Gamete donation mirrors society

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‘Your children are not your children. They are the sons and daughters of life’s longing for itself. They come through you but not from you. And though they are with you, yet they belong not to you. You may give them your love but not your thoughts. For they have their own thoughts. You may house their bodies but not their souls, for their souls dwell in the house of tomorrow, which you cannot visit, not even in your dreams’. (Kahlil Gibran, The Prophet)

Love, marriage and having a baby are the cornerstones of the traditional family. Terms such as ‘mother’ and ‘father’ require no definition, fertilization requires no assistance and gestation requires no clarification. However, the widespread availability of in-vitro fertilization (IVF) and the growing acceptance of egg and sperm donation have made third party involvement in the reproductive process commonplace throughout the world (Soderstrom-Anttila, 1996).

As a result, new terminology has evolved to clarify the participants. The rearing mother and father raise the child but may or may not be the source of genetic material (genetic mother or father). Fertilization can occur in the body through intercourse, insemination or gamete transfer, or in a laboratory through IVF. The subsequent pregnancy may be carried by the rearing mother or a gestational carrier thus completely separating conception, birth and parenting (Abdalla, 1994; Mahowald, 1996).

The source of genetic material may come either from the rearing parent or from a donor. As such, the rearing father may contribute genetic material to either the rearing mother or a donor egg. Similarly, the rearing mother may receive genetic material from a donor. Finally, neither the rearing mother nor father may contribute genetic material using instead both donor egg and donor spermatozoa. Therefore, four combinations of genetic material exist (Seibel, 1996).

Each of these four sets of conditions may achieve fertilization either in the body or in the laboratory creating a total of eight combinations. Add to this the possibility that each of these eight combinations could gestate either in the rearing mother or in a surrogate/gestational carrier and there become 16 ways to have a child exclusive of adoption.

This ‘modern’ family description seems at first glance the result of a technological imperative—a specific characteristic of assisted reproductive technology (ART). As such, ART is viewed by some as leading society in a worrying or inappropriate direction.

We are in total agreement that the social and ethical issues imposed by ART are complex and controversial (Schafer et al., 1995). However, we do not feel that the essence of the issues was created by ART. Philosophically, such a perspective would not take into account the transition that has occurred in society per se. Nearly one in two marriages end in divorce and children are often involved. When these divorced individuals remarry, their traditionally-conceived children will possess two sets of parents and four sets of grandparents, each consisting of one genetically-unrelated rearing parent and two genetically-unrelated rearing grandparents. The situation is further amplified with adoption because those children have no genetic link to either parent or set of grandparents.

Therefore, upon reflection, it is our view that society must accept that the definition of the ‘traditional’ family has changed. Its boundaries have expanded to include alternative arrangements for child bearing and parenting that are accompanied by complex social and ethical issues. These issues should be contemplated both by society and practitioners of ART alike.

We believe that families resulting from gamete donation mirror society’s norms and emulate society’s example. Claims that medical technology merely implements the technological imperative fail to recognize the enormous social evolution that has occurred.

References


