



Reproductive Technologies, Inc.

# THE SPERM BANK OF CALIFORNIA

## INTERVIEW NOTES: 6183

Donor 6183 came to our interview dressed in a white, cotton button-down shirt, with the top two buttons undone. He paired it with a pair of gray khaki and white running shoes. His dark brown hair was close cropped to his head. His symmetrical features showed slightly arched dark brown eyebrows that framed his light brown eyes while sporting a thick brown handlebar moustache and a five o'clock shadow. We agree with the donor that he does resemble the baseball player, Brandon Belt.

Donor 6183 grew up living with his parents and two younger brothers. When he was younger, he wasn't interested in sports but loved playing outdoors. He was involved in the Boy Scouts from the age of 6 until he was 18, he even became an Eagle Scout! In school he enjoyed art, where he liked drawing and painting. Growing up, he loved going to the zoo with his grandmother and spending time with her while seeing the animals.

Video games during his middle school helped him escape while his family was going through a tough period. Understandably, he found being interested in school challenging during this time. Once his family was in a better place, he regained his interest in school. During high school, he picked up yoga, weightlifting and wrestling and still weightlifts today! He loved to listen to classic rock, a few of his favorite bands at the time were Led Zeppelin, Pearl Jam, and the Canadian band, Rush. At 17, Donor 6183 lost his middle brother, which was traumatic for the whole family. At 18, he joined the Navy right after graduating high school. After boot camp, he worked with communication technicians, on alarms, and internal communication systems, basically anything electronic in the ship. After 6 years, he was discharged from the Navy in 2015.

Upon leaving the military, Donor 6183 worked as a fire alarm inspector for a few years, which he found enjoyable though he knew it wasn't what he wanted to do for a career. After going through a divorce, he decided to go back to college and pursue an education in Anthropology. He currently works twice a week as a researcher in an archaeology lab. He is currently working with fossilized plants four to five thousand years old! He hopes to one day work in areas such as Yosemite, Sierra Nevada or even Sonora. He said his grandparents lived up there and he enjoys the slower pace, describing it as a "cowboy town".

At home, he likes to cook for himself and his partner. As a vegetarian, Donor 6183 loves cooking tofu, rice and eggs and incorporates that in most of his curries, Thai curry being his favorite. He also likes to roast veggies. When asked how his friends would describe him, Donor 6183 said they would say, nice, weird, patient, and smart.

Donor 6183 is also a lover of board games, obscure resource management ones specifically. When asked the name of one of his favorites, he said Brass: Birmingham. It is an economy board game set in the industrial revolution! Within the next 5 years, Donor 6183 hopes to be in a PHD program at either Stanford, UCSB, UCSC or UCSD pursuing a degree in paleoethnobotany in Archaeology.

We are excited to have him as a donor in our program!

*Interviewed by Simone W. and Kenya C. on 09/28/2023*



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## DONOR PROFILE: 6183

The past and current personal and family medical history, physical examination, and laboratory test results determine that donor 6183 is eligible and approved for semen donation at THE SPERM BANK OF CALIFORNIA. This profile was prepared in November 2023.

### PERSONAL INFORMATION

- Identity-Release® Program: **Yes**
- Month/year of birth: **April 1991**
- Education: **A.A. in Mathematics and B.A. Anthropology/Psychology**
- Current occupation: **Retail store manager**
- Ethnic origin: **Dutch, English, Irish, Puerto Rican (50%)**
- Religion born into: **Protestant**
- Religion practicing: **Atheism**

### PHYSICAL CHARACTERISTICS

- Height: **6' 1"**
- Weight: **194 lbs**
- Hair color: **Dark brown**
- Hair type: **Wavy/thinning**
- Eye color: **Light brown**
- Complexion: **Fair**
- Body type: **Muscular**
- Blood group/Rh: **A+**
- Baby photo available: **Yes**
- Other distinguishing features: **Dimples, thick facial hair**

### FAMILY MEDICAL HISTORY

**KEY: D** donor    **Ch** child    **F** father    **M** mother    **S** sister    **B** brother  
**Co** cousin    **A** aunt    **U** uncle    **MGF** maternal grandfather    **MGM** maternal grandmother  
**PGF** paternal grandfather    **PGM** paternal grandmother

Allergies: **PGF: Pollen allergies at 25, treated with OTC medication, managed.**

Gastrointestinal: **M: Gallbladder disease at 59, treated with removal, resolved. PGM: Bile duct cancer at 75, no treatment, cause of death at 75. PU: Appendicitis at 39, treated with appendectomy, resolved.**

Genital/Reproductive: **F: Undescended testicle at birth, treated with surgery ~3 years old, resolved. PGM: Endometriosis at 35, treated with surgery, resolved. PGF: Undescended testicle at birth, treated with surgery, resolved.**

Heart: **M: High blood pressure at 63, treated with medication, managed. F: High blood pressure at 58, treated with medication, diet, and exercise changes, managed. MGM: Heart failure at 89, no treatment, cause of death. MGF: Coronary artery disease at 69, treated with bypass surgery, managed until death. PGM: High blood pressure at 55, treated with medication, managed. PGF: High blood pressure at 62, treated with medication, managed. Heart failure at 89, no treatment, cause of death at 89. PU: Heart attack at 57, treated with stents, resolved. Heart disease (lifestyle) at 57, treated with diet and exercise changes, managed. Coronary heart disease at 57, treated with medication, diet, and exercise changes, managed. High blood pressure at 55, treated with medication, managed.**

Mental Health: **D: Post Traumatic Stress Disorder (military service related) at 26, treated with Eye Movement Desensitization and Reprocessing (EMDR) therapy, resolved-no symptoms. M: Anxiety disorder at 39, treated with medication, managed with decreased symptoms. B#1: Suicide at 14, cause of death.**

Metabolic/Endocrine: **PGM: Diabetes Type II at 45, treated with medication, managed. Hypoglycemia at 30, treated with diet changes, progressed into diabetes type II. PU: Diabetes type II at 52, treated with medication, diet, and exercise changes, managed.**

Neurological: **M: Migraines at 29, treated with OTC medications, managed. M: Multiple sclerosis at 39, treated with medication, in remission. MGF: Dementia at 90, none, progressed until death at 97.**

Respiratory (Lungs): **MGM: Asthma in teens, treated with inhaler, managed.**

Sight/Sound/Smell: **D: R: 20/20, L: 20/15.**

Skin: **F: Basal cell cancer at 50, treated with excision, resolved. PU: Eczema in teens, treated with topical ointment, managed. Psoriasis at 22, treated with topical ointment, managed.**

Urinary: **D: Kidney stones at 23, treated with lifestyle changes, resolved.**

Cancer (see above): **PGM: Bile duct cancer. F: Basal cell cancer.**

## DONOR LAB RESULTS

Chlamydia: **Not Detected**

HIV 1 & 2: **Non-Reactive**

Hepatitis B: **Non-Reactive**

Urinalysis: **Normal**

Gonorrhea: **Not Detected**

CMV total antibody: **Negative**

Hepatitis C: **Non-Reactive**

Chem panel: **Normal**

Syphilis: **Non-Reactive**

HTLV 1 & 2: **Non-Reactive**

CBC: **Normal**

## GENETIC SCREENING RESULTS

*Genetic screening tests can significantly reduce, but never completely eliminate, the chance that a person is a carrier for a particular disorder.*

Expanded carrier screening for 525 autosomal recessive conditions was completed by Invitae and reported on 09/28/2023.

The results were **POSITIVE** for **WNT10A-related conditions and Hereditary hemochromatosis type 1**. Donor is a carrier for these conditions.

**It is strongly recommended that recipients who use this donor's sperm undergo carrier screening for these specific conditions.** It is strongly recommended that recipients who use this donor's sperm undergo carrier screening for WNT10A-related conditions. WNT10A related conditions can be inherited in both an autosomal recessive and autosomal dominant pattern.

Testing was negative for the remainder of genes screened.

Disease	Result	Residual risk to be a carrier
<b>WNT10A-related conditions*</b>	POSITIVE	n/a
<b>Hereditary hemochromatosis type 1 (HFE)**</b>	p.His63Asp Reduced penetrance	n/a
<b>Cystic Fibrosis</b>	Negative	1 in 4,400
<b>Spinal Muscular Atrophy</b>	Negative: 2 copies exon 7 c.*3+80T>G variant  not detected	1 in 784
<b>HBB Hemoglobinopathies</b>	Negative	1 in 4,800
<b>Alpha Thalassemia</b>	Negative	1 in 241

\* The variant detected in WNT10A (c.682A>T; p.Phe228Ile) can cause a common condition called isolated tooth agenesis, which affects 2-8% of the general population. Tooth agenesis, also called hypodontia, is the absence of one or more teeth. It's estimated people who carry the variant are 2-3 times more likely to have one or more missing teeth. All offspring of donor 6183 have a 50% chance to inherit the c.682A>T WNT10A variant and be at increased risk for isolated tooth agenesis/ hypodontia.

\*\* Hereditary hemochromatosis, type 1 is an autosomal recessive adult-onset condition with variable presentation and penetrance. The specific mutation the donor carries is associated with mild-moderate disease when clinical features are present, for which there is good treatment. Carrier screening for the HFE gene is available and recommended to recipients considering this donor. Recipients who are carriers for HFE-related conditions should have genetic counseling to best assess the risk for a child affected with hemochromatosis, type 1.

Genetic screening tests can significantly reduce, but never completely eliminate, the chance that a person is a carrier for a particular disorder.

**Please refer to the donor's Invitae expanded carrier test report for more information on the testing completed and the donor's results.**

# DONOR NARRATIVE: 6183

*The content of this narrative has not been altered by TSBC staff. It reflects the original written work of the Donor.*

**Describe your personality: introvert, extrovert, funny, serious, goal-oriented, curious, shy, etc.**

I am very extroverted and love to meet new people. I am goal-oriented and really go after it when I have my mind set on something. People say that I'm funny and I love making jokes. I'm also extremely curious about everything and am always trying to learn new things.

**What are your interests and talents?**

I'm interested in combat sports such as boxing and Brazilian jiu jitsu; I've been training consistently for a few years now. I also really enjoy board games; I host board game nights at my place once per week and am involved in my university's board game club. In university I study anthropology (emphasis in archaeology) and psychology.

**What are some of your goals and ambitions in life? Where do you see yourself in 5 or 10 years?**

One of my goals is to become an archaeologist. In 5 to 10 years, I hope to either be in a PhD program for archaeology or to be actively conducting archaeological research. My hope is to be able to do this research in Eastern California.

**How would you describe your skills and interests in the following areas?**

**Math:** My math skills are above average. I completed my associates degree in mathematics.

**Mechanical:** I am not the greatest with mechanical stuff. I don't have too much interest in mechanical things and thus have never sought to learn much about mechanics.

**Athletic:** I am pretty athletic. I exercise every day and participate in recreational sports regularly.

**Musical, Artistic, Creative:** I'm not the most artistically gifted person. I do like to create art and draw and play music but it has never been my forte.

**Language (what languages besides English do you speak?):** I only speak English

**Writing:** I love writing and consider myself to be pretty good at it. I don't do a lot of creative writing these days but I write analysis and critical essay type papers regularly and get good feedback and good grades on all my papers.

**Literature:** I absolutely love reading. I read all the time and love all kinds of books.

**Science:** I really enjoy learning about all kinds of science and especially love the social sciences. I'm always trying to learn more about humans and how/why they do the things they do.

**Please list a few of your favorite:**

**Movies:** Tokyo Story; Jeanne Dielman, 23 quai du Commerce, 1080 Bruxelles; A Clockwork Orange

**Books/Authors:** Don Quixote; The Moon is a Harsh Mistress; The Left Hand of Darkness

**Albums/Musicians/Performances:** Rush, Michael Jackson, Taylor Swift, Polyphia

### What are a few of your reasons for becoming a sperm donor?

I want to help families (especially those in the LGBT+ community) to be able to have children. I'm interested in giving others the chance to start a family that wouldn't otherwise have the opportunity.

### You have joined the Identity-Release® Program . What appeals to you about this program?

Giving the donor conceived adult the option to reach out to me and ask questions about their ancestry or genetics is appealing to me. Most people are curious as to their background and being able to have that opportunity is really nice.

### Is there anything else you would like to share with participating families and future donor conceived children?

I'm a very curious person, always trying to learn more about subjects I'm unfamiliar with. I love being outside, whether camping, hiking, or backpacking. I also spent about six years in the U.S. Navy, working on destroyers as an electrician.

**THANK YOU!**



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## HEALTH PROBLEMS LIST DONOR 6183

### DONOR

***Problem/Diagnosis: Post Traumatic Stress Disorder***

Age of Onset: 26, military service related.

Treatment: EMDR therapy for 3 years

Outcome: Resolved, no current symptoms

***Problem/Diagnosis: Kidney Stones***

Age of Onset: 23

Treatment: Lifestyle changes

Outcome: Resolved, no current symptoms

### MOTHER

***Problem/Diagnosis: Migraines***

Age of Onset: 29

Treatment: OTC headache medication

Outcome: Resolved

***Problem/Diagnosis: High Blood Pressure***

Age of Onset: 63

Treatment: Medication

Outcome: Medication successful in lowering blood pressure

***Problem/Diagnosis: Gallbladder disease***

Age of Onset: 59

Treatment: surgery, removed gallbladder

Outcome: she's been fine since surgery

***Problem/Diagnosis: Anxiety Disorder***

Age of Onset: 39

Treatment: Medication

Outcome: Decreased anxiety

***Problem/Diagnosis: Multiple Sclerosis***

Age of Onset: 39  
Treatment: Medication  
Outcome: In remission

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## FATHER

### ***Problem/Diagnosis: High Blood Pressure***

Age of Onset: 58  
Treatment: Medication, diet, exercise  
Outcome: Under control

### ***Problem/Diagnosis: Undescended Testicle***

Age of Onset: birth  
Treatment: Surgery when 3 years old  
Outcome: Successful surgery

### ***Problem/Diagnosis: Basal Cell Cancer***

Age of Onset: 50  
Treatment: Surgery  
Outcome: Removed

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## BROTHER #1

### ***Problem/Diagnosis: Suicide (completion)***

Age of Onset: 14  
Treatment:  
Outcome: Deceased

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## MATERNAL GRANDMOTHER

### ***Problem/Diagnosis: Heart Failure***

Age of Onset: 89  
Treatment: N/a  
Outcome: Deceased

### ***Problem/Diagnosis: Asthma***

Age of Onset: teens  
Treatment: Inhaler  
Outcome: Lifelong asthma

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## MATERNAL GRANDFATHER

### ***Problem/Diagnosis: Coronary Artery Disease***

Age of Onset: 69  
Treatment: Bypass surgery



Outcome: Lived another 28 years

***Problem/Diagnosis: Dementia***

Age of Onset: 90

Treatment: None; untreatable

Outcome: Got progressively worse

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**PATERNAL GRANDMOTHER**

***Problem/Diagnosis: High Blood Pressure***

Age of Onset: 55

Treatment: Medication

Outcome: Managed

***Problem/Diagnosis: Diabetes - Type 2***

Age of Onset: 45

Treatment: Medication

Outcome: Kept under control

***Problem/Diagnosis: Hypoglycemia***

Age of Onset: 30

Treatment: Diet

Outcome: Became diabetic

***Problem/Diagnosis: Endometriosis***

Age of Onset: 35

Treatment: Surgery

Outcome: Successful surgery

***Problem/Diagnosis: Bile Duct Cancer***

Age of Onset: 75

Treatment: None

Outcome: Deceased

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**PATERNAL GRANDFATHER**

***Problem/Diagnosis: Heart Failure***

Age of Onset: 89

Treatment: None

Outcome: **Deceased**

***Problem/Diagnosis: High Blood Pressure***

Age of Onset: 62

Treatment: Medication

Outcome: Blood pressure kept under control

***Problem/Diagnosis: Pollen Allergies***

Age of Onset: 25

Treatment: Over the counter medication

Outcome: Allergies kept under control

***Problem/Diagnosis: Undescended Testicle***

Age of Onset: Birth

Treatment: Surgery

Outcome: Successful surgery

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**PATERNAL UNCLE**

***Problem/Diagnosis: Heart Attack***

Age of Onset: 57

Treatment: Stent

Outcome: Success

***Problem/Diagnosis: Heart Disease (lifestyle)***

Age of Onset: 57

Treatment: Diet; exercise

Outcome: Under control

***Problem/Diagnosis: Coronary Artery Disease***

Age of Onset: 57

Treatment: Medication; diet; exercise

Outcome: Under control

***Problem/Diagnosis: High Blood Pressure***

Age of Onset: 55

Treatment: Medication

Outcome: Under control

***Problem/Diagnosis: Appendicitis***

Age of Onset: 39

Treatment: Surgery

Outcome: Successfully removed appendix

***Problem/Diagnosis: Diabetes - Type 2***

Age of Onset: 52

Treatment: Medication; diet; exercise

Outcome: Under control

***Problem/Diagnosis: Eczema***

Age of Onset: Teens

Treatment: Topical ointment

Outcome: Under control

***Problem/Diagnosis: Psoriasis***

Age of Onset: 22

Treatment: Topical ointment

Outcome: Still uses treatment

**CONCLUSION**

The personal and family medical history information has been self-reported by the donor. We work with each donor to obtain as complete and accurate information as possible, but we are unable to completely rule out the existence of other health information that is not known, or that remains unreported to us. As a board certified genetic counselor, I have reviewed this donor's family medical history for identifiable patterns of inheritance that may place the donor or his biological offspring at increased risk for certain health problems. ("Increased risk" is greater than the general population risk). As reported, DIS 6183's family history is notable for multiple sclerosis and depression/anxiety.

**Multiple Sclerosis:** Donor 6183's mother is affected with multiple sclerosis, an immune condition that affects the central nervous system. This is a multifactorial condition where a combination of factors is thought to lead to its development. Factors that influence the chance for a person to develop multiple sclerosis include biological sex and/or gender, genetics, environmental exposures, and infections. As second degree relatives to the donor's mother, the offspring are estimated to have a higher risk than the general population at about 1 in 100. The general population risk is around 1 in 750 worldwide.

**Mental Health conditions:** The donor's brother died by suicide in his adolescence and the donor himself reports a history of post traumatic stress, an anxiety disorder. His brother did not receive a specific medical diagnosis for any mental health conditions, therefore an assumption has been made that he was affected by a form of depression or other mental health condition. The general population risk for anxiety and depression and estimated to be between 10-25%, with more recent 2023 estimates putting the number closer to 36% for women and 25% for men. Twin and family studies suggest the heritability of depression is around 35%, while more DNA-based heritability studies (genome-wide association studies or GWAS) put the heritability at about 9%. With current data, it's reasonable to expect the chance for offspring to be affected by anxiety or depression may be higher than what is seen in the general population. With the rise of clinically diagnosed mental health conditions the empirical risk (5-30%) and population risks (10-36%) currently overlap.

Sincerely,

Janine Mash, LCGC Certified Genetic Counselor  
San Francisco Genetic Counseling