



UNIVERSITY OF TARTU



# The regulation of ART in Estonia

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# ART legislation

- **Artificial Insemination and Embryo Protection Act (1997)**
- **Procurement, Handling and Transplantation of Cells, Tissues and Organs Act 2015**
- **Various ministerial decrees (documentation, mandatory test for donors etc)**

- Age limit 50 yrs (incl)
- Permitted only on medical indications.
- Marital status not important
- Cohabitation not mandatory
- Sexual orientation of the woman not important
  
- IVF is prohibited if pregnancy or delivery is dangerous to the life or health of the woman or the baby or if other medical contraindications exist.

Both men and women have to give a written consent at least 1 month before treatment.

The written consent of a woman shall set out that she agrees to:

- 1) insemination with the sperm of her husband, any other specific man or a donor;
- 2) in vitro fertilisation of her ova;
- 3) impregnation with an embryo originating from an ovum of another woman;
- 4) freezing of embryos.

- Man's consent must set out whether he agrees to artificial insemination of his wife with his sperm after his death.
- After death of a husband it is allowed to use the sperm for 1 month
- Both have a right to withdraw their consent at any time before the procedure
  
- In each case the sperm of only one man shall be used.

- The indications for artificial insemination are established by a competent provider of specialised medical care who, if necessary, has the right to refer the patient to a provider of specialised medical care who organises artificial insemination.
  - A decision concerning the need for and permissibility of artificial insemination shall be made by a doctor.
  - Only doctors have the right to perform artificial insemination and transfer an embryo to a woman.
  - Other health care professionals who have received appropriate training have the right to participate in acts relating to artificial insemination

- Transfer to woman of embryo created from ovum of another woman
  - Permitted if fertilisation of the woman is not possible in any other manner
  - Donor's written consent
  - An embryo created from an ovum of a woman of up to 35 years of age
  - or if the donor is a relative, then the ovum donor may be older than 35
  - The child is descended from the woman who gave birth to the child.

# Donors

- The woman and the man who have granted their consent to artificial insemination have the right to know the following information concerning the biological and social background of the donor:
  - 1) nationality;
  - 2) colour;
  - 3) education;
  - 4) marital status;
  - 5) whether he or she has got any children;
  - 6) height;
  - 7) constitution;
  - 8) hair colour;
  - 9) eye colour.

# Donor's rights and obligations

## **1) A donor has the right to:**

remuneration for gamete donation;  
non-disclosure of the fact that he or she is a donor.

(2) Donors are required to undergo the medical examination prescribed in § 25 of this Act.

(3) A donor does not have the right to establish preconditions for the use of the gametes donated by him or her.

(4) A donor does not have the right to require establishment of the identity of the mother, father or child, respectively.

5) A donor does not have the right to require that he or she be declared the mother or father of the child.



# Transfer and freezing of embryos

- In the course of one artificial insemination, up to three embryos created from the gametes of the same persons may be transferred to a woman.
- Embryos created *in vitro* shall be frozen and preserved in frozen form for up to seven years.
- If an embryo is not transferred to a woman....., the embryo shall be used for scientific research or destroyed.

# Surrogacy

- Not allowed

# Financing

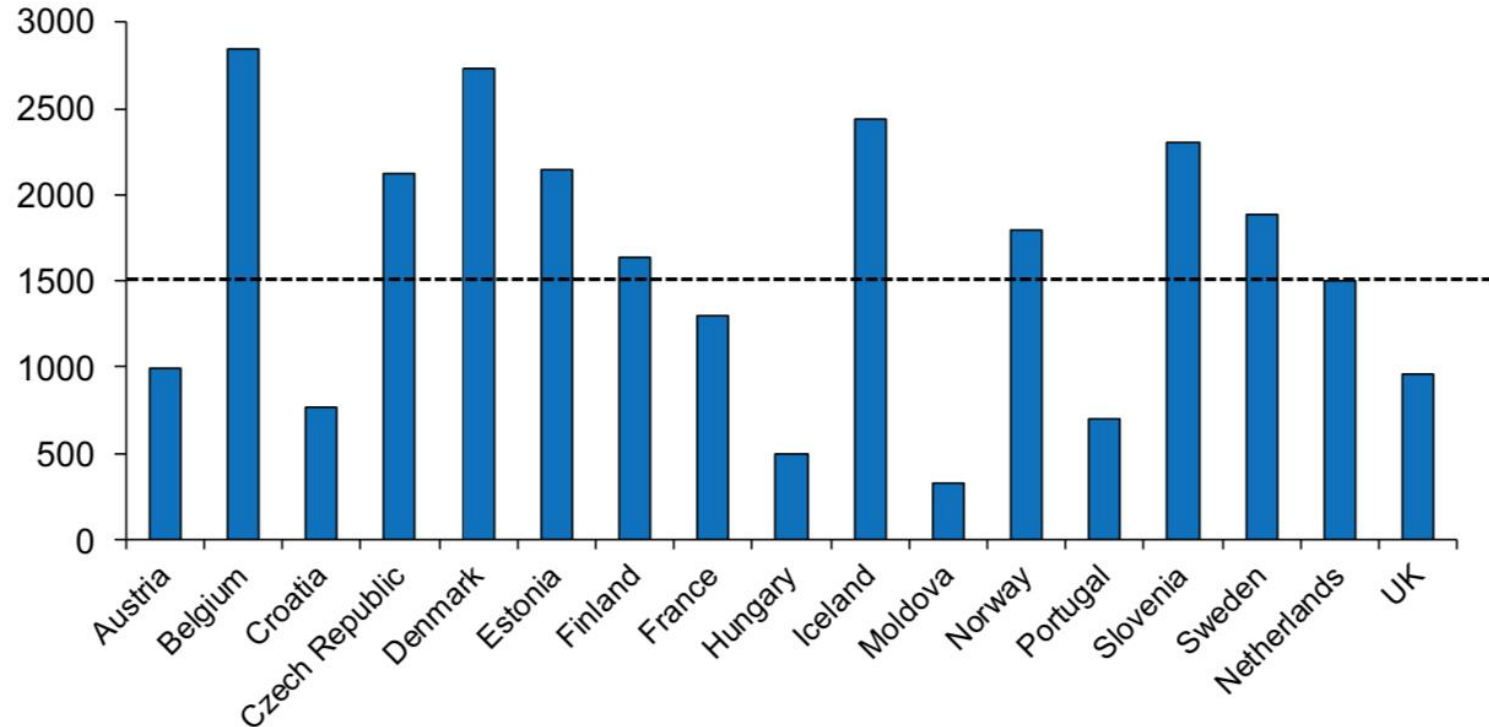
- IVF/ET and medications are covered by Estonian Health Insurance Fund, provided woman is insured and younger than 41 yrs
- Number of cycles per patient not limited
- Waiting list (appr 5 months)
  
- Clinic is paid **1178,71 € / cycle** (includes embryo freezing and storage during 2 months)
- Number of cycles is negotiated and contracted beforehand

## Compulsory annual reports to National Institute for Health Development (2012)

Year	IVF	ICSI	FET	IUI
2013	776	1131	915	273
2014	612	1104	872	297
2015	598	1153	855	228
2016	577	1083	893	176
2017	555	1039	938	235

# Number of cycles per 1 mill inhabitants

(countries with 100% participation)



Human Reproduction Update, Vol.8, No.3 pp. 265-277, 2002

## An international survey of the health economics of IVF and ICSI

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the global need for ART is estimated to be at least 1.500 cycles/million population per year.



- 2,6-2,7% of children born were conceived by ART
- In 2005-2011 49% of women under 41, who used ART, delivered