CASE STUDY RESPONSE

Issues are complex and need innovative solutions

GRACY ANDREW

Sangath Centre for Child development and Family Guidance, 841/1, Defence Colony, Alto Porvorim, Goa. INDIA e-mail: gracyandrew@gmail.com

The increasing use of assisted reproductive technologies (ART) has thrown up a number of ethical dilemmas the world over. The issues raised have been varied. For example, there is the conflict between children's right to know their natural parents and the practice of guaranteeing anonymity to sperm donors. Another controversy has been regarding the right of a lesbian couple to start a family through donated sperm. These are just two of a host of debates within the ethics of ART.

While the authors of the case study (1) have thrown light on most of the issues involved in this particular case, there are some ethical problems that are worth mentioning.

In vitro fertilisation (IVF) has been refined to permit relatively high success rates at various centres worldwide. However, the process involves a number of stages, each associated with specific risks, including ovarian hyper stimulation, a potentially fatal complication. To avoid such risks one of the most important requirements of the treatment is continuous monitoring of the medications.

Therefore the first questions here are of information and proper practice. Was the couple aware of all the risks of the procedure? Was the procedure monitored properly?

Clinical practice and guidelines vary around the world. In the UK and some other countries, clinics follow a published code of practice. In India patients are often deliberately misled about the treatment's possible success rate. The author mentions the need for informed consent and pre-treatment assessment. This is a very crucial requirement.

Next is the requirement for psychological support. The process itself can be psychologically stressful. In the case described it could be doubly so, as the woman is fully aware of her financial and personal predicament. Was there any counselling service available for the couple?

Another issue would be the financial costs involved. The treatment is very expensive without a guarantee of success. Was

the couple and the family aware of the chances of failure and possible needs to undergo prolonged treatment?

Neither conception nor a successful outcome of pregnancy is guaranteed by the IVF procedure. There are many reasons why pregnancy may not occur with the IVF procedure. Some of the known reasons for failure may include failure to recover an egg, the recovered eggs being abnormal; insufficient semen for fertilisation of the recovered eggs, the embryos not developing normally or not developing at all. Considering that the whole process is so complicated there is a greater chance of costs increasing, and in the circumstances of the case described one wonders if the family was aware of all this.

Another risk is that of multiple pregnancies. For this couple the financial and emotional burden in case of a multiple pregnancy would have been considerable. One wonders if the family was aware of this possibility before consenting to treatment.

Other issues have been adequately highlighted by the author: the predicament of the woman given her husband's disability, the decision being made by a third party, and the responsibility of bringing up a child in these circumstances.

To conclude, this case brings to the foreground the very important role of the health-care professional in the field of assisted human reproduction. It is the responsibility of the health-care professional to make sure that the couple is fully informed of the procedure's benefits as well as risks, and to ensure that they give their informed consent. Ethical guidelines should be applied universally.

Finally, infertility treatment includes not only medical services but psychological support as well, an essential component to ensure the family's well being.

Reference

(1) Adibah I., Abu Bakar A Y W N. Should this couple have undergone fertility treatment. *Indian Journal of Medical Ethics* 2005; 2:126.