

Fertility overload

Legislators should tame the 'Wild West' of assisted reproduction

by Marcy Darnovsky
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The recent birth of in vitro fertilized octuplets to Nadya Suleman, a Whit-tier woman, sent jaws dropping all over the world. Before long, another southern California controversy emerged: The Fertility Institutes in Los Angeles last month announced plans to not only screen in vitro fertilized embryos for gender, but also for eye and hair color.

Both events prompted widespread public concern and condemnation. Most fertility specialists expressed dismay about the irresponsibility of Michael Kamrava, the Beverly Hills doctor who helped create the eight-baby pregnancy. And outrage about the "designer-baby service" prompted The Fertility Institutes to suspend its offer, at least for now.

Millions of people have formed families through assisted reproduction, and its appropriate uses should be accessible. But, as the birth of Suleman's octuplets and The Fertility Institutes' "designer-baby" program demonstrate, assisted reproduction techniques can be terribly abused.

Multiple births — even triplets and twins — put mothers and babies at much greater risk than single births. Pre-ordering the sex or cosmetic traits of a child is a recipe for family discord and societal conflict. If parents pay a lot of money for a blond-haired, blue-eyed athlete but instead get a freckled poet, do they send her back? If the affluent start buying "better" babies, what new kinds of discrimination and inequality are in store?

Nearly every industrialized country has adopted regulations to protect fertility patients and their children, and to prevent unacceptable assisted reproduction practices. But the United States has not. The U.S. has almost no regulation or oversight over the multibillion-dollar baby business. Around the world, America is known as the "Wild West" of assisted reproduction.

Instead of laws, the U.S. relies almost entirely on voluntary guidelines issued by the American Society for Reproductive Medicine, the fertility industry's professional organization. One of the organization's recommendations is that just one embryo be transferred into a woman under the age of 35, unless an unfavorable medical prognosis suggests stretching that to two. The society also discourages screening embryos to select a future child's sex. Unfortunately, these guidelines are not binding and are routinely flouted. In theory, the professional organization could put at least some teeth behind its rules by publicly suspending the memberships of fertility practices in noncompliance. But it has not exercised even that minimal influence.

No shame

The sad fact is that the majority of U.S. fertility centers break the rules of their own profession, with no apparent shame or consequence. Data from the Centers for Disease Control show that more than 80 percent of U.S. clinics disregard recommendations to implant no more than two embryos at a time in young women. And a quick look at some fertility clinic Web sites shows that many are advertising gender screening of embryos for non-medical reasons.

The recent controversies have persuaded even some who previously opposed federal oversight of the fertility business to support it. Pamela Madsen, a leading advocate for infertility patients, wrote that after fighting the regulation of reproductive technologies for close to 20 years, she now believes that “if the doctors in our field cannot employ common sense — and harness in their own — the time has never been riper for the federal government to step in.”

Narrow laws

The government should be careful and thoughtful when regulating fertility clin-

ics. Legislation should address problems at hand and not be used to advance other agendas, such as opposition to reproductive rights. Regulation should be aimed not at women’s bodies, but at the assisted reproduction enterprise.

In many countries, fertility clinics are licensed by a government agency. This allows for rules to be modified as needed but provides a mechanism for ensuring that clinics are following them. A few extreme reproductive practices are typically prohibited outright -- most commonly efforts to clone a child or to create “designer babies” by genetic modification or embryo selection. Rules

about permitted procedures are set and enforced by the licensing agency.

The ongoing revelations from the banking and financial sectors are teaching us hard lessons about the dangers of inadequate regulation and oversight. The fertility industry, too, has shown the limits of self-regulation.

It’s time for the federal government to tighten the reins, set the rules, and establish ways to enforce them.

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