



## LEARNING ABOUT THE GESTATIONAL CARRIER PROGRAM

The Gestational Carrier Program involves transferring an embryo or embryos into the uterus of a Gestational Carrier (the “Carrier”), with the intention of achieving a viable pregnancy in the Carrier, using either embryos from the intended parents of the resultant children (the “Intended Parents”) or donor derived embryos.

One or more embryos are placed into the Carrier’s uterus using ultrasound guidance so that they may implant and develop into a viable pregnancy.

The carrier will be required to take medications to prepare the lining of her uterus for a pregnancy. Although most people have no side effects from the medication she may experience some side effects which are generally mild. This may include nausea, vomiting, headaches, dizziness, and bloating.

The carrier will take Folic Acid containing prenatal vitamins prior to the embryo transfer. .

The following steps are taken with the genetic partners of the embryo(s), to minimize the risks to the Carrier:

1. A psychosocial evaluation is performed;
2. A medical history and physical examination is performed;
3. Blood tests for the Human Immunodeficiency Virus (“HIV”), various forms of hepatitis and syphilis; and
4. Cultures of bodily fluids are performed to screen for various sexually transmitted diseases.

While the CReATe Fertility Centre takes the aforementioned steps to minimize the risk of transmitting disease(s) from the genetic partners of the embryos to the Carrier, there are limitations inherent in the testing processes and hence, it is not possible to guarantee that no disease(s) will be transmitted. However, the chance of acquiring an infectious disease is extremely small. The CReATe Fertility Centre is not aware of any reports of HIV being transmitted to a Carrier.

Transferring embryos into the Carrier’s uterus as part of an In-Vitro Fertilization Program does not guarantee that a pregnancy will be achieved. While most embryo transfer pregnancies result in single births, there is an increased risk of multiple gestation if more than one embryo is transferred (twins, triplets, etc.). Multiple pregnancy is associated with an increased risk of maternal complications, and increased risks of prematurity, long term disability, or death of some or all of the babies. A technique called selective reduction will be recommended to decrease these risks by reducing the number of fetuses that a woman carries, if she is carrying 3 or more fetuses.

If a viable pregnancy is established, complications with the pregnancy may occur, as they may with any other pregnancy, including miscarriage, ectopic pregnancy, congenital abnormalities in the fetus(es), diabetes and high blood pressure.

In Canada, the compensation payable to egg and semen donors, and gestational carriers, is governed by the provisions of the *Assisted Human Reproduction Act* and the Regulations there under. The CReATe Fertility Centre does not condone its clients being involved in any compensation arrangements that are in breach of this legislation. If the CReATe Fertility Centre becomes aware that any of its clients are involved in any such arrangements, it will take immediate steps to terminate their care. CReATe Fertility Centre requires that all gestational carriers and intended parents have independent legal advice followed by a signed legal contract.

The CReATe Fertility Centre thanks you for participating in its Gestational Carrier Program, both on behalf of itself and on behalf of the Intended Parents, for giving them the opportunity, which they otherwise would not have had, to have a child.

If you have any questions about the Gestational Carrier Program, or if you require clarification of any of the issues raised above, please speak with one of the CReATe Fertility Centre’s physicians.

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