

Patrick Cusworth

1 What is IVF?

In Vitro Fertilisation is the creation of new embryonic human beings *ex utero*, involving the mixing of ova (eggs) from the woman with sperm from her husband, partner, or from a donor.

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Firstly, the woman is injected with fertility drugs in order to stimulate the ovaries to produce more than the usual one egg. Some of these drugs can now be administered via a nasal spray. This process is not without risk, and is also both intrusive, and extremely painful for the woman concerned. When the eggs are retrieved – usually between around 10 and 14 – they are then fertilised *in vitro* ('in glass'), usually in a petri dish. Then two embryos (or three in exceptional circumstances) will be re-implanted into the womb of the mother. The remaining embryos will then either be frozen for future fertility treatment (though not necessarily with the same woman); used for destructive experimentation, or simply destroyed.

2 An outline history of IVF

When Louise Brown was born in 1978, many members of the press were keen to laud this announcement as a modern-day technological miracle. Soon, the IVF revolution was in full swing, with the first 'test-tube' twins coming two years later. By 1985, patented forms of storing embryos in liquid nitrogen were the modern reproductive norm. When Chloe O'Brien was born in 1992 however, that ushered in a whole new element to IVF. Chloe's embryonic siblings had been screened out because of 'defective' genes inherited from their cystic fibrosis gene carrying parents. This was the first recorded practice of Pre-implantation Genetic Diagnosis (PGD). PGD involves the creation of embryos through IVF, before each one is genetically tested for 'undesirable' characteristics. Those (such as Chloe herself) that come 'up-to-spec', qualify for the right to spend nine months in their own mother's womb. Those that fall outside the blueprint of the manufacturer are either discarded or destroyed.

3 Main objections to IVF

- A Extremely wasteful of human life.** Since the passing of the 1990 Human Fertilisation and Embryology Act, over 925,000 human embryos have been created – with untold numbers created prior to this date. It has been conservatively estimated that from this number, around 4% of these tiny, unique human individuals actually go on to be born. IVF is extremely wasteful towards early human life, to the point that overall, far from being a creative technique, it is primarily destructive. According to IVF practitioners, this is a necessary evil, justifiable in the treatment of infertile couples. Yet nowhere in any field of medicine would such a poor success rate be tolerated. The incalculable numbers of human embryos destroyed in laboratories must be added to the 180,000 children who lose their lives each year through abortion for us to understand the full extent of the technological holocaust.
- B Bad for the health of women.** Not only is IVF an extremely difficult and emotional process for a woman to endure, but it is also an extremely painful and intrusive process as well. Furthermore, hyper-stimulation of a woman's ovaries is not without risk, as we have seen from numerous reports from the IVF world, where such stimulation has resulted in bloated and ruptured ovaries, potentially cancerous cysts, water retention, and even ovarian cancer. The risks of the IVF procedure has led to the establishment of an international pressure group which unites concerned individuals from different backgrounds who are eager to protect the health of women.¹ Success is far from guaranteed, and there have been several suggestions from medical practitioners that it can also compound existing damage, resulting in the woman being even less fertile than before.

- C Selective reduction.** While the 1990 legislation allows for a maximum of two embryos – three in 'exceptional' circumstances – to be implanted, this rule does not apply for GIFT programmes which involve the transference of multiple numbers of eggs and sperm. As a result, the likelihood of multiple pregnancy (where more than one baby is gestating in the womb) is far higher in IVF and GIFT than in normal reproduction, and even those embryos that are considered worthy enough to be implanted are still at risk. In such a case, selective reduction may still be offered. The Sunday Times newspaper recently described what this means: 'The procedure involves placing two embryos in the woman's womb in the hope that at least one of them will implant. If both develop, one of the twins is destroyed by injection to stop its heart in order to increase the growth potential of the other.'² The choice as to which child(ren) to abort is often based upon head circumference – the fate of life or death being based on a matter of millimetres. This procedure also carries a considerable risk of miscarriage of the surviving babies, leaving the mother with a dangerous mixture of grief and guilt.
- D The abuse of poorer women.** In the case of women whose ovaries have ceased producing eggs, IVF practitioners in London have come up with a solution. Women who cannot afford their own treatment will endure two or more cycles of hyperstimulation, and 'donate' all but the last cycle of eggs to the clinic to be offered to barren women in return for free or reduced rate treatment. Not only does this expose vulnerable women repeatedly to an extremely painful and hazardous procedure, it also exploits the desperation of women to have a child of their own. We have seen in developing countries the ruthless sale of human organs in return for paltry sums – how long before we uncover a similarly inhumane trade of human oocytes?
- E Damage to frozen embryos.** According to many numerous scientific researchers, freezing of embryos may cause damage to the genetic material of an individual, which can potentially lead to subsequent abnormalities³. Most IVF centres have continued to use nitrogen freezing, and simply ignore the compiled studies in this field.
- F The abuse of human life.** IVF has unquestionably opened the door to gross abuses of human life, and it will almost certainly lead to still greater abuses being tolerated in the name of 'science' and 'reproductive choice'. For example, PGD alone has already been used for sex selection purposes, genetic predetermination, and even to enforce a disability upon the created child. This represents not only a form of eugenics – the quality control of human beings, disregarding the dignity of both mother and child – but also carries the enormous potential for further abuse.
- G Biblical objections.** Numerous biblical passages point towards the humanity of the unborn child, from embryo onwards. St Luke writes of a foetus leaping for joy at the acknowledgment of an embryo, when he reports that the unborn John the Baptist 'skipped' (eskirtesen) in his mother's womb when she heard the greeting of the Christ-carrying virgin (Luke 1:41). This New Testament revelation of Jesus in Mary presupposes the Old Testament belief that the womb of woman is the stage on which the first scenes of the human drama are played out. The Lord forms, 'knits together', every man from the womb (Psalm 139:13; Isaiah 44:2,24)⁴.
- H There are far better alternatives.** Even Prof. Lord Robert Winston, himself Head of Assisted Conception at Hammersmith Hospital, has criticised IVF's low success rate (around 15-18%), and the experimental nature of many of its practitioners, calling for a more 'holistic' method. Now ethically sound methods such as the LIFE Fertility Programme and NaproTech already boast a superior success rate to IVF, with nothing near the pain and intrusiveness – and at around a third of the cost.
- I Human dignity.** Even if IVF were totally safe for mothers and babies, it is still the technological manipulation of a natural process. Children are gifts to be loved and welcomed unconditionally, not manufactured and sold as mere biological products. As C.S. Lewis warned, society should also

remember that the so-called mastery of man over himself inevitably becomes only the mastery of a few people over the many⁵. IVF, and every branch of it, therefore represents an increased transference of power and autonomy into the hands of the few over the many women who submit to them.

4 IVF: The future

The Human Fertilisation and Embryology Authority (HFEA) have shown an increasing tendency to endorse PGD and other forms of discriminatory genetic analysis. If this trend continues unabated, the likelihood is that eugenic testing will become even more severe than it is at present. This will not only result in the numbers of embryonic human beings that survive to birth dropping from the current 4% to possibly less than 1%, but a Nietzschean social criteria will determine the very existence of those manufactured children that DO survive.

5 Further reading - books and briefing sheets

Begotten or Made?	Oliver O'Donovan, Oxford University Press, 1984
Embryos and Ethics – The Warnock Report in Debate	Ed. Nigel M. de S. Cameron, Rutherford House, 1987
The Concentration Can	Prof. Jerome Lejeune, Ignatius Press, 1992
The Abolition of Man	C.S. Lewis, Macmillan, 1947
Assisted Reproductive Techniques: A Mixed Blessing?	Anna Flynn FRCOG, LIFE, 1992
Assisted Conception: Ethical and Social Problems	Rev Dr Anthony Fisher, LIFE, 1994

References

- 1 See 'Hands off our ovaries': <http://handsoffourovaries.com/>
- 2 'British fertility clinics at foot of IVF league table' *The Sunday Times*, 26th March 2006.
- 3 Jerome Lejeune, *The Concentration Can*, Ignatius Press, 1992.
- 4 C.S. Lewis, *The Abolition of Man*, Macmillan Press, 1947.
- 5 John Seward, *Redeemer in the Womb*, Ignatius Press, 1993, p32.