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COMPASSIONATE ADOPTION FOR THE MOST HELPLESS

by Richard J. Poupard

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In 2005, President George W. Bush had a press conference with several couples and their children. Politicians kissing babies is not a new phenomenon, but the children at this press conference were unique. Each one of them were conceived via *in vitro* fertilization (IVF) and then adopted, carried, and born by nongenetically related mothers. Not only were the children given the chance to live, but the adoptive parents were able to experience the joys of parenting when it previously may have been impossible. This life-saving joyful experience is made possible through embryo adoption, and facilitated by organizations such as Snowflakes Embryo Adoption.

IVF is so common today that it is easy to forget that this technology only emerged about thirty years ago. I recently held a beautiful three-month-old from a coworker who was told at the age of twenty-two that her fallopian tubes were occluded and she would be unable to conceive a child naturally. Less than three years after she received that emotionally traumatic diagnosis, she has experienced a routine pregnancy and the birth of a healthy baby girl with the aid of IVF. This story has been repeated literally millions of times. Considering the value and wonder of human life, and the terrible toll that infertility causes so many couples, it is difficult for some to view IVF as anything but a positive moral good. However, the use of this and other reproductive technologies has brought new challenges to how we view and value human life. We need to understand the intrinsic value of every human life, including those in the embryonic phase, and attempt to think and act consistently within that ethic.

An embryo is created naturally by the meeting of sperm and egg in the woman's fallopian tube. IVF differs in that the fertilization process occurs outside of the woman's body, followed by a transfer of the embryo to the woman's uterus. If implantation successfully occurs, the embryo receives necessary nutrients and oxygen, and is able to continue to progress to all other stages of human development just as a naturally conceived embryo. I do not believe that the mere fact that fertilization occurs outside of the woman's body is reason to condemn all IVF procedures as inherently immoral. However, the manner in which we presently perform IVF is cause for grave moral concern.

One of the most challenging aspects of IVF is the risk and discomfort of the egg donation procedure. Minimally, it involves the woman injecting herself with hormones to hyperstimulate her ovaries to produce a large number of eggs and a minor surgical procedure to remove the eggs. Due to the risk and effort involved in extracting these eggs, most clinics attempt to gain a large number of them during an attempt. These eggs from the woman and the sperm from her partner are combined in order to create a large number of embryos. This is done to increase the chance for “healthy” looking embryos and to limit the number of egg donation cycles needed. An attempt is made to transfer one or more embryos to the woman, and the remainders are saved for possible future use. This is made possible because the embryos possess a curious property; they are hearty enough to survive freezing at very low temperatures. Not all embryos survive the freezing and warming process, but many that do continue to develop as any other human being at that stage of life when implanted into a mother’s womb.

Freezing embryos is not required to perform IVF. In fact, the first IVF procedures were done using so-called “fresh” embryos, and even today the highest success rates are gained using embryos that have not been frozen. Freezing embryos does make it easier to perform another round of IVF if the first one is unsuccessful. If the first attempt is successful, however, and the couple is blessed with a newborn child, the other embryos may remain frozen in storage. This is the reason why some reports claim that there are more than four hundred thousand human embryos presently frozen in storage.¹

The vast majority of frozen human embryos are “reserved” for possible future implantation attempts by their genetic parents. What is the fate of the ones not desired for implantation? Fertility clinics generally handle them in one of three ways. First, most of them are unfrozen without an attempt to implant. The result is that the embryo simply dies. Second, some are donated for embryonic research, including embryonic stem cell research. Third, a few are donated to other couples with infertility problems for attempted implantation. The protocol that has been used for embryo donation is similar to the one used for human tissue or organ transplantation.

Beginning in 1997, another option became available, one that treats human embryos in a manner consistent with their moral worth. This option is called embryo adoption. The Snowflakes Embryo Adoption, initiated by the Nightlight Christian Adoption Service, differs from the usual embryo donation in a number of important ways. The Snowflakes program treats embryos with the same moral worth as other human beings in later stages of development. The genetic parents have the option of choosing the adoptive parents of their embryos, and can be informed whether their embryo survived the process and became a newborn. There is a home study performed on the prospective adoptive family that includes both counseling and education.² In short, the adoption of the preborn embryo is handled in the same way as an adoption of a newborn human being.

The past concept of embryo donation treats the human embryo as mere medical tissue that the genetic owners can donate if they wish. Unlike donated tissues or organs, however, science dictates that the human embryo is itself a whole, unique, individual

organism of our species.³ The circumstances that surround our conception or our present environment do not change our moral status or worth. The same should apply to the human embryo. The fact that many are frozen or are no longer desired by their genetic parents does not change their value. Our response to human newborns or infants that cannot nor will not be raised by their genetic parents is compassionately to attempt to find nongenetically related adoptive parents to take care of them. Humans in the embryonic stage of development should be treated the same way. The Snowflakes program and others like it can help to make that happen.

It is clear that the IVF industry does not treat human embryos with the inherent dignity and value consistent with Christian theology. Although I do not believe this is an indication of the inherent immorality of the practice, a Christian couple who has sought IVF or is considering it has the responsibility to ensure that every human being that is conceived is treated with proper dignity and respect. It should be noted that this may decrease the chance that the couple will have a successful birth of a child. Some fertility clinics may be hesitant or unwilling to change their routine even at the request of the couple. Regardless, the desire to have a child does not give us license to treat conceived human embryos in an immoral fashion.

I suggest that two basic guidelines be followed. First, for those who find themselves with a number of embryos that are presently held in storage, consideration should be given either to attempting to implant these embryos or to allowing them to be adopted by another couple willing and able to raise them. This may not be the easiest choice emotionally, but I believe we do bear responsibility for the human organisms that we have intentionally generated. Allowing the embryos to be adopted through an organization such as Snowflakes is an excellent option. Genetic parents can help to choose the adoptive family, and can choose to be informed regarding the fate of the embryos: whether they survived the freezing process, and whether they resulted in a successful pregnancy. Genetic parents can also have the organization choose the adoptive parent for them if they wish to stay out of that process.

Second, potential IVF patients should clearly communicate their views on the human embryo to the clinic and not wait for them to bring the topic up. A fact sheet provided by the American Fertility Association recommends asking about massage therapy and acupuncture, but does not mention talking to your physician about the disposition of the embryos that they create.⁴ If that concern is to be addressed it must be raised by the couple. Care should be taken to inform the fertility clinic that you believe that every embryo has intrinsic value, and you only wish to create the number of embryos that you are either willing to carry or will allow to be adopted out. The fact that we have the ability to create a large number of embryos at one time carries with it significant responsibility. Although we may be motivated by our strong desire to have a child, we should not allow that commendable goal to risk intentionally conceiving human embryos only to allow them no chance to live.

As medical technology advances, the bioethical challenges to the sanctity and intrinsic value of human life will take on new forms. It is somewhat ironic that a couple that may have struggled for years without being able to conceive a child may quickly be

confronted with the dilemma of having generated an abundance of human embryos. Human beings have intrinsic value because they are created in the image of God, and they do not lose that value based on their size, level of development, or present temperature. It is wonderful that through IVF so many couples are now able to enjoy children and experience the miraculous blessings of new life. Through the Snowflakes embryo adoption program and others like it, we can allow even more adoptive parents to share this experience while giving “leftover” human embryos a chance to live. —

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NOTES

- 1 David Hoffman, “Cryopreserved Embryos in the United States and Their Availability for Research,” *Fertility and Sterility* 79, 15 (2003): 1063–1069.
- 2 <http://www.nightlight.org/downloads/nightlight-embryo-overview.pdf>.
- 3 A robust scientific argument for this can be found in Robert George and Christopher Tollefsen, *The Embryo: A Defense of Human Life* (New York: Doubleday, 2008) and Francis J. Beckwith, *Defending Life: A Moral and Legal Case against Abortion Choice* (New York: Cambridge University Press, 2007).
- 4 http://www.theafa.org/site_images/library/Initial_Visit_Fact_Sheet_1.pdf.