

The Daily News (Nanaimo)

Babies made from blueprints; Is it moral for parents to choose the attributes of their children before they leave the womb?

Saturday, May 26, 2007

Page: A4

Section: News

Byline: Allison Cross

Source: The Daily News

Illustrations: Photo: Krista Charke, Daily News / Laura Shanner, from the University of Alberta, and Marcy Darnovsky, from the Centre for Genetics and Society in Oakland California were at the Fertility Conference at Malaspina University-College on Friday.

News last month that a Quebec mother had frozen her eggs for her seven-year-old daughter's future use prompted a heated moral and ethical debate among Canadians.

The daughter will become infertile at a young age due to Turner's Syndrome and her mother chose to preserve her child's chances to have her own children.

Opponents cringed at the idea a daughter would give birth to her own half-sister and wondered whether that child would ever be told where she came from.

Those who use and develop fertility treatments and reproductive technologies, or support the right to do so, expressed their comfort with the delicate science, while others couldn't shake their opposition to what they consider a violation of human nature, privacy and decency.

Visions of a daughter giving birth to her sister, a 60-year-old New Jersey woman conceiving twin boys through in vitro fertilization, and screening embryos and then discarding them for genetic defects, convinces many that science crosses too many moral and ethical boundaries. A debate about ethics heats up even further when considering the future child's right to know how they came to be.

The question of religion will always ask whether the technology that tests the boundaries of creating life was moral or ethical in the first place.

The Assisted Human Reproduction Act forbids certain actions in Canada, like cloning, sex selection and buying or selling embryos, sperm and eggs, but it's easy for would-be parents to go abroad and push the limits of Canadian law.

Nobody's Children, Everybody's Children, an international conference on reproductive technologies, will wrap up at Malaspina University-College in Nanaimo on Sunday.

Though few at the conference would ever agree on where to draw moral and ethical lines in the pursuit of reproductive technology, they say the issue is not a polarized debate between liberalists and the religious, but more a murky discussion of what might be right and what might be wrong.

Dr. Laura Shanner believes the ultimate goal of fertility treatment, the offspring, are generally overlooked when it comes to a discussion of donor ethics and the question of anonymity.

"We need to think of reproductive technologies as chapters in people's lives," said Shanner, an associate professor in ethics at the University of Alberta. "It is the first chapter in that child's life."

Children born from a donor egg or donor sperm are unable to access medical records, trace their genealogy or make a truthful connection to where and who they came from, Shanner said.

Different ethical principles are applied to the argument to maintain donor anonymity, Shanner said, but none legitimize the practice of withholding information. Informed consent is one of those principles.

Because offspring cannot consent to their conception circumstances and therefore must bear the brunt of secrets kept by others.

"Donor anonymity is a secret from the child, not a case of donor-parent privacy," Shanner said. "Secrecy leads to shame and bad outcomes because we don't know what we're dealing with. If that secret comes out in a bad way, how that child trust their parents again?"

Young American men encouraged to sell the sperm carrying their virile physique aren't practising informed consent either, Shanner said.

"Young men of the college age are a prime target for sperm donation," she said. "But they are at a point in their lives where they're trying really hard not to get anyone pregnant."

The allure of a large sum of money and American advertisements inviting good-looking donors to share their genetics, does not consider how the donor will feel 10 years down the road when they want their own children.

In order to facilitate openness and dialogue, Shanner said Canada could consider altering the birth certificates they issue to include the genetic mother and father, in addition to the gestational mother and the social parents, if relevant.

"Some kids will have a driving need to know at an early age where they come from," she said.

While not everyone who walks through the doors of the Victoria Fertility Centre is concerned with

religious tenets or moral actions, Dr. Stephen Hudson said personal beliefs can and are integrated in fertility treatments.

"Most people who come and see us because they know (what treatments involve)," Hudson said. "We have people with very strong ethical and religious beliefs and we tailor their treatment to what they were doing in their lives."

Hudson said he encountered one couple about to undergo in-vitro fertilization who strongly believed that life began when the egg joined with the sperm.

"They were only comfortable having a few of those eggs fertilized," he said. "They wouldn't want them frozen."

Hudson has never encountered anyone protesting his treatments at his clinic in Victoria.

Hudson said he also treats patients who disagree with the practice of selective reduction, whereby multiple fetuses are reduced to one or two, to encourage the success of carrying a baby to term.

"In those circumstances, we will avoid any chances of multiple pregnancies," he said. "Sometimes we have to take that risk to increase the chance of conceiving, but not in this case. Almost always we can find a form of therapy that works with their beliefs."

Phyllis Creighton has a clear idea of how the Anglican Church should help individuals considering reproductive technologies or fertility treatments.

"I think the Church's place is to help people arrive at the reasoning that will provide the moral choice they can make it good conscience," said Creighton, a research associate in the faculty of divinity at the University of Toronto.

Her conference paper addresses the boundaries of making and keeping life human.

"I think that the moral values of the church, the ethical teachings, have to be translated in a way to set out the whole picture."

Creighton said the Anglican Church is not out to dictate rules but did identify surrogacy as wrong.

"If a woman is going to seek donor gametes, she is going to want to make sure the child does not get lied to about what its true biological origins are," she said. "One of the reasons that I personally find the whole idea of surrogacy very disturbing is that it wrenches the infant from the environment in which they develop. The woman's voice is all that the infant knows."

Creighton said the surrogate will identify with the baby, whether they try to or not, as will their existing children, if they have any. They'll wonder why their mother received money for her pregnancy and whether a future need for money will mean they have to go, too.

Unless there is serious disease that would create a truly compromised life, Creighton is abhorred by the conceptualization of a preimplantation genetic diagnosis.

"If you are a person who wants to give birth, you give yourself to the adventure," she said. "With the designer baby, you have a need to determine what that child will be. There's a restriction on the freedom, equality and liberty on the child. That's not the best in a human being."

ACross@nanaimodailynews.com

250-729-4237