MEDICAL-MORAL DILEMMA: Fetal Experimentation
(SEVENTH OF A SERIES)

CASE: Since the 1973 Supreme Court decisions regarding abortion, approximately 700,000 legal abortions have been performed each year in the United States. One effect of this has been to make large numbers of aborted, living infants available for experimentation. There is no doubt that such research can yield significant benefits: the development of new techniques of perinatal care, the acquisition of knowledge concerning the effect of various drugs on the unborn, etc. The morality of abortion itself is not at issue here, for the authoritative teaching of the Church and the arguments from natural reason tell clearly against the wrongness of abortion. The question that concerns us is this: given that an infant has been or is to be aborted, is it permissible to conduct harmless, nontherapeutic experimentation on it for the sake of gaining information useful in protecting the lives of other unborn and newborn infants?

AFFIRMATIVE: Many people argue that experimentation on aborted children can be justified on the basis of what has been called “experimental opportunism,” i.e., the taking advantage of situations that “fall into our lap.” For example, it would be morally wrong to give a dangerous substance to a child to test the level of toxicity; but if the child is admitted to an emergency room after having accidentally ingested the substance, it would be morally permissible and perhaps required to wrest some human good out of human tragedy by using this accident to discover the effects of the substance on children. It is further argued that the case of abortion is analogous. As long as the tragedy of abortion is going to occur, experimentors are to be commended for bringing some good out of suffering. Thus, many hold that our antecedent opposition to abortion should not lead us into foregoing the important benefits of fetal experimentation.

NEGATIVE: The major response of the negative is that the principle of “therapeutic opportunism” cannot legitimately be appealed to here because a procured abortion, unlike the case of accidental poisoning, is the result of human decision. Three considerations seem relevant:

(1) One may present an argument based on consequences: to derive benefits from some policy is to make that policy more likely and more difficult to rescind. If abortion is wrong and not justified by its beneficial consequences, then one should attempt to keep those consequences to a minimum in order to make abortion less attractive. Support for abortion in this country might be reduced if the benefits of experimentation were not part of the “payoff.”

(2) One may adduce an argument based on nonconsequentialist considerations: to perform an experimentation on an individual who is an available subject only because of an injustice done to it is to commit a further injustice; it is to add insult to insult. Some advocates of experimentation have maintained that the gaining of beneficial information from an abortion “ennobles” an otherwise ignoble death, but this view can be held only by someone who sees nothing wrong with abortion in the first place. Consider an analogous argument: since a Jew in one of Hitler’s concentration camps is going to be killed anyway, why may we not experiment on him? The point here has nothing whatsoever to do with the question of whether the experimentation is harmless or informed consent is given: we should not even ask.

(3) The affirmative case blurs the distinction between experiments performed before versus after an abortion. Experiments performed prior to an abortion, such as the woman’s ingestion of a drug that may be harmful to the child, can create pressure to go ahead with the abortion and make it more difficult for the woman to change her mind. She might reason, “Since I have already taken a drug that may have irreparably damaged the baby, I can’t back out now.” Experimentation which puts pressure on a woman to consent to an abortion is not morally permissible.