019, was 668.082. Clinics ask patients to specify their preferences for the embryo's destinations such as: save the embryos for the future, donation to other patients, research, or discarding the embryos. Embryos were considered abandoned when a patient with frozen embryo/s stored failed to contact the clinic for > 2 years and the patient could not be located. However, it is not known how many embryos are assigned to each destination, neither in Spain nor in any other country

Study design, size, duration: Reflecting concern about the accumulation of frozen embryos in banks, SEF convened a focus group with key figures in ethics, law, and reproductive medicine to identify possible solutions. The first step was to carry out a questionnaire to all the reproduction centres in Spain to know the number of frozen embryos stored and their destinations. A total of 242 IVF units were contacted through SEF newsletter and participants answered between April and July 2021

Participants/materials, setting, methods: Public and private IVF clinics which had cryopreserved embryos were sent questionnaires with requests regarding the number of frozen embryos in each destination: keeping for patients, donated to other patients who met donation criteria (same as for gamete donors) and who did not meet criteria, research to a specific project and without a project, destined for destruction that met the criteria established by law, and that did not meet criteria, and number of embryos abandoned.

Main results and the role of chance: A total of 71 filled-in questionnaires from 242 IVF clinics were obtained. The response rate to the questionnaire was 29%. Of the respondents, a total of 376.445 stored embryos were reported. 46% of the total cryopreserved embryos were kept for later use by patients. 3.7% were donated to other couples but did not meet the criteria for donation: obtained from women over 35 years, or lack of any required test. 1.4% of the embryos were donated fulfilling the criteria for donation to other patients. 17% of the embryos were donated for research, but less than 1% had an assigned project. 17.7% of the frozen embryos were destined for termination of their conservation, and 1.4% of them did not meet the criteria established by law. A total of 46.046 embryos could be considered abandoned since the patients could not be contacted after more than two years of storage. This represents 12.2% of embryos without a defined destination.

Limitations, reasons for caution: The main limitation of this study is the low response rate, since out of 242 centres, which obligatory sent their data to the National Registry in 2019, only 71 centres answered. This could be due to the lack of data from some reproduction units

Wider implications of the findings: It is not known precisely how many frozen embryos have been abandoned in Spain, or what are their other destinations. Clinics are not required by authorities to report these number but to have concrete data on the frozen embryos is crucial to solve the problem of embryo accumulation in banks.

Trial registration number: Not applicable

Abstract citation ID: deac106.013

P-347 Gamete donation in Italy: Ethical and legal consideration on the lack of specific regulation

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Study question: Given cross border reproductive care, is the lack of specific regulation on egg and sperm donation in Italy ethically acceptable nowadays?

Summary answer: Nowadays Italy has no national clear legal frame for donors, recipients, and donor-conceived persons. This setting hinders an ethical protection of competing interests and rights.

What is known already: The Italian Law on ART (40/2004) has undergone major changes; after sperm and egg donation ban lift, the Italian law n. 40 has not been replaced. Gamete donation is therefore allowed, but without specific national regulation. Moreover, given the lack of public information on donation and consequently the shortage of donors, many people still opt for CBRC. In this context, the only legal certainty is that no filiation link arises between donor and donor-conceived children. Political and legal debate on the right to know one's origins is missing. Legally speaking, gamete donation in Italy is actually in half-light.

Study design, size, duration: – –

Participants/materials, setting, methods: When it comes to ART, national legal frame has to be considered in a comparative view, since CBRC is a fact. Therefore, questioning the lack of specific regulation on egg and sperm donation in Italy has required a comparative analysis with other European legal systems, such as France, Spain and United Kingdom.

Main results and the role of chance: – –

Limitations, reasons for caution: When advocating a legal change, it should be considered the surrounding political environment; among Italian institutions a growing mistrust of science might be spotted nowadays. This, combined with the very well know Catholic heritage, is undoubtedly a reason for caution

Wider implications of the findings: A legal change in Italy, backed by a promotion of public information on gamete donation, might entail also an increase in the number of donors and enabling many people to avoid CBRC. The rights of donors, recipients and donor-conceived persons would be protected and more patients could be treated.

Trial registration number: not applicable

Abstract citation ID: deac106.014

P-348 Assisted Reproduction Legislation: Listening to the voice of Health Care Professionals

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Study question: To investigate the perceptions of health care practitioners in Ireland to a draft Assisted Human Reproduction (AHR) Bill, currently being assess by government.

Summary answer: There is strong support for AHR and for national legislation in this field among healthcare professionals working in Ireland.

What is known already: AHR legislation is essential to protect the rights of those accessing, born from and providing AHR services. Ireland is one of the only countries in the EU which lacks specific AHR legislation. The General Scheme of an AHR Bill was published in 2017 and is currently awaiting review and approval by government.

Study design, size, duration: An anonymous 25-item questionnaire was distributed via secure email link. This was a detailed 5-point Likert Scale questionnaire based on clinically relevant aspects of the Irish draft AHR Bill.

Consultants and trainees in Obstetrics and Gynaecology were identified through The Institute of Obstetricians and Gynaecologists. A snow balling approach was used to recruit General Practitioners and all Fertility Clinics in Ireland were asked to distribute the questionnaire to their staff. The study remained open for 28days.

Participants/materials, setting, methods: Participants included Consultant and trainee Obstetrician Gynaecologists, general practitioners and multidisciplinary staff at Irish fertility clinics. The questionnaire focused on six key factors; a national AHR regulatory authority, AHR treatment type and availability, age limits for AHR treatment, counselling prior to ART, posthumous use of gametes and embryos and legislations surrounding surrogacy.

Main results and the role of chance: In total 245 responses were received. The majority of respondents were female aged 31-59years. 42.2%