

Realities of Embryo Adoption

What patients and providers need to know

What Is Embryo Adoption?

Embryo adoption refers to the transfer of frozen embryos originally created by another couple to a person or couple. The intended mother undergoes IVF to carry and raise the resulting child. It usually involves legal contracts and matching programs run by an agency, clinic, or nonprofit that connects embryo donors to recipients, typically based on mutual preferences, values, and legal agreements.

Health Risks to Mother and Baby

For the Intended Mother:

The intended mothers who carry unrelated embryos (embryos adopted and transferred via IVF) face real medical risks — many of which are comparable to gestational surrogacy or IVF pregnancy in older women. These risks stem from the use of frozen embryos, hormonal preparation, and the complexity of late or medically assisted pregnancy. Carrying someone else's embryo poses significantly higher medical risks than carrying a genetically related embryo. Risks can include:

- Hormonal Risks: blood clots, mood swings, depression, headache, fatigue
- Embryo Transfer Procedure Risks: bleeding, infection, uterine injury
- Pregnancy Risks: placenta previa or accrete, preeclampsia, gestational hypertension, gestational diabetes, miscarriage, preterm labor, stillbirth, c/s delivery
- Psychological and Emotional Risks: grief and distress from failed implantation or miscarriage, stress from relationship with donor families and complex emotions around parenting a genetically unrelated child

For the Baby:

There is evidence that children born from adopted embryos may face modestly higher risks for certain health outcomes compared to naturally conceived children or those born from fresh IVF embryos. There are real and under-discussed risks for a baby frozen and born from IVF from an unrelated mother. The risks stem from a combination of factors: the freezing and thawing process, medical or genetic history, and the nature of IVF pregnancies. Risks can include:

- Significantly Higher Risk for Preterm Birth and Low Birth Weight
- Unknown Genetic and Family History: Many donated embryos come from couples who underwent IVF for fertility or genetic issues- yet detailed genetic, psychological, or family history is limited
- Epigenetic and Development Uncertainty: embryos frozen for 10-15+ years may carry epigenetic changes due to cryopreservation stress, lab culture environment, and the age of the eggs or sperm at the time of embryo creation
- Birth Defects: meta-analyses have shown that children born through IVF and especially frozen-thawed embryos may have a slightly higher rate of congenital anomalies
- Identity Complexities: Children born via embryo adoption may struggle with identity confusion, and genealogical bewilderment

Success Rates

Stage	Estimated Rate
Thaw survival	65–80%
Embryo implantation	30–40%
Live birth per transfer	20–35%

Things to Consider

- This is a surrogate-level medical process
- Adoption is not legally required—this is embryo donation with parenting rights
- Emotional bonds with the donating family may complicate matters
- No guarantees of health, outcome, or future contact

Embryo adoption may appeal emotionally, but comes with real medical, ethical, and emotional complexities. Be fully informed before proceeding.

Sources

ASRM Guidelines
Practice Committee of the American Society for Reproductive Medicine
Wennerholm et al., Human Reproduction Update
CDC ART Success Rates Report
Ethics of Embryo Adoption, Hastings Center Report