Deep Freeze Storage of Human Sperm/Embryos

FACT: Some 3,000 human births have involved the use of frozen sperm. Two separate groups which together surveyed about 2,000 children conceived with frozen sperm reported no increase in abnormalities or abortions. Mouse embryos have been frozen, stored at -196°C for four years, and, after thawing, have developed normally. (Julie A. Miller, "Cell on Ice," Science News, September 16, 1978, pp. 202-206.) Finally, a fertilized human ovum frozen for 53 days before implantation in the mother’s uterus resulted in the birth of an apparently normal 7-pound, 6-ounce girl in Calcutta (St. Louis Post-Dispatch, October 8, 1978, p. 9A).

COMMENTARY: Right on the heels of the “test-tube” baby comes the “freezer” infant. One can think of several applications for the freezing technique. Robert T. Francoeur suggests that frozen human fetuses could be taken along on lengthy space voyages. A preprogrammed computer “nurse maid” would thaw out the frozen embryo some 20 years before arrival and direct subsequent development, thus providing young adults ready to explore a new planetary system. (Utopian Motherhood, Doubleday & Co., Garden City, N.Y., 1970, p. 40.) As in the just announced birth in India, freezing the fertilized egg allows implantation in the mother after her next ovulation, thus insuring a normal hormonal environment. The use of frozen sperm permits a woman to have the consolation of conceiving a child after her husband’s death or while he is away on a long journey, and so on.

While all these possibilities may be seen as meeting some human needs, the ethical aspects are thorny. If a woman conceives a child allegedly with her husband’s frozen sperm during his absence, there might be a question in his mind as to whether he in fact was the father. Or, what about inheritance questions for a child conceived after a man’s death? Apart from these and other questions of potential injury to the frozen fetus, the more fundamental question is the impact of such technology on how men and women see their role in human reproduction. The procedure tends to remove the generation of human beings from the sanctuary of a loving marital embrace to a sterile laboratory setting. The resulting change of attitude toward the human person may be subtle and difficult to measure, but related experiences—such as the impact on marriage of easily obtainable divorce—suggests that tampering with a process deeply ingrained in human behavior and institutions will not lead to human betterment. The Church especially in the last 40 years has repeatedly insisted that the generation of human beings must take place only within the loving commitment of a husband and wife and by a process which has not only survived hundreds of thousands of years of evolutionary testing (God’s instrument) but also intimately expresses the uniqueness of each partner, symbolizes their mutual love, and reinforces that love by an ecstatic act of mutual self-giving. To divorce this process so essential to persons and community is to invite a multilevel disaster.

Medical-Moral Dilemma
Experimentation on Children

(Continued from page one)

Experimentation on children. The question at issue concerns the basis for presumed consent, which in turn pertains to the nature of the fiduciary relationship. The fiduciary is expected to act solely for the benefit of another individual: personal physicians, lawyers, etc., are good examples of people who have such a relationship with their patients or clients. Although the relationship between parent and child can be considered a fiduciary one, it is not completely so. For example, parents’ decisions about summer vacations take into account how the vacations would affect their children, but this is not the only factor considered. It would be perfectly legitimate for a couple to go to the seashore even though their children might enjoy the mountains more. The crucial question parents ask is: Could the child, when he becomes mature and is able to reason as an adult, reasonably object to this decision? Parenthood is a role of preparing the child for future independence and maturity. Parents justify certain decisions in the belief that the child will understand and accept them when he grows to maturity. This discussion of the fiduciary relationship of parent to child suggests a criterion somewhat more stringent than McCormick’s but less restrictive than Ramsey’s: nontherapeutic experimentation on children is justified when their consent may be presumed because there is no reasonable basis upon which the child could object when he reaches maturity. Note, however, the important caveat: the risk entailed is judged to be minimal. Consequently, the reasonableness of the presumed consent is based on the benefit to other children and the absence of more than minimal risk. (For further discussion see An Ethical Evaluation of Fetal Experimentation: An Interdisciplinary Study, Pope John Center, St. Louis, 1976, pp. 13-14, 87-92, 101-104, 106.)—Gary M. Atkinson, Ph.D.