

A PHILOSOPHICAL INQUIRY ON THE SCIENCE OF OVUM DONATION FOR MEDICAL REPRODUCTIVE TOURISM AND INHERENT CONTROVERSIES

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Abstract

There is no doubt that ignorance and religion have made many people especially in the third world countries to demonize the practice of ovum donation to couples that are desperately need the fruits of the womb and resources to cater for any financial implications that can make this scientific endeavour a huge success. It is no longer news that some traffickers of ovum from willing donors or sellers to those who are in frantic need of at least one are making ovum donation or sale and medical tourism very attractive in our world of today. Hence, there are remarkable gynecologists and obstetricians, pharmaceutical companies, health insurance institutions, ovum racketeers that are making multi-million dollars from anxious couples through the

ignorance and poverty of many young women especially in the third world countries. Justification for promoting ovum donation has been limited to scientific, social, cultural and psychological benefits without ardent consideration for ethical conflicts that are associated with the stakeholders of this medical practice. The goal of this paper is to evaluate the medical practice of ovum donation and transplant if it enhances the nobility inherent in human dignity or such practice is laden with professional abuses and manipulations of vulnerable allies of this medical service.

Key words: Science, Ovum, Donation, Tourism, Racketeer, Ethics

Introduction

Ovum donation is a medical procedure by which a woman that attained the age of puberty and certified suitable donates ovum to another woman to facilitate her to conceive as part of the assisted process of reproduction through-vitro fertilization. This gynecological feat was attained in 1978 in UK by Steptoe, Edwards and others; and after then over 30,000 children have been conceived and delivered safely.¹ As of today, the advancement in IVF has given fertility experts the courage to harvest as many ova as possible from women and fertilize them with donated sperms and freeze them in fertility laboratories.² The embryos developed in such reproductive laboratories are often transferred into the wombs of intended but infertile mothers instead of the uterus of those that donated the ova.³ In actual fact, historical record shows that over 1 million babies have been safely delivered for

infertile women in our world of today.⁴ There are women also who want to harvest some of their *ova* to be frozen and use for in-vitro fertilization when they are ready to have their children.⁵ There is no doubt that the field of medical science has recorded a lot of laudable feats in curative and therapeutic ways of given patients succour from health problems and a second chance for those in need of replacement for their defective reproductive organs. The search for medical intervention is not limited to a particular country; hence, those that can afford to seek either preventive or curative procedure often go on medical tourism to get reproductive medical services whenever they want and wherever it is available in the world. As a matter of fact, reproductive medical tourism has become multi-billion source of income in the countries that are now the sanctuaries for reproductive medical services as evident in the US, United Kingdom, Germany, France, Spain, Netherlands, Canada, Czech Republic, Greece, China, India, Pakistan, Cuba, Mexico and Colombia.⁶ Judging from this background, it is now in vogue for some women to donate or sell their ovum to those infertile women that are in dear need of one. Besides, there are very young and prospective career women who harvested some of their *ova* and preserve them for later days they can be fertilized and transplanted into their womb. There are also some women who agree to sell their ovum to the rich people that can afford the price while others donated *ova* altruistically to couples in need to have a child in their marriage. The primary reasons why reproductive medical tourism for ovum donation, buying and selling is thriving in our contemporary world are

largely based on the following: (i) infertile female partner in marriage (ii) early menopause of female partner in marriage (iii) some women are naturally without ovaries (iv) damage reproductive organs (uterus, Fallopian tubes and ovaries) through chemotherapy and radiotherapy (v) diseased reproductive organs (vi) genetic disorders (vii) sexual hormonal disorders or deficiencies (viii) undiagnosed infertility (ix) repetitive pregnancy failure (x) reproductive research purposes (xi) the request of Gay partners. It is obvious from the above that the cause of infertility is largely depends on individual personality, life style, biological make up and psychological or other relevant circumstances.⁷

Therefore, the quality and type of medical facilities, socio-cultural, religious, moral guidelines, legal and procedural principles in the countries of any women in the aforementioned categories are the determining factors for going on reproductive medical tourism for effective result. This medical practice is generating serious concerns on the health, moral, cultural, religious, psychological, social and economic implications for the stakeholders of ovum donation or sale in our contemporary world.⁸ The objectives of this paper include analysis on the type of ovum donors and recipients, false speculation on ovum donation, scientific facts about human ovum, religious and socio-cultural issues on ovum donation and acceptance. The ultimate goal of this paper is to evaluate the activities of the stakeholders of ovum sale, donation, procurement, transplant and ethical implications of this medical science vis-a-vis the Kantian principles of autonomy, justice and the kingdom of end.

Speculations on the Science of Ovum Donation and Transplant

The technology involved in the reproductive science of ovum donation and transplant is alleged to be so sophisticated and effective to lessen the curve of the purported diseases associated with female reproductive organs. For instance, the medical procedures involved in ovum donation require three weeks of adequate preparation to dispose a woman into ovulation and released of ovum and another three weeks to return to her natural menstrual cycle. Hence, ovum donation is medically safe, if and only if, the right medication and procedures are carried out by competent gynaecologist and obstetrician on a suitable woman in a qualified reproductive clinic. Besides, the discomfort experienced in the process of ovum collection and potential side effects of the required medication are quite minimal and would ease out gradually after the whole exercise. Therefore, the fear of ovarian failure and the anxiety of getting cancer after ovum donation are not empirically substantiated. Today, the science of *ovum* donation or harvesting for transplant into the womb of infertile women has effectively reached a stage that many women that can afford the cost are going on medical tourism in good number to countries like UK, the US, Germany, Canada, France, Spain, India and other nations where there are fertility clinics to accomplish their heart desire.⁹ However, there are many conspiracy theories about the medical practice of ovum donation and transplant evident in our world of today. Apart from speculations coming from non-health workers, there are many health and religious practitioners that are at the forefront of serious campaign against this medical practice. The focus of their condemnation is rooted in the

unsubstantiated risk of cancers, ovarian infections and other possible health complications for the ovum donor, the religious claim that such practice is oppose to natural order of human reproduction, opposition to the sanity expected in marriage and distortion in genetic hereditary. Moreover, there are other perceived risks and concerns that are quite worrisome. Hence, there is need to critically examine the science of ovum donation, transplant and associated consequences to determine its worth vis-a-vis the value of human dignity.

Philosophical Anthropological Facts about Human Ovum and Transplant

The researches of philosophical bioethicists like Aristotle, Thomas Aquinas, many gynaecologists and obstetricians have demonstrated that a normal woman is ontologically and scientifically born with roughly numerous immature *ova* that will grow into maturity and never produce any new ones again. Reproductive science has shown that majority of these *ova* will never develop into maturity because of a natural process known in gynaecology as *atresia* (a degeneration or closure of a natural passage for follicles to make *ova* available during ovulation).¹⁰ This is a natural process in female reproductive system that start at birth until the end of her reproductive year. A woman is naturally remaining with approximately 400,000 immature *ova* before puberty and only one out of almost 1,000 immature *ova* lost at every menstrual period actually become matured and released into the fallopian tube for ovulation to happen.¹¹ This implies that an average woman will have the opportunity to produce 400 matured *ova* that are suitable for fertilization in her life time. It is obvious

that ovum donation by a suitable woman happens through a natural process that is facilitated with medication to produce some matured ova that are carefully collected, preserved and used when and where it can be afforded by infertile women.

The Fundamental Social Facts about the Science of Ovum Donation and Transplant

The practice of ovum donation is commonly described as the natural quality that is ontologically inherent in human nature as a response to the need of others. Judging from this context, ovum donation is socially accepted as a way fertile women can offer help to infertile couples that are longing to have babies of their own through IVF. As it is highly commendable to donate blood to the needy relatives, friends, accident victims, other vulnerable members of our society and blood banks for anonymous persons, so it is laudable to donate ovum to those that are desperately in need of one in human society. The general recommendations and authorization for this unusual reproductive system in the countries that permitted such practice are strongly based on the need to follow the required procedures that are carried out in approved hospitals by proficient gynaecologists and obstetricians without any apparent negligence and compromise.

In some advanced countries like UK, the US, Germany, France, Canada and Australia, suitable women are often motivated to donate healthy ova for the good of infertile women that eager to have baby. As a way of making the desire to commercialize human ovum unattractive or reduced to an insignificant record, a lot of incentives are provided for altruistic ovum donors with minimal expenses for the necessary pre- and post-procedures involved. It is obvious today that some young

American women are motivated by altruism to donate their ovum, many are attracted only by monetary compensation, while a good number of them are students that donated on average of \$700 for each donation.¹² However, there are some cases in which the government of the countries where the science of ovum donation and transplant is allowed pay a significant amount of money to the ovum donors that often produce ova that are quite effective for fertilization.¹³ As of today, it is quite obvious that “in the US, donors are paid regardless of how many eggs she produces. A donor’s compensation may increase for each additional time she provides eggs, especially if the donor’s eggs have a history of reliability resulting in the recipient becoming pregnant.”¹⁴ This is quite feasible among the population of young girls in the higher institutions and women that the demands of their studies and career respectively have not dispose them to have babies until a later year. This is the primary reason that “in the US, egg-broker agencies are known for advertising to college students who are more likely to be in financial situations that motivate them to participate for the financial compensation.”¹⁵ This window of possibility is regulated differently among the members of the European Union. The prospect of financial compensation is available in many parts of Europe but not left to the whims and caprices of the donor of ovum but to the regulatory body that the collaborative efforts of the member states of the Union put in place. In other words, “the European Union limits any financial compensation for donors to at most \$1,500. In some countries, notably Spain and Cyprus, this

has limited donors to the poorest segments of society.”¹⁶ Judging from this quotation, it is quite clear that the implementation of appropriate policies to make financial reward unattractive for making ovum available for those that are in need in the extreme poor neighbourhoods in Europe is still quite difficult because of poverty.

The Basic Moral Concerns about the Science of Ovum Donation and Transplant

The fundamental concerns of moral philosophers are primarily rooted on the protection of human dignity, justice among the stakeholders, autonomy of the ovum donor, adequate medical care before and post-procedure donation for the donor. The concept of human dignity is ontologically based on the fact that every human being is created in the image and likeness of God.¹⁷ By the virtue of being created in the image and likeness of God, every human being no matter the circumstances that characterized him/her is to be dignified and protected from any form of abuse or manipulation.¹⁸ It is indubitable that article 3 and 29 of the Universal Declaration of Human Rights has imputed every nation in the world to protect the fundamental human rights and dignity of human person within her frontiers from exploitation.¹⁹ The basic concepts and issues relating to human dignity are well defined, articulated, justified and promoted in the writings of moral philosophers like Socrates, Plato, Aristotle, Thomas Aquinas, Emmanuel Kant and a host of others.²⁰ These moral philosophers and those that accept their moral view appreciate the free donation of ovum to infertile women

provided justice, autonomy and adequate medical care are ensured for the donor but oppose to the commercialization of ovum for whatever reason or substandard services to facilitate maximal profits. As Emmanuel Kant would say, the end does not justify the means.²¹ It is obvious that any attempt to monetize availability of ovum for IVF, the human dignity will be easily compromised for wealth and associated abuses. Hence, in 1989, the World Health Organization called on member states to develop and implement policies that can thwart the sale and purchase of human organs like ovum. Nevertheless, just remunerations incurred for effective ovum donation and IVF must be determined, justified and enforced by the member states.

Basic Religious concern on Ovum Donation and Transplant

Generally speaking, there is no religious group that is an advocate of the science of ovum donation and transplant. It appears the shrewdness of the stakeholders of this medical practice inundated many religious groups to remain silence or accommodate the pranks that subtly involved in the exercise. Nevertheless, the Catholic Church strongly opposed any unnatural reproductive system like IVF because every human being is created in the image and likeness of God, right from the conception. This implies that an embryo has a moral worth that cannot be compromised in any way. Hence, the conception of a baby outside the natural sexual relationship of a married couple is condemnable by the church. This implies that the science of ovum donation and transplant is unnecessary and opposed to the divine plan for human reproduction. In other words, the Catholic Church justifies the fact that

every human being has a dignity that is ontologically inherent in him or her by the virtue of sharing in the image and likeness of God through the sexual activity of a married couples that resulted in pregnancy.²² The ontological characteristics of the dignity in human nature of every human being from the moment of conception until the time of death is indivisible, universal, inalienable, inestimable, inviolable, irreducible and indestructible because they are all derived from God.²³ Besides, the Catholic Magisterium condemns ovum donation to infertile women because such reproductive science automatically compromises marital bond that supposed to serve as the basis of human reproduction and family integrity.²⁴ As a matter of fact, “respect for a human person in his origin requires that he not be treated as a product. When a child is begotten through the conjugal act, he comes to be as a gift from God, a gift crowning the spouses’ mutual gift of themselves to each other. When a child is ‘produced’ it comes to be, not as a gift from God, which in truth it is, but as a product of human control.”²⁵ Therefore, no matter how human logic and medical technology make the science of ovum donation and transplant commendable, the hierarchy of the Catholic Church in strongly term opposes any direct or indirect plan of the stakeholders in the medical science of ovum donation and transplant to turn the science to a money-spinning enterprise because of the feasible abuse of the human dignity associated with the human reproductive technology.

Conclusion

In our society of today, the science of ovum donation and transplant is generally considered altruistic because every woman is a part of the humanity and advised whenever she can to help others that are in need of their extra ova for reproductive solidarity and not for commercial purposes. Instead of demonizing all about this laudable medical feat, the government of each nation can formulate policies and laws that can checkmate the shenanigans of the racketeers of ovum donation and transplant while the religious concerns can be left to the faith and conscience of the believers in any transcendental Being of their choice. In other words, ovum donation and transplant must not be made compulsory for women but left to the choice of individual provided all the stakeholders involved in the associated transactions are justly treated to avoid any abuse of human dignity.

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