



Reproductive Technologies, Inc.

# THE SPERM BANK OF CALIFORNIA

## INTERVIEW NOTES: 6187

Walking into the interview, Donor 6187 greeted us with a beautifully bright smile and positive energy. His attire consisted of a black vest over a blue collared long-sleeved shirt paired with dark pants, grey shoes, and a black watch. Donor 6187 has a symmetrical face with a strong nose, full lips, thick dark brown eyebrows, and long lashes that frame his green hazel eyes. His brown hair was cut short on the sides with it being longer and curly on top with a few grey strands showing through. He has said that he looks like a cross between Henry Cavill and Oscar Isaac, which we find to be interestingly accurate!

Donor 6187 is donor -conceived and grew up with both parents and his sister who is four years younger. As a child, his mother worked in healthcare and his father was a firefighter who had bravely served as one of the 9/11 search and rescue fighters. As a child, Donor 6187 loved reading, dinosaurs, and insects, but was obsessed with ants and bio systems. His parents loved education and reading and started teaching him how to read even before he started school. Some of his favorite books were Harry Potter and the Eragon series. When in kindergarten, he was able to test into an advanced academic school based on his IQ scores and went there for first grade, which he loved. Donor 6187 decided to become vegetarian in elementary school after learning that animals had feelings and would eventually become vegan in his late teens. This was just the beginning of his health-conscious lifestyle. He does various physical activities while also being mindful of what he eats and drinks to live a long, healthy life.

His mother, who then worked in healthcare, decided to switch careers, and became a schoolteacher to dedicate more time to her children. His family moved from the city to the suburbs at the end of second grade, where he went back to public school, though still participated in after-school and weekend activities for talented and gifted children.

His dad encouraged him to participate in a variety of sports. Basketball, swimming, baseball, and soccer were just a few, though he cared for swimming and basketball the most and still is an active swimmer today. In his free time, he loved strategy and fantasy role playing games. During the interview, he mentioned that he loved the teamwork, exploration, and battle aspects of these games. He was voted class president twice during his school years. In middle school, his maternal grandmother came to live with his family where they would bond by watching survival reality shows. Survivor, being her favorite! His grandmother was sadly diagnosed with lung cancer, though was receiving treatment but ended up having an infection in the hospital, ultimately leading to her passing. This helped shape his career trajectory later in life.

During high school, he was active in many clubs such as the debate club, gay/straight alliance (where he was President for 2 years!), and poetry club. Donor 6187 said that though they weren't the most popular

clubs at the time he was passionate about each of them. He also participated in and was a Math Olympiad, where he competed against other schools. In 10<sup>th</sup> grade, his father was diagnosed with brain cancer because of the lasting effects of breathing in the horrid air quality after 9/11. He ultimately retired from firefighting shortly after his diagnosis. During these rough times, his mother quit her job to focus on the family. Devastatingly, his father passed the summer right before his high school graduation.

Entering college, Donor 6187 went headfirst and was focused only on school and academics. He lived miles off campus and now lived alone, which was a huge change for him growing up in a household of family. Understandingly, he states that he should have given himself a gap year to help transition smoother. Donor 6187 initially wanted to become a lab researcher in physics, concentrating on topics such as global warming, sustainable energy, and the environment. However, he chose to pursue a career in healthcare, and found a deeper meaning working as an investment banker for biotechnology companies. By helping shape and direct the investments of large pharmaceutical companies, his hope is that they will grow towards ventures that could improve the quality of life for millions of people. His grandmother and father's illnesses helped influence him to choose this career path.

After graduating with his B.A in Economics, he moved to California to start his career at an investment bank on the biotechnology team. Donor 6187 worked hard for a year with his team when he came across an opportunity to work at another firm specialized in genetic-based medicine. Donor 6187 originally had no idea he was donor-conceived and hadn't found out until years after his father's passing. Surprisingly, the same year he arrived in California, he received communication from his donor who was interested in contact. They were able to meet up and form their own strong bond through this experience. Donor 6187 speaks about how this bond has changed his life for the better and it has helped answer questions about himself in terms of personality and interests. Donor 6187 and his donor are still in contact today, talking on the phone and meeting in person, when possible. He's even met his donor's other children and formed a relationship with them.

Donor 6187 said his friends would describe him as thoughtful, both figuratively and literally. He always has thoughts roaming but is also emotionally available and loves to listen. His friends would say that he gives great advice: it may come across as blunt and direct but is rational. Donor 6187 was such a delight to listen to with such a riveting story and pleasant personality that we believe he will be well loved on our catalog!

*Interviewed by Sinead O. and Simone W. on 10/12/23*



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## DONOR PROFILE: 6187

The past and current personal and family medical history, physical examination, and laboratory test results determine that donor 6187 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: **September 1996**
- Education: **B.A. Economics**
- Current occupation: **Investment banker**
- Ethnic origin: **English, German, Italian, Jewish**
- Religion born into: **None**
- Religion practicing: **None**

### PHYSICAL CHARACTERISTICS

- Height: **6' 3"**
- Weight: **191 lbs**
- Hair color: **Dark brown**
- Hair type: **Wavy/curly**
- Eye color: **Hazel**
- Complexion: **Pale, fair, rosy**
- Body type: **Muscular**
- Blood group/Rh: **A+**
- Baby photo available: **Yes**
- Other distinguishing features: **Strong nose and jaw, thick eyebrows, naturally wider shoulders**

### 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: **D:** Penicillin allergy at 21, avoidance, managed. **MGM:** Penicillin allergy at unknown age, treated with avoidance, managed. **PGF:** Tree nut allergy at 5, treated with avoidance, managed.

Heart: **M:** High cholesterol in her 50's, treated with lifestyle changes, ongoing. **S:** High cholesterol in early 2's, treated with lifestyle changes, ongoing. **PGM:** High blood pressure in mid 50's, treated with diet and lifestyle changes, managed. High cholesterol in mid 50's, treated with diet and lifestyle changes, managed. **PGF:** Coronary artery disease and arrhythmia in mid 70's, treated with medication, managed. Two strokes in mid 70's, treated with medication, managed. **PU:** High blood pressure in mid 40's, unknown treatment, managed. High cholesterol in mid 40's, unknown treatment, managed.

Mental Health: **MA (half): Depression at 61, treated with medication, managed. ADHD at 61, treated with medication, managed. MCo#1: Mild anxiety at unknown age, unknown treatment, managed. PCo#1: Agoraphobia in early 20's, treated with medication, managed.**

Muscles/Bones/Joints: **MA (half): Spinal stenosis at 47, treated with surgery, progressive disease. MU#2 (half): Cervical disc issues in 40's, treated with surgery, managed.**

Neurological: **PGF: Mild dementia in late 70's, no treatment, continual decline.**

Respiratory (Lungs): **MGM: Lung cancer at 55, treated with surgery and medication, well controlled for about 12 to 15 years.**

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

Skin: **D: Moderate/severe acne at puberty, treated with topical ointment, resolved.**

Cancer (see above): **MU#1 (half): Lymphoma at 42, treatment unknown, cause of death.**

Other: **D: Mild/moderate chronic rhinosinusitis in early childhood, treated with surgery, resolved. MGM: C-Diff Infection at 73, no treatment, cause of death. MU#1 (half): HIV at 41, treatment unknown.**

## DONOR LAB RESULTS

Chlamydia: <b>Not Detected</b>	Gonorrhea: <b>Not Detected</b>	Syphilis: <b>Non-Reactive</b>
HIV 1 & 2: <b>Non-Reactive</b>	CMV total antibody: <b>*Positive</b>	
Hepatitis B: <b>Non-Reactive</b>	Hepatitis C: <b>Non-Reactive</b>	HTLV 1 & 2: <b>Non-Reactive</b>
Urinalysis: <b>Normal</b>	Chem panel: <b>Normal</b>	CBC: <b>Normal</b>

*\*CMV IgM is negative/IgG positive. This combination shows a historic CMV exposure and donor is presumed to be currently be non- infectious*

## 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 9/29/2023.

The results were **POSITIVE** for **CEP290-related conditions, Gyrate atrophy of the choroid and retina (OAT), Hereditary hemochromatosis type 1, Primary hyperoxaluria type 3 (HOGA1)**. Donor is a carrier for these conditions.

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 and when clinical features are present 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.

**It is strongly recommended that recipients who use this donor's sperm undergo carrier screening for these specific conditions.**

Testing was negative for the remainder of genes screened.

Disease	Result	Residual risk to be a carrier (based on European ancestry)
<b>CEP290-related conditions</b>	POSITIVE	n/a
<b>Gyrate atrophy of the choroid and retina (OAT)</b>	POSITIVE	n/a
<b>Primary hyperoxaluria type 3 (HOGA1)</b>	POSITIVE	n/a
<b>Hereditary Hemochromatosis, type 1 (HFE) - Mild variant</b>	POSITIVE (p.His63Asp; Low penetrance)	n/a
<b>Cystic Fibrosis (CFTR)</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 880
<b>HBB Hemoglobinopathies</b>	Negative	1 in 4,800
<b>Alpha Thalassemia</b>	Negative	Reduced

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: 6187

*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've been imaginative and curious about the natural world since I was a child, coloring the trees purple in kindergarten, and writing little mystery and fantasy stories over the summer. On family road trips, I would ask "why doesn't the moon move when our car moves?", or, seeing ants climbing up a tree, I would ask "how come they don't fall off? (I would usually end up searching for the answers at the public library.) I was quite introverted growing up, and generally still prefer quiet, and being alone or with one person. Although, finding groups that share my interests and passions has brought out a more social side as an adult; in the workplace, I've grown the leadership skills to manage my junior analysts, to give presentations to clients, and to lead one of the on-campus recruiting teams. I've been described as straightforward and blunt, which can be quite funny to some (and snarky to others), and I've often challenged what I saw as unfair use of authority at school and at work, which led me to sometimes get into spats with teachers, but also elected by my peers to be class president, twice. In my career and personal pursuits, I'm very serious about achieving my potential (my mother would call it "a responsibility to use your gift to help people"), not disappointing myself or those who I care about, and taking my convictions to the limit (I've been a vegetarian by choice since elementary school, when I decided animals have feelings and shouldn't be hurt, and a vegan for 10 years); I'm also highly organized and prefer systems and routines to spontaneous chaos. In my personal relationships I'm rather sensitive and sentimental, typically writing cards or making photo albums for special occasions, and I speak with my mother on the phone regularly.

**What are your interests and talents?**

My favorite activity is reading and I'm equally excited about learning nonfiction science & psychology, and exploring fictional fantasy worlds – I've been, at various points in my life, obsessed with National Geographic, The Chronicles of Narnia, Albert Camus, or just the dictionary. I got immersed in role-playing video games as an adolescent and enjoyed the challenge of strategy and teamwork of groups for exploration and battle – I was a magical healer – although I don't have much time for that anymore. I'm passionate about every aspect of personal health, and do weight training, cardio, and flexibility exercises daily along with hot saunas & cold plunges, frequent water-only fasts, and have a small alchemy lab of supplements. Most of my talents are cognitive and don't make for great party tricks, but I think I'm good at making complex financial models, rational / evidence-based decisions both for the companies I work with and in my personal life, especially where people are typically more emotional (like relationships), and I've been told I give thoughtful gifts, "contemplating almost anything that might be useful or interesting, even if not traditional" (including a high-end frying pan, iron supplements, character figurine, custom-commissioned art, and a tattoo-matching necklace). I also enjoy traveling, avoiding more crowded/touristy places and trying to experience what daily life is like for the people there: biking around Sweden, eating at subway bread shops in Hong Kong, going to university campuses in Shanghai, and visiting a corporate campus in Basel (where my sister and I were escorted out of, I think they thought we were stealing trade secrets or something -- apparently tourists don't really go there).

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

Many – perhaps most – people go into investment banking for the money and prestige; I acknowledge those things are useful, but I have a slightly different backstory. I didn't know what a stock was until I took economics as a high school senior, was a self-proclaimed communist, led the Gay-Straight Alliance for 2 years until graduation, frequently attended the Poetry Club, and unironically went to the Occupy Wall Street protest in 2011 with my aunt, promising my mother I wouldn't get arrested and consequently rejected from college admissions. I went to college hoping to be a lab researcher in physics, to develop sustainable energy and stop global warming, or biomedicine, to cure cancer, or both (I was a little ambitious). But I came to believe, in the coming years, as a result of many conversations and experiences, that there is no shortage of brilliant, hard-working, passionate scientists – the shortage is of politicians, investors, and consultants with sufficient scientific knowledge, interest, and incentive to provide funding or useful services to convert basic research to real-world applications. I became an investment banker, specifically for development-stage biotechnology companies, to provide financial advice (the kind, I think, they need the most), on the development of next-generation medicines for heart disease, cancer, dementia, diabetes, and a slew of other rarer conditions that most people have never heard of but affect millions. In 5-10 years see myself as a Partner at my firm, in many ways doing what I am now, but with more power and influence to direct the investments of large pharmaceutical companies towards the most promising ventures that could help people live longer and healthier lives.

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

**Math:** One of my earliest relative strengths; I tested into double accelerated math in 6<sup>th</sup> grade, then, after completing the standard high school curriculum, did AP Calculus in 11<sup>th</sup> grade and AP Statistics in 12<sup>th</sup>; I also competed in Math Olympiads for my high school. I went to university with the intention of studying Math and Physics and made it through Real Analysis before deciding Economics was more aligned with my career goals.

**Mechanical:** I loved building LEGOS as a kid, especially buildings, spaceships, and robots. Otherwise, I honestly have no idea how to repair a car, fix a sink, or be handy with a power tool (but I do vacuum a lot). Many new skills to learn if I ever become a suburban dad with a house to fix!

**Athletic:** I've always been relatively tall and strong. I swam competitively as a kid and played center on a recreational basketball team for about 6 years, but I didn't have a strong enough interest to become exceptional or play in a league. As an adult I've become much more excited for health and fitness (and because it's fun), and picked up basketball and swimming again, learned to play tennis and to ski, and follow a strict, broader fitness regimen.

**Musical, Artistic, Creative:** I played the baritone horn fairly seriously from Grade 3 – 12 in honors band and sang (a bit off-key) in men's choir. I also frequently made art as a kid, under my grandmother's guidance, and won awards in a couple of local competitions for bird and flower paintings, but ultimately drifted more to Literature and science/math subjects, although I still very much like music.

**Language (what languages besides English do you speak?):** Spanish (intermediate; studied for 10 years in school but lost a lot without practice); tried learning Korean in college but dropped out when I couldn't make the different vowel sounds.

**Writing:** I think my best works have been argumentative essays on topics I'm passionate about, and literature reviews of my favorite books. I've also written poetry, which was honestly pretty bad, but my enthusiastic participation in English class led me to be selected for the "Next Shakespeare" superlative in senior year of high school, along with a picture of me in the courtyard contemplating a little plastic skull like Hamlet (which I have safely archived, never to be seen again, on my Facebook).

**Literature:** My mom was an elementary school English teacher and committed to teaching me to read before kindergarten, and to love it, which I did and still do – novels, plays, and classics, heavy existential philosophy, trashy young adult fiction, and everything in between. I don't read particularly quickly, but I have a pretty good vocabulary, and I can remember the details of mostly anything I've seen on paper and focused on.



**Science:** My primary interest and passion, and the focus of the majority of my education since early childhood – I've always loved both space (observatories, telescopes, NASA launch sites) and living systems (animal encyclopedias, fish tanks and ant farms). I studied genetics and insect reproduction at MIT during a middle school summer as part of a national gifted and talented program, competed in Science Olympiads for my high school, did (admittedly very basic) research at a university nuclear physics lab for a high school summer and completed AP Physics (mechanics + electricity & magnetism) in 11<sup>th</sup> grade, computer science in 12<sup>th</sup> grade, and many biology and chemistry courses outside of my major in undergrad.

### Please list a few of your favorite:

**Movies:** Interstellar, Dune, Studio Ghibli animations (Princess Mononoke, How's Moving Castle, Grave of the Fireflies), Schindler's List, Belle, Good Will Hunting, Pan's Labyrinth, It's a Wonderful Life

**Books/Authors:** Remembrance of Earth's Past (Liu Cixin), Rationality – The Sequences, Inadequate Equilibria (Eliezer Yudkowsky), Harry Potter (J.K. Rowling), Heart of Darkness (Joseph Conrad), Journey to the Center of the Earth (Jules Verne), Factfulness (Anna & Hans Rosling), Hamlet, Macbeth, Romeo & Juliet (Shakespeare), Surely You're Joking Mr. Feynman! (Richard Feynman), Lifespan (David Sinclair)

**Albums/Musicians/Performances:** Alternative metal/rock: System of a Down, Fair to Midland, TOOL, Devin Townsend; indie/pop: Future Islands, Haru Nemuri; soundtracks/ambient: Joe Hisaishi, Jeremy Soule

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

Despite the problems in the world, I think the future is going to be less violent, more egalitarian, healthier, and brighter. Despite the inevitable hardships, I'm really happy to be alive, and I'm grateful to the sperm donor who helped my mom to create me. I feel lucky to have the abilities and talents that I do, and I think I can help people make babies that grow up to have happy, fulfilling, significant lives. I think that anyone who wants to have a child should be able to – whether through adoption, embryo transplant, sperm or egg donorship, a polycule commune, whatever – and it's thrilling that we have the technology (and a social and political system) to enable that. In the same way that people can choose their partner from the 8 billion people on Earth, I think someone seeking to use a sperm donor should have options, and while I'm probably not right for every woman, I think I could be for some. It is a bit of a funny thing – the physical act of donating sperm is quick and easy, but the consequences – not just making a new human life, but also, in a way, creating a new family, turning a non-parent into a parent, turning non-grandparents into grandparents, and so on, for every other person that one affects – are about as serious and important as it gets. I've thought about it for a few years now and decided it's more than worth it.

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

As you probably know by now, I'm the offspring of a sperm donor – the man who raised me (who I call my dad) was infertile, and deeply wanted to have children with my mother anyway. She was, frankly, terrified that connecting as an adult with my donor (who I call my spermdad) would weaken our connection and would undermine my dad's place in my heart. I found the experience to have the exact opposite effect, and that's been true for most of the spermbabies I've spoken to or heard about. I think raising a child that isn't genetically related, and being a great parent on top of that, might be the most selfless and generous thing one can do.

For me, discovering my genetic origins explained a lot of things about my personality and interests that didn't really make sense before. It also added someone (my spermdad) to my life who cares about me and is an invaluable mentor for navigating my emotions, career, and relationships. I would want my future children to have the option to learn about me and understand how we might be alike in some ways and different in others, and, if they want to,



establish a relationship. I think it's important for donors to be accessible and responsible over the long term for the children they helped create, and, if nothing else, I'd want to hear that they're doing OK.

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

Many human traits, like physical appearance, health predispositions, and some aspects of intelligence, are highly heritable. Others – potentially the most important – like values, personality, and happiness, are a mix of genes and parenting and environment. Some, like passions, seem to be totally random. My adult sisters are both extremely bright, but wildly different in many ways – one is a fine artist doing solo gallery shows and the other is a campaign manager and aspiring lawyer-politician. If your future child is anything like me (or us), they'll likely develop strong, specific, unpredictable interests early, that, I think, will be important to support and indulge as they grow. Often, children who are very intelligent and passionate are misunderstood by their teachers and peers. Friends may not be able to keep up, and bullies will pick on differences. I experienced this, and am grateful that my parents were unconditionally supportive, encouraging me to test into gifted and talented programs, summer camps, and other activities where I found more of a sense of belonging with smart, curious, and open-minded friends, before I ultimately went off to find my place in the bigger world.

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I'd like to also, as a post-script, share an anecdote about babies. Before I met my new little sister last year, I was a bit skeptical of them. Don't get me wrong, I really like humanity in general, I'd read the literature reviews that having children makes people happier, and I personally enjoyed tutoring middle and high schoolers and hearing bits about their lives and interests. But I thought the tiny crawling ones would be an annoyance, with all their screaming and pooping. It turns out, though, that the brain does some chemical-hormonal wizardry, because I was elated when I first met her, and found myself endlessly curious about how she saw the world (a little blurry), what she'd eat (basically anything, except when she didn't feel like it, and except green leafy things that might be poisonous), why she kept smacking on things (apparently this is how they calibrate what objects are hard and soft), and what sounds she'd make for what reason (I haven't figured this one out). My enthusiasm was only very slightly tempered by having to hold her down and suck snot out of her nose with a little filtered plastic tube (called a 'NoseFrida') so she'd stop mouthbreathing like a French bulldog. (It turns out that changing diapers is really easy though). I share this story because I think it's funny, but also to share a personal reflection – it was easy to get lost in the massive family health matrices and blood test biomarkers and forget for a moment that being an older brother (and maybe a parent) can be really fun and interesting, and that kids are excitable and pretty happy. I wish we held onto more of that perspective, and I hope you take joy in this process too.

**THANK YOU!**



Reproductive Technologies, Inc.

# THE SPERM BANK OF CALIFORNIA

## HEALTH PROBLEMS LIST DONOR 6187

*Donor 6187 is donor-concieved. For the purposes of health issues paternal relatives are on his donor's biological side.*

### DONOR

**Problem/Diagnosis:** Mild/moderate chronic rhinosinusitis

Age of Onset: Early childhood

Treatment: Surgery (minimally invasive balloon sinuplasty + septoplasty in 2014, traditional surgery in 2020)

Outcome: Cured

**Problem/Diagnosis:** Moderate/severe acne

Age of Onset: Puberty

Treatment: Accutane (Isotretinoin)

Outcome: Completely cleared

**Problem/Diagnosis:** Allergy to Penicillin

Age of Onset: 21

Treatment: none

Outcome: switched antibiotics

### MOTHER

**Problem/Diagnosis:** Elevated cholesterol (TCL 223, LDL 143)

Age of Onset: ~50s

Treatment: Lifestyle, diet

Outcome: Stable

### SISTER

**Problem/Diagnosis:** Elevated cholesterol (TCL 213, LDL 146)

Age of Onset: Early 20s

Treatment: Lifestyle, diet

Outcome: Ongoing

## MATERNAL GRANDMOTHER

**Problem/Diagnosis:** Lung cancer (former smoker)

Age of Onset: 55

Treatment: Standard surgery & medication for 17 years

Outcome: Well controlled for ~12-15 years

**Problem/Diagnosis:** Allergy to Penicillin

Age of Onset: unknown

Treatment: none

Outcome:

**Problem/Diagnosis:** C-Diff infection

Age of Onset: 73

Treatment:

Outcome: Death

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## MATERNAL GRANDFATHER

**Problem/Diagnosis:** Unknown

Age of Onset: unknown

Treatment: unknown

Outcome: Died at age 78

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## MATERNAL HALF AUNT

**Problem/Diagnosis:** Spinal stenosis

Age of Onset: 47

Treatment: 2 surgeries

Outcome: Progressive disease; able to walk but with pain

**Problem/Diagnosis:** Depression

Age of Onset: 61

Treatment: Medication

Outcome: Ongoing; retired and living independently

**Problem/Diagnosis:** ADHD

Age of Onset: 61

Treatment: Medication

Outcome: Managed

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## MATERNAL HALF UNCLE #1

**Problem/Diagnosis:** HIV (likely from MSM intercourse)

Age of Onset: 41

Treatment: Unknown  
Outcome:

***Problem/Diagnosis:*** Lymphoma

Age of Onset: 42

Treatment:

Outcome: Death

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## MATERNAL HALF UNCLE #2

***Problem/Diagnosis:*** Cervical disc issues

Age of Onset: 40s

Treatment: Initial replacement surgery, 2 cleanups & revisions at age ~55 to ~57

Outcome: Ongoing / progressive disease; minimal issues for many years but has recently caused pain and reduced mobility

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## MATERNAL HALF UNCLE #3

***Problem/Diagnosis:*** Accident

Age of Onset:

Treatment:

Outcome: Died at age 9

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## MATERNAL HALF COUSIN #1

***Problem/Diagnosis:*** Mild anxiety

Age of Onset: After her father passed away

Treatment: Unknown

Outcome: Stable, employed + healthy relationship

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## PATERNAL COUSIN #1

***Problem/Diagnosis:*** Agoraphobia (likely induced taking psychedelics)

Age of Onset: Early 20s

Treatment: Anti-anxiety medication

Outcome: Doesn't go outside much; otherwise stable & healthy – has a full time WFH job, house, partner, and child

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## PATERNAL GRANDMOTHER

***Problem/Diagnosis:*** High blood pressure

Age of Onset: Mid 50s

Treatment: Diet & lifestyle

Outcome: Ongoing, stable – healthy and active in daily life

***Problem/Diagnosis:*** High Cholesterol

Age of Onset: Mid 50s

Treatment: Diet & lifestyle

Outcome: Ongoing, stable – healthy and active in daily life

**PATERNAL GRANDFATHER**

***Problem/Diagnosis:*** Heart issues (coronary artery disease, arrhythmia) – 2 strokes

Age of Onset: Mid 70s

Treatment: Warfarin / blood thinner

Outcome: Ongoing, no heart attacks yet or recent strokes

***Problem/Diagnosis:*** Mild dementia

Age of Onset: Late 70s

Treatment: N/A

Outcome: Ongoing, some cognitive impairment, still independent / functional for daily tasks

***Problem/Diagnosis:*** Allergy to tree nuts

Age of Onset: 5

Treatment: none

Outcome: managed

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**PATERNAL UNCLE**

***Problem/Diagnosis:*** High blood pressure

Age of Onset: Mid 40s

Treatment: Unknown

Outcome: Ongoing, functional in daily life

***Problem/Diagnosis:*** Cholesterol

Age of Onset: Mid 40s

Treatment: Unknown

Outcome: Ongoing, functional in daily life

**CONCLUSION**

High Cholesterol: The donor's mother and sister are affected with elevated cholesterol. Multiple paternal family members are affected with high cholesterol. High cholesterol is extremely common in the general population with approximately 10% of US adults diagnosed with cholesterol levels over 240 mg/dL (<https://www.cdc.gov/cholesterol/facts.htm>). High cholesterol is frequently associated with modifiable lifestyle factors, although genetics can also play a role. Inherited forms of high cholesterol (familial hypercholesterolemia) are often associated with early-onset cardiovascular disease which is not present in the donor's family. The donor's cholesterol levels were evaluated during his screening and were found to be normal.

APOE4: The donor reported that he had direct-to-consumer, non-clinical genetic testing which revealed that he carries a single copy of the Apolipoprotein E4 (APOE4) gene variant. About 25% of people with European ancestry have one copy of APOE4. This variant is thought to be one of the genetic factors which contribute to the development of Alzheimer's disease, along with other factors such as environmental exposures and lifestyle. A person who carries one copy of the APOE4 variant has an increased risk to develop Alzheimer's disease in their lifetime. If a person inherits two copies of the APOE4 variant, their risk for Alzheimer's disease is substantially increased. The role that APOE4 plays in the development of Alzheimer's disease and other conditions is still unclear. This result was not confirmed by a clinical laboratory.

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 risk that is greater than the risk in the general population).

As reported to me, and with the exception of the unconfirmed APOE4 gene variant as described above, there does not appear to be family or personal medical health history that would confer an increased risk beyond what is seen in the general population.

Sincerely,  
Jenny Iger, LCGC Certified Genetic Counselor  
San Francisco Genetic Counseling