



БИОТЕХНОЛОГИИ И БУДУЩЕЕ BIOTECHNOLOGIES AND FUTURE

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ETHICAL ISSUES OF GAMETE DONATION: BODY COMMODIFICATION AND TRANSFORMATION OF FAMILY RELATIONS*

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Abstract. The aim of the article is to consider practices of biotechnology that require gamete donation (cloning, human assisted reproduction technologies) and ethical and philosophical questions caused by these biotechnologies.

The study is interdisciplinary and it is based on the research in philosophy, humanities, social and medical sciences. All of the sources in the study analyses gamete donation practices in different scientific fields. The study emphasizes social impact on familiar moral notions and the ability of these practices pose new ones.

In the study the authors have come to conclusion that gamete donation causes new moral dilemmas and made us revisit the familiar notions of family, parental rights and obligations, family relations. At the same time gamete donation contributes to commodification of body and body parts, developing a new market where people make money. Commodification of body causes a set of ethical questions, such as permissibility of usage and exploitation of human bodies. The article describes current and possible future ethical and philosophical challenges, posed by practices of gamete donation. Many of these practices transcend familiar moral judgments and make people reconsider their attitudes toward family and family relations. Gamete donation practices are able to create new forms of family and body commodification practices.

Key words: gamete donation, body commodification, bioethics, reproductive technologies, moral dilemma

INTRODUCTION

Human assisted reproduction technologies were invented in the 20th century in order to treat infertility, but during the process of implementation of these technologies to medical practice, they influenced on humans' perception of their bodies and such notions like family and family relations. Despite the fact that medical technologies had been created for treatment purposes, they were used for family planning and sometimes their usage did not connected with curing.

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For instance, the choice of future baby's gender due to in-vitro fertilization in the USA, where this practice almost is not controlled; bearing a baby for male homosexual couples or bearing a baby by a single woman. The last decades the methods of preventing genetic diseases due to IVF became affordable. Almost all these methods are based on prenatal genetic diagnosis (PGD). It is easy to diagnose Down syndrome and some other severer genetic diseases of a particular embryo in-vitro before implanting into woman's womb and do not perform the implantation.

With the possibility of treating incurable in earlier times conditions of infertility and preventing genetic diseases of future babies, human reproductive technologies have brought new methods of family planning. These new technical inventions have transformed family and family relations.

At the same time altruistic gamete donation cannot ensure needs of families and researchers. Donors take health risks and often bear financial costs. That is why donation is conducted on the commercial basis today. This fact causes the phenomenon of body commodification, including body parts and substances.

METHODS AND MATERIALS

The study is based on the research works in philosophy (bioethics), social science (surveys, questionnaires) and humanities. It makes the study interdisciplinary. Analyzing practices of gamete donation and their social impact, the authors try to define ethical challenges to the contemporary world caused by biotechnologies that involve gamete donation.

THE IMPACT OF GAMETE DONATION ON FAMILIES AND FAMILY RELATIONS

Since the invention of biotechnologies they have been used in order to achieve goals of negative eugenics (to limit births of disabled people). This is easy to perform due to prenatal genetic diagnosis (PGD) [1]. Eugenic ideas are very ancient and have their roots in antiquity [2. P. 6—28]. There have always been two types of eugenics — positive and negative. The aim of negative eugenics is an enhancement of the existed norm, creating of more clever, strong and healthy individuals. Nowadays biotechnologies are applied in the purposes of negative eugenics, but it is possible that soon they will be applied in order to enhance our future children.

Today assisted reproductive technologies (ART) have already been used in order to influence on the appearance and health of future generation. Gamete donation and in-vitro fertilization provide methods of donor selecting on the criteria of eyes colour, age, profession and etc.

The practice of infertility treatment and family planning due to ART caused new forms of family relations, many moral dilemmas all over the world. The first problem is the problem of future children's health risks. In the framework of traditional family quite limited number of children can be born. Now a male donor can be a father of hundreds of children. In this case genetic disease may be spread on a big number of the donor's descendants. For instance, in the USA a donor had a heart disease and his

gametes were used by 13 families. As the result 21 children were born and 8 of them inherited his genetic disease, 2 of these 8 children died [3]. Another example shows that a man with psychiatric disorder may be a donor. He became a genetic father to 43 children, 5 of them inherited his disease [3]. Gamete donation is quite new practice and national law regulation often lacks control on these practices or the laws are not developed enough. Moreover, there are no any international laws (like in the field of trials involving humans) regulating gamete donation. These circumstances provide great potential to make money by gamete donation and / or to become a genetic father of large number of children if a person aims it.

Another moral dilemma is donor's participation in family relations and childcare. This question is closely relative to the problem of informing the child about his/her birth. On the one hand a child has "right to know", but at the same time s/he has "right not to know". Parents usually make decision about informing their child, but there is no an algorithm what to do if the donor also wants to take part in childcare or communicate with the child.

The research conducted in Sweden aimed to study gamete donors' attitudes toward contacts with the offsprings. 57% of responders were positive about the contacts, 29% were against and 14% were neutral or did not have an opinion [4]. Total number of responders of both genders was 210. Two women noted that they would like to be prepared for the first meeting with the child before the child would contact them. These attitudes show that the donors would be glad to be a friend to the children or even become a part of the family. In this situation interests of donor's, child's and parents' can contradict to each other, cause conflicts and even judicial proceedings.

It is worth mentioning that nowadays disclosure the information to children about their birth and gamete donation has become a trend. This trend contribute to the slow transformation of traditional family. The research, conducted in the French medical centre, showed that among 105 families (138 children), 40 couples (38%) informed children about the donation and 37 of them (93%) had made the decision before the IVF procedure. Among 65 couples (62%) that did not tell the truth to their children, 42 couples (65%) were going to do it in future, and only 20 couples (31%) were going to keep the secret [5]. This trend may harm traditional family values, but at the same time new family values and gamete donors' participation in child-rearing may benefit families.

IVF and gamete donation in the era of social nets can create another interesting phenomenon — co-parenting. Co-parenting is a parenting when two or more people participate in child's birth (or even concept of child — determine gender and genetic parents) and child-rearing with or without creating a family. People can search for gamete donor or would like to become a voluntary gamete donor without child-rearing after his/her birth. Future parents may negotiate about their participation in child-rearing, for instance, prefer only financial support of a child; some are ready to become only gamete donor or a surrogate mother. There are special social nets for people interested in co-parenting: <https://www.coparents.com/>. People fill the form, write about themselves and their aims and the status, for example: "I am searching for a (white/black) donor", "I would like to be a donor". Today we can watch reports on youtube.com about meetings of siblings of particular donors or a party of mothers having children of one

donor [6, 7]. The number of these strange families is growing. Parents' rights and obligations in these families are not clear, family relations are becoming weaker and sometimes look like friendship. Due to IVF and gamete donation genetic siblings, children of one donor, usually are strangers, not relatives, and quite rare family relations of traditional siblings can be found between them. Therefore, in the case of gamete donation family may have not strong boundaries, this is family-quest, and finding relatives is an adventure or a trip in this game. A person is becoming more independent from family obligations and his/her parents and relatives, at the same time this person may become lonely in a huge and indifferent to him/her world.

Another dilemma of a family, caused by IVF and gamete donation becomes incest, intentional or unintentional. There is a probability of meeting children of one donor and start a family without knowing about their kinship. The prohibition of anonymous gamete donation will help to solve a problem of unintentional incest. But this measure violates donors' rights that would like to remain anonymous. The answer may be pen portrait and some other information about the donor. It will be able to save anonymity of donors and predict incest probability. However, establishing this policy worldwide is very difficult today and seems impossible.

Moreover, medical practice has cases when women search for clinic that will allow them to bear children with their brothers due to IVF procedure [8]. Some couples of this kind are ready to deceive medical staff in order to archive their goals. For instance, a French woman gave birth to a baby in her 62 and the father was her brother [8. P. 13]. Fertility treatment was prohibited in France and the siblings moved to the USA where they deceived a physician saying that they had been married.

GAMETE DONATION IN THE CONTEXT OF COMMODIFICATION PRACTICES

Another issue that needs ethical analysis is the usage of biotechnologies close to assisted reproductive technologies, but aiming not childbearing. For example, gamete donation may aim not only creating embryos for childbearing, but using them in research purposes, that often make huge financial profit.

Consider the practice of therapeutic cloning that is defined as the usage of cloning methods in order to create embryonic stem cells in research and, potentially, therapeutic purposes [8]. The characteristic "therapeutic" is still euphemism, alleviating emotional reaction on this type of cloning and moral reaction on destroying embryos, morally dubious practice. The authors of the brochure by UNESCO devoted to cloning have paid attention to this aspect. They offer another term in order to moderate the meaning: "Since the notion "therapeutic" suggests possible beneficial applications of cloning, which at the present time seem completely unjustified, it is more appropriate to change this positive connotation and use a more neutral wording, viz. research cloning" [9. P.12].

Practice of therapeutic cloning is related to obtaining human eggs that are necessary for the cloning process. It causes a set of ethical problems: "If hundreds of unfertilized eggs prove necessary to produce one human clone embryo, as in animal cloning, how will those eggs be provided? Obtaining eggs from a woman's body is invasive, and some have expressed concern that it could lead to exploitation of women and commercialization of human eggs" [9. P.13].

Market aspects of “therapeutic” cloning as other biotechnologies including the usage of human eggs for IVF are related to the need of defining significant commodities of not only market, but altruistic exchange. Already mentioned euphemism also neutralize knowledge of commercial component of “therapeutic” cloning, making it look like altruistic act. For instance, selling eggs for IVF purposes is conducted in the framework of donation context and such notions as “material reward” is called “material compensation”.

E.S. Berdysheva notes in her review devoted to analysis of European concepts of commodification “Individuals may mask market aspects of the deal such a way that financial benefit might be inferred from the “participation”. Market exchange of crucial commodities may be framing by the participants as non-market. In practice many exchange cases formally regarding as market are located somewhere between bargaining and altruism [10. P. 77].

Body commodification, its parts and substances is the important trend of the last decades, causing many ethical and law dilemmas. In 1992 Commodification of human body made J. Hogshire conduct research and evaluate commercial value of such body “assets” as blood, urine, milk, eggs, sperm and others. He wrote a tutorial about selling yourself to science. Calculating the profit from “selling body” Hogshire figured out that it was possible to receive 100 \$ per day, meal and accommodation by being a guinea pig [11].

Body commodification is accompanied by attempts of regulatory practice’s analysis. Without this practice manipulation with body as commodity would not be possible. Michele Goodwin in his book “Black Markets: The Supply and Demand of Body Parts” raises a problem of a fake altruism [12]. He notes that existing practice of body commodification is based on the assumption, that only donors of organs and tissues should be altruistic donors, but biotechnological companies are allowed to gain huge profit.

So, extracting human eggs for research purposes is an invasive procedure, harming woman’s health, but the information about health risks often is not reflected in the blank of informed consent. Biotechnological companies, using human eggs in their business, appeal to altruistic feelings of women, and do not provide compensation of health risks adequately (or the compensation is small). Practice of reproductive tourism is spreading and includes the search for egg donors in developing countries.

Often donors of eggs are poor and socially unprotected women of reproductive age, that put their health at risk in order to gain minimal profit, and use it to support their own families. The side effects of egg donation may be harmful to reproductive health of a donor (as the result of changing hormone background in organism caused by ovarian hyperstimulation syndrome). The donation act may cause infertility and become the reason of destroying the donor’s own family or an objection to build the family in future [13].

Ontological background of body commodification, its parts, cells and substances was laid in liberalization of attitudes toward body as an instrument or property, object of manipulation in the Modern Age. The image of man of the Modern Age is the image of subject of economic activity, actualizing in this activity. In the framework of new European liberal paradigm human dignity means ownership of properties, located in his

own personality. The first and fundamental property is our own body, reflected in labour and its results. Contemporary subject in the framework of our theme goes the same way. He does not only actualize himself, but reproduces himself, clones his own body (his cells and substances). His labour is in the support of his health and self-preservation, result of his labour is his derivative from his body, that becomes an artifact or commodity due to the subject's will. Consistent and non-limited liberalism, establishing body as an individual value, gives opportunity to make an instrument from a body by different ways, including discounting it and gaining profit from it.

Body is considering as the background of personality, is recognized as an aspect of freedom. The choice between inalienability of body (therefore, impossibility of its usage in commercial purposes) and right to manipulate with body is based on dichotomy of subjects and objects, the world of things and the world of humans.

It is worth noting that this dichotomy, typical for Western mentality, is breached quite easy by non-Western cultures, where a thing may be considered as extension of human, body may be socialized and adopts characteristics of governmental property. But in the context of Western and non-Western cultures body, located in non-sacral space of rational economic activity, is losing its status of inalienable good. It is not important in the framework of this consideration who will alienate or objectify body — a state or a person herself, body will lose characteristics of inalienable value anyway.

France is one of the countries that prohibit egg donation because of the donors' health risks and strict engagement of exploitation of women-donors. As M. Goodwin notes in his "Black Markets: The Supply and Demand of Body Parts" the term "exploitation" is used in debates unashamedly and without emotions. On Goodwin's opinion it is more likely blind and reckless discourse, related to the notion of choice. He means pathetic argumentation using terms "autonomy" and "choice" in the cases when they are needed to mask amoral practice or commercial profit of a deal. For instance, when a woman sells her eggs, it says that it is her choice (in the case of selling eggs for IVF it is called reproductive choice), and it is silent on the circumstances this choice is made: predominantly low-income and bad informed women that have not been provided all the information about health risks of the egg donation, undergo the procedure.

The research conducted in the UK has shown that women taking part in the programme "share egg" (egg-exchange) refuse exploitation terms, but, at the same time, they talk about themselves as about desperate [14. P. 31]. According to the programme eggs are used for IVF purposes [15]. Considering this issue it is worth mentioning the case of convergence of two practices: egg donation for IVF and for research purposes. In the UK a method of double-reducing costs was presented in 2006. If a woman was ready to share her eggs for research purposes for dubious cloning practice, IVF cycle would cost her half-price [16]. The scientists argue that the method would give opportunity to decrease the deficit of eggs. The development of promising scientific research of stem cells was suffering from the deficit. Ethical services opposed the method. They evaluated the method as egg selling and low-income and unprotected women would take part in the programme. This is the interesting mix of values caused by implementation of egg selling in order to develop research cloning. The parties interested in promotion of the practice maintained that women were not pressed to participate in the programme by violence or financial stimulation. From the other hand

it was noted that implementation of the practice is the neglect of the public opinion in order to develop IVF industry. Ethical professional also mentioned that infertile women were especially vulnerable.

CONCLUSION

Mosaic picture of moral argumentation that have been caused by gamete donation practice has shown that intensive technological development not only provide Mankind with ethical problems, that can be solved here and now basing on previous experience of moral problem-solving.

Microcrisis of moral argumentation that have occurred in gamete donation practice and assisted reproductive technologies is the partial reflection of ethical macrocrisis that connected with the necessity of creating relevant moral norms in the field of biotechnology. In this context gamete donation and research cloning discussed above are the polygons of reflection on moral practices dealing with such ethical and anthropological issues as body commodification, autonomy, women's reproductive rights, reproductive justice and revision of old notions of family, parental rights and obligations. At the same time gamete donation practice gives opportunity to look behind screen of moral statements and recognize the risks of morally dubious practices that may appear in the nearest future.

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ЭТИЧЕСКИЕ ПРОБЛЕМЫ ДОНАЦИИ ГАМЕТ: КОММОДИФИКАЦИЯ ТЕЛА И ТРАНСФОРМАЦИЯ СЕМЕЙНЫХ ЦЕННОСТЕЙ

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Целью статьи является рассмотрение практики применения биотехнологий, включающих в себя донацию гамет человека (клонирование, вспомогательные репродуктивные технологии), и вызываемые ею эτικο-философские вопросы.

Исследование носит междисциплинарный характер и опирается на работы в области гуманитарных и медико-биологических наук.

В своей статье авторы приходят к выводу, что донация гамет порождает новые моральные дилеммы и заставляет переосмыслить привычные понятия семьи, родительских прав и обязанностей, родственных отношений. В то же время донация гамет способствует коммодификации тела и его частей, образует рынок биоматериалов, являющийся источником новых способов заработка. Коммодификация влечет за собой целый ряд этических вопросов, связанных с допустимостью использования и эксплуатации человеческого тела как ресурса. В статье описываются настоящие и вероятные будущие эτικο-философские вызовы, порождаемые практикой применения донации гамет, многие из которых выходят за пределы привычных моральных представлений.

Ключевые слова: донация гамет, коммодификация тела, биоэтика, репродуктивные технологии, моральная дилемма

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