

IS IVF INDISPUTABLE?

A chorus of praise accompanied the awarding of the Nobel Prize in Medicine to Professor Edwards, inventor of in vitro fertilisation (IVF). However, there remain numerous objections.

Already, by dissociating sexual intercourse and procreation, human artificial insemination had opened the way for, with the gift of sperm, the deliberate dissociation between biological paternity and “social paternity”. New family secrets were encouraged.

With IVF, embryos are no longer conceived under the protection of a mother’s body, but rather in a laboratory. Eggs from a “donor” can be used and even embryos conceived by one couple can be transferred to another couple.

IVF and the possibility of freezing gametes and embryos have amplified the upset initiated by the insemination and have confirmed or caused new transgressions. In total 10 objections can be outlined.

1. Exploitation of human life

The pioneers of IVF started by conceiving human embryos in an experimental way, using their own sperm. So that Louise Brown could be born in 1978 and then Amandine in France in 1982, the pro-creators first created embryos for the purposes of research (an act which has been forbidden in France until today).

Technically, it was only a question of adapting veterinary practices to use on humans. The desperate desire of some couples, and that of researchers to control the start of life, was answered. However it was also an unprecedented ethical transgression: the pro-creator proved to have control over the lives of others. It is incidentally through IVF that a new form of human experimentation has occurred: embryo research ; a practice which leads to the embryo’s destruction, has been born from the embryonic overproduction linked to IVF.

2. Embryonic overproduction

In France, in order for women to give birth to around 14,500 children conceived each year by IVF, 280,000 embryos have to be conceived - 19 embryos per birth. Since 1978, 80 million embryos have been artificially created for women to give birth to 4 million babies.

If an embryo is “nothing” (which is yet to be scientifically proven), this embryonic overproduction is perhaps negligible. But what if the embryo is a person, something which science is showing more and more often? Conception is indeed the start of human life, unique, with a genetic inheritance which will stay the same until death.

*1 The Belgian law of 6th July 2007 authorises not only the research of surplus embryos but also, when appropriate, the creation of embryos for the needs of research.
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2 The figures for Belgium are detailed in the September 2010 dossier of the European Institute of Bioethics, available online at <http://www.ieb-eib.org/fr/pdf/dossier-pma-20100909.pdf>.

3. Human selection

In all cases, the “procreative” doctor evaluates the obtained embryos under a microscope, and for each one, its grade determines its fate: immediate destruction or transfer into a woman’s uterus or even, freezing. “Preimplantation genetic diagnosis” has also been introduced: it allows the in vitro conception of embryos then moves aside those embryos that are carriers of a hereditary anomaly, and indeed, from now on, those that have a simple predisposition to develop a disease... How do we deny the all powerful eugenic element of this selection? And what about the status of a “saviour sibling”, which requires an average of 39 embryos per birth? Derived from embryonic selection, the embryo is intended to “save” a brother or sister who has already been born. Over time, predictive medicine (the analysis of genetic risks) is shaping the spectrum of “the best of all possible worlds”. Yet, no one can claim a totally unharmed genetic inheritance.

4. Concealing time

Fixed in the cold, frozen embryos are deprived of their natural development. The birth, in the USA, of an embryo conceived twenty years ago, which ended up being given to a couple, has just been announced. At the age of 20, it will have existed for 40 years. More generally, the freezing of embryos makes them vulnerable to the demands of researchers or couples.

Women whose spouses have died demand the “post mortem” implantation of the embryos that the couple had had frozen after a cycle of IVF. Must a child be born years after the death of its father?

That is a typical ethical dilemma of the transgression of freezing embryos. For all of this disrupts the unchangeable benchmarks which guarantee every human to be of its time.

3. In Belgium, the official cumulative figures of the number of embryos are not available. The only data available are included in the Dossier of the IEB on ART of September 2010, available online at <http://www.ieb-eib.org/fr/pdf/dossier-pma-20100909.pdf>.

5. Divided parenthood

From the moment when the conception and manipulation of an embryo outside of its mother’s body is permitted, everything becomes possible: mistakes and accidents from manipulation, multiple imbroglios... The filiation finds itself disrupted. Fully menopausal women become mothers.

Homosexual men end up with babies via gestational surrogacy... Children find themselves with two or three mothers (biological mother, carrier and educator) and several fathers. Divided maternity becomes a source of new conflicts: a surrogate resists giving her baby to the sponsor couple: the couple demand that the surrogate has an abortion as the foetus has Down’s Syndrome.

6. Storing human beings

Subject to many yearnings, 150,000 living embryos are frozen in France.³ The law of 2004 authorised, by way of exemption, that they are to be passed over to research (which destroys them). For the embryos which “are no longer subject to a parental project”, the choices prove to be impossible: destroy them, give them to another couple, hand them over to research? Research of the embryo calls for them to be treated as laboratory material...

In a less regulated way than animals, as animal experimentation is subjected to stricter control (pet shops, training).

7. Health risks

IVF techniques are not without health consequences. By forcing nature, certain hereditary sterilities have been caused: children will carry deficient genes. Artificially provoked multiple pregnancies have lead to the explosion of premature birth, which is the cause of multiple disabilities. The prevalence of certain genetic accidents has increased among children born from IVF, and notably those born from ICSI (forced conception from the injection of a single sperm).

In question, the method of conception and chemical baths only imperfectly imitate natural conditions...

We are only beginning to discuss psychological problems induced by hundreds of these techniques. Finally one regrets frequent serious accidents concerning older women who become mothers beyond the natural age.

8. Commodification of life

The announcement of the first use of cells taken from human embryos has just increased the share price of a private laboratory on the stock exchange. This trial was wrongly described as therapeutic, while it was only a test of tolerance.

With IVF, everything is potentially for sale or for rent: embryos, gametes, uteri. The price difference between boys and girls, or between "genitors" according to their IQ, their physical appearance and the colour of their skin gives rise to a wild market in many countries. Its liberalism reeks of a racism which is no better than at the time of slavery. Children are sold to the highest bidders. Man has become a commercial product again. And women are exploited.

In poor countries, they become "gestational carriers" for couples from rich countries. Students sell their eggs in order to pay for their studies, putting their own fertility in danger.

9. Embezzlement

Being expensive, IVF is only a palliative medicine, which gets around the obstacle of infertility, without curing it. Many couples emerging from the process provide the proof (50% without children). Researchers risk becoming disinterested by the causes of a growing health problem... In the meantime, southern counties do not have access to primary care which would prevent many cases of infertility.

10. Headlong rush

Saviour siblings, cloning, extracorporeal maternity... The downward spirals caused by IVF can be linked together logically. Edwards continues to campaign for the freedom of manipulating embryos. Great Britain has already authorised the creation of hybrid embryos, man-animal chimeras conceived with human sperm and bovine eggs. Will the future inventor of the "artificial uterus", that campaigners for the abolition of sexual difference are appealing against, deserve the Nobel Prize?

Why, despite its objections, does in vitro fertilisation seem to be indisputable?

Everything happens as if the birth of children conceived by IVF, bringing legitimate joy of their parents, had stifled all opposition. The tendency to judge a cause according to the degree of emotion that it arouses is human. It is accentuated by the cultural evolution and the mediatised universe which favours the witness in front of the master.

Yet, in this context, the suffering, the desire and then the joy of parents are worth much more than the fate of the embryos. Without a face, neither sensitivity, nor a story, nor a voice, they are right to have them (science states their humanity) but it is not enough. An embryo is not considered as a citizen. It does not have any political weight. No one is attached to it. The power relationship is against it. An emotional totalitarianism to which it is difficult to rise without appearing human is against it.

Logically, one has the perfect right to reject the methods of conception that seem to be against human dignity without rejecting those who have been conceived in such a way. The time spent must be accepted, but not necessarily supported. In this way, it is not because in past generations, our ancestors were able to commit crimes (domestic violence, incest)...without which we would maybe never have existed, that we are obliged to agree. Time has passed, one can perfectly challenge IVF without blaming those who owe their life to the process. An emotional totalitarianism to which it is difficult to rise.

Consequently, the multiple costs of in vitro fertilisation are hidden, as if mentioning them was inappropriate. The general consensus is that IVF is an obstacle for couples, particularly for women: difficult ovarian hyperstimulation, intervention of a third party into the intimacy of a couple and of female physiology, difficult and sometimes conflicting debates when wondering to continue on to the following stages, including resorting to gamete donation, the dramatic impact of "embryonic reductions", but also the question of the future of frozen embryos... It is necessary not to forget the successive failures among the attempts.

For 50% of couples, after "the years of hell", they still do not have a child, and IVF will have equally delayed an eventual process of adoption... Couples tell of their experiences in books and internet forums, but this does not measure up, in the media, to the prowess and success. Everything happens as if the sequence of so much suffering and then so much happiness stifles all opposition.

Likewise health problems induced by IVF remain largely taboo, outside of the circle of practitioners who are aware of them: premature birth, prevalence of certain disabilities, psychological problems... In order not to stigmatise children (of whom some are unaware of method of their conception), one refrains from doing real research on the psychological impact of conception in a lab or of freezing. A form of bad conscience hovers, which leads to the denial of problems.

Finally, the financial cost of IVF, accepted by the community of up to 43 years of concerned women, for 4 attempts, should be compared to what one could do with such sums of money, particularly to fight against the causes of infertility.

When it is a question of giving birth at all costs, one does not skimp: life is priceless. And lives conceived and destroyed are regarded as negligible collateral damage. The debate has transferred to new transgressions, no longer widely accepted, which implicitly supports those that are common.

The first world instances were widely talked about: cloning, birth after 20 years of freezing, pregnancies among senior women, man-animal hybridisation, selling of babies on the Internet to the highest bidder, accidental defrosting, etc.

One is shocked by what is exceptional but one supports what has become common. The debate is no longer on the principal of IVF, but on its limits, or its "excess". Yet, it is the same principal of IVF which comprises the bulk of biomedical ethic transgressions that we have the right to challenge.

The fact that a transgression is widespread - or even that it is legal - in reality does not bring any guarantee of justice. At the time of the birth of Louise Brown, many scientists raised their voices by denouncing the fact that IVF is "not a medicine".

But, gradually, each transgression is becoming widely accepted. A kind of "ratchet effect" allows the stages to link up: we are shocked by the first instance of something, we get used to it by saying "why not? ", we tell ourselves that it is inevitable, and when it becomes widely accepted, we find it indisputable.

Finally it is the consequences of IVF which can bring back an audible dispute: children being born from anonymous donors, couples going through the gruelling process, society discovering that procreative relentlessness leads to the lack of meaning of human life, between the development of a disability, the disruption of the filiation and the eugenic fantasy of the perfect baby.

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