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ETHICAL MATTERS REGARDING FERTILITY PRESERVATION STRATEGIES IN THE WORLD OF ASSISTED REPRODUCTIVE MEDICINE

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Abstract

Many controversies lie between what is right or wrong in the field of assisted reproductive medicine. While ethics committees have not been always strict in a still grey area, nowadays, more and more restrictive and debated laws have started to make way. For example Great Britain has modified its legislation so that donors are no longer to be anonymous and, on reaching the age of maturity of the resulted newborn, they can obtain identifying information about their biological parent. Some authors argue that the parents are to decide whether or not they want to inform their child that one of them or both are not the biological parents. The question of secrecy has become controversial, when, in Great Britain, a proposal was made for an inclusion of the mention "by donation" on the long version of the child's birth certificate. Although we cannot force the parents to disclose this aspect to their children and this proposal has been rejected in the past, the last decade has seen growing support for the "rights" to the truth of the newborn. Another important ethical matter, worldwide, is the question of accepting or not paid egg donation. One can argue many pros and cons concerning this issue; what we know for sure is that it can no longer remain unspoken. Some tried to hide willingly the fact that they offered money or forced employees to contribute for the benefit of "science", like the case of Woo Suk Hwang that "earth quaked" the world of assisted reproductive technologies (ART).

In conclusion, ethical problems will always be part of the ART field, but it is up to us, as physicians to do what is right for our patients and why not, our own conscience.

Key words: ethics, gamete donation, assisted reproductive medicine, commercialization

Ethics of egg donation

The notion of "egg donation" leads to two different and important topics: the donation in the field of reproductive medicine for couples that cannot conceive on their own and the donation for scientific research.

The UK changed its legislation so that donors are no longer to be anonymous and the child can at the age of maturity obtain identifying information about the donor. Many argued that these children have "a right to know their past DNA" (Department of Health, 2005). The legal parents will eventually disclose or not to their children that they were born following donation (Boseley, 2005). If it is or not appropriate to advice parents to tell their children that

they were conceived through gamete or embryo donation is questionable (English, Mussell, Sheather & Sommerville, 2005). One proposal was made in a paper where the phrase “by donation” would be added on the child’s birth certificate (Deech, 1999).

According to the Centers for Disease Control and Prevention, in 2003, an increase of 11% compared to the year 2002 was noticed in the number of births after egg-donation (CDC, 2010). Laboratories in the U.S.A. were focused on adult or umbilical-cord stem cells research that do not depend on human embryos or oocytes. Bush administration did not encourage embryonic stem-cell research. Only a few laboratories had intent to use donated human oocytes to generate specific stem-cell lines. In California, stem-cell researchers are not allowed to compensate egg donors for anything beyond direct expenses (Frith, 2001).

Progress rests largely on a small segment of society that will offer free, raw material for basic scientific research. Particular ethical issues are raised in the case of young women who have not yet used their eggs to produce their own children and who are expected to volunteer or are refused a form of payment for their donated eggs (Buster, 1983; Daniels & Haimes, 1998; Lui et al., 1996).

In the case of egg donation, the most critical issue is the health of the women involved. If women are going to donate eggs, we must ensure that their health is not compromised. We need, therefore, to subject egg donation to far more scientific scrutiny than it currently receives (Cooper & Glazer, 1998). We need more longitudinal studies of the drugs involved in ovarian hyper stimulation, for example, more long-term follow-up of egg donors, and deeper analysis of the conditions under which dangerous complications for the women’s health occur (Maxwell, Cholst & Rosenwaks, 2008).

A recent report by the Institute of Medicine and the National Research Council confirms that egg donation is a method with accepted safety. But five women are known to have died as a result of the procedure in the United Kingdom, and roughly 0.5 to 5% have reportedly had side effects ranging from respiratory distress to renal failure (Hinsliff, 2005; Thum et al., 2003).

Too frequently, discussions of compensation for egg donation are dismissed with facile references to other body parts. For instance, kidney donations for transplants are mentioned, to allow the egg donation to become worldwide acceptable (Lockwood, 1997; Thum et al., 2003).

Other countries have allowed the so-called “egg sharing”, where women undergoing in vitro fertilization (IVF) can donate excess eggs to other infertile women or to research in exchange for a discount on their own treatment, like in Israel, where paid donation is illegal, but women undergoing assisted reproduction may share their eggs with other women. This practice has generated a small stream of eggs (Frith, 2001; Holland, 2005), but it depends on the acquisition of eggs from women who are in need for access to treatment (House of Commons Science and Technology Committee, 2005).

In Singapore, egg donation is legal, but financial reimbursements are limited to a small fee for travelling and personal expenses (Hunt, 1995).

To give or not to give?

Human Fertilization and Embryo Authority (HFEA) first addressed the issue of free egg donation versus paid egg donation in 1993. In 1998 HFEA concluded that egg donations should be voluntary and, therefore, that financial repayment should not be recommended (Daniels, Lewis & Ruth, 1997; Daniels & Haimes, 1998; Fox, 2005)

In South Korea, since the Woo Suk Hwang scandal, egg donors cannot receive any financial or personal benefit. In this case, the problem debated was whether or not the first successful attempt to derive stem cells from a cloned human embryo was done in an ethical matter. Initially, the study was appreciated worldwide, then after three months

Nature publication interviewed one of Hwang's graduate students, that had supposedly donated eggs. The staff admitted they paid at least 20 women for their egg donations (Pearson, 2006). The Korean people supported scientist Hwang and literature has presented more and more studies of embryo research that continued the research of Hwang (Nakajima, Inomata, Ito & Kashiwazaki, 2008).

One recent publication, stated that offering money to egg donors would lead economically vulnerable women to sell their eggs, and would create premises for exploitation of socially and economically disadvantaged people (Pennings & Devroey, 2006).

The notion of traditional family

The notion of family values introduces new and interesting particularities in egg-donation families. Providing gametes to an unknown person, and helping him/her form a family in many ways makes it easier for the gametes donor to accept the fact that their DNA will be shared with another couple (Lui et al., 1996; Thum et al., 2003). On the other hand the donor can expect to be paid, for the comfort of the family that has benefited from the donation (Paulson et al., 2008; Paulson & Sauer, 1994). Most of the couples who receive the donated gametes prefer that they never encounter their donor (Lockwood, 1997). Some gamete donors happily accept this anonymous arrangement and if any kind of reimbursement is possible it could symbolize the completion of a transaction (McWhinnie, 1996). However, this "closure" represents only the commercial provider's point of view.

It can be argued, and is argued, that owing one's existence to a commercial transaction can be very disturbing for the conceiving products, more precisely, the newborn babies (National Advisory Board on Ethics and Reproduction, 1996). These arguments include the depersonalization of the human beings and are aggravated by the impersonal, informed nature of the exchange the parents made in order to conceive them. Knowing that half one's genetic heritage is owed to an individual who abandoned them is likely to be very harmful (McWhinnie, 1996).

Take home message

One can argue many pros and cons concerning this raising issue of egg donation and the ethical issues associated with it, which can no longer remain unspoken and need a thorough analysis (Smajdor, 2008; Steinbock, 2004).

Some tried to hide willingly the fact that they offered money or forced employees to contribute for the benefit of "science", like the case of Woo Suk Hwang, that "earth quaked" the world of ART and put in a sensitive situation the whole community of human research in the field of ART.

Well informed consent should be obtained from potential egg donors, including the fact that they may learn about mutations, like CFTR gene mutation in cystic fibrosis or medical problems about which they were unaware, but for which they will not receive treatment. (Sauer, 2001) Also, the families that benefit from a donation, must know that no success is guaranteed and that unknown diseases are possible even after scanning the potential donors for medical conditions (Sauer, Paulson & Lobo, 1995).

Ethical problems will always be part of the ART world, but it is up to us, the physicians working in this field, to do what is right for our patients and why not, our own conscience.

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