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# THE OPENNESS OF MARRIED COUPLE TO LIFE: MODERN MEDICAL AND TECHNOLOGICAL POSSIBILITIES AND CHALLENGES — A THEOLOGICAL RESPONSE

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#### **Abstract**

This article addresses the issue of the fundamental openness of the married couple to procreation of new life and the methods through which the number of children in a family can be rightfully limited. Procreation and responsible parenthood are key themes in the first part. In the second part, the article discusses the medical technological possibilities and challenges in matters of fertility and infertility and offers an ethical response in the light of the teachings of the Catholic Church. Medical treatments that assist procreative act are morally acceptable and technological treatments that substitute for conjugal act are morally unacceptable. The article thus tries to distinguish the technologies and researches that promote and enhance human life from those that dehumanize making it a product or commodity.

#### 1. Introduction

New human beings must come into existence through procreation if the human species is to continue. Procreation is cooperation in God's creation. The normal way of procreation occurs when a man

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and a woman engage themselves in sexual act within marriage or outside of marriage through acts of adultery and fornication. Producing and designing babies is also possible today with the advancement of modern science in reproductive technologies. No matter how a new human being comes into existence — through marital act or acts of adultery and fornication or reproductive technologies — the new being is a person of inviolable right.

Marriage has been the cornerstone and ideal form of human society. The very definition of marriage is coupled with two ends of marriage, which are unitive, that is, bonding and procreative, that is, openness to life. These ends find the right and natural fulfilment only when a man and woman join together in marriage. Same sex unions and extra-marital acts cannot fulfil the ends of marriage rightfully. James Healy rightly says, "...that sexual intimacy finds its true home in marriage [between a man and a woman]: a public, faithful, exclusive commitment to each other, and an equally important lifetime commitment to the children who may be created from this marriage." Procreation is thus a part and parcel of a marriage where the rightful expression of intimate love can take place. This has been well expressed in *Donum vitae*:

The human person must be accepted in his parents' act of union and love; the generation of a child must therefore be the fruit of that mutual giving which is realized in the conjugal act wherein the spouses cooperate as servants and not as masters in the work of the Creator who is love.<sup>2</sup>

If intimate love and procreation are inseparable, then intimate love without openness to life even within marriage becomes ethically problematic, debatable and questionable.

### Part I: Openness of Married Couple to Life

# 2. Procreation and Responsible Parenthood

Without procreation any species would end up in self-extinction. God has ordained the creatures with procreative powers in nature. It is very much true in human species. In marriage the couple is open through the language of the body to the possibility of conceiving a child. However, the marital act does not mean that it should or will always result in the conception of a child. Humans are not mere

<sup>&</sup>lt;sup>1</sup>James Healy, Living Together and Christian Commitment, Rooted in Love, Washington: 1999, 3.

<sup>&</sup>lt;sup>2</sup>Congregation for the Doctrine of the Faith, "The Instruction *Donum Vitae* on Respect for Human Life in its Origin and on the Dignity of Procreation," *Acta Apostolic Sedis*80 (1988) 70-102. Here *Donum vitae*, II B 4, 7.

animals but are rational and moral beings to do what is right or not to do what is wrong. Thus, humans would not just go on procreating children. That would be an irresponsible way of begetting more children. Planning a family is a must for the society. We must therefore differentiate between a fundamental openness of the married couple to procreation and the possibilities and the means that the respective couple would have in order to bring up the children. The number of children would always depend on socioeconomic conditions in which the married couples live. This should be therefore left to the judgment of the married couples!

The Catholic Church, too, does not object to the discretion of the couple as to how many children the married couples should have, rather the Church herself advocates that married couples should make a responsible decision through efficient means to limit the number of children they are capable of raising and educating. While it is a matter of great concern to limit the number of children according to the physical, social, spiritual, economical and familial capacity of the family and society to bring up every child well without any discrimination, the question then immediately arises is how they should plan the family or limit the children or prevent pregnancies. This leads us to the controversial issue of contraception.

#### 3. Methods of Family Planning

# 3.1. Natural Family Planning

Only the natural family planning (NFP) is permitted according to the official position of the Catholic Church. Natural family planning respects the integrity of marital act being open to love and life. It is medically the safest, the healthiest and the best method to prevent pregnancies and plan the size of the family. There are medical treatments, such as, urine tests, calculators, computer programs, saliva tests which can help women determine their safe as well as fertile time. Married couples who want to avoid pregnancies to limit the number of children can abstain from marital act by knowing these safe and fertile times. It requires greater communication, mutual cooperation, parental responsibility and spiritual sacrifice. The practice of natural family planning increases the mutual respect for each other. It is as effective as those alternative artificial means of birth control. In addition, while natural family planning has side benefits, artificial means have damaging spiritual and physical sideeffects. Natural family planning strengthens the commitment for permanency of marriage and reduces the burden of family planning from the wife and shares it with the husband. Natural family planning has sometimes welcomed "surprised babies" as the couples would still be open to life.

#### 3.2. Contraceptive Method of Family Planning

John Paul II says that the contraceptives make the conjugal act as one in which the couples give themselves in love to one another but reservedly,<sup>3</sup> unlike in natural family planning. He says further that "contraception and abortion are often closely connected, as fruits of the same tree... and is being demonstrated in an alarming way by the development of chemical products, intrauterine devices and vaccines which, distributed with the same ease as contraceptives, really act as abortifacients in the very early stages of the development of the life of a new human being."<sup>4</sup>

Alicia Mosier, an editorial assistant of the journal *First Things*, emphasized that the issue of contraception does not centre on the "artificiality" of the means used to prevent conception but with the nature of contraception itself. She says, "What is wrong is the contraception itself: the deliberate will, the choice, to subvert the lifegiving order and meaning of the conjugal act." Contraception is a deliberate action that makes procreation impossible. Contraception only expresses the will that *any* baby might result from *the particular* sexual encounter not to be conceived. It manifests a will aimed directly against new life.6

Whether pills or devices, implants or sterilizations — all types of contraceptives are anti-life and involves deliberate acts. According to the official teaching of the Catholic Church, direct sterilization is not legitimate since it has the intention of contraception. Voluntary sterilization of a man or woman for the purpose of temporarily or permanently preventing conception is immoral; therapeutic sterilization which indirectly affects conception is morally acceptable.

# 3.3. A Reality Check

No doubt, abstinence is the best alternative to prevent conception. But the use of contraceptives even by Catholic married couples seems

<sup>&</sup>lt;sup>3</sup>John Paul II, Apostolic Exhortation *Familiaris consortio* (The Role of the Christian Family in the Modern World), no. 32.

<sup>&</sup>lt;sup>4</sup>Familiaris consortio, no. 13.

<sup>&</sup>lt;sup>5</sup>Quoted in William E. May, *Catholic Bioethics and the Gift of Human Life*, Hungtington, Indiana: Our Sunday Visitor Publishing Division, 2008, 2<sup>nd</sup> ed., 129. Alicia Mosier "Contraception: A Symposium," *First Things* 88 (December, 1998) 26.

<sup>&</sup>lt;sup>6</sup>Alicia Mosier "Contraception: A Symposium," 26.

to be common in our society at least for reasons to avoid having more children. Sometimes even the faithful couples find it extremely difficult to adhere to the norms of the Church when faced with serious medical problems after one or two pregnancies. When a pregnancy itself becomes a threat to the life of the woman, can abstinence be considered a permanent solution for married couples? Would abstinence injure unitive aspect of marriage or cause other moral problems, such as, extramarital relationships?

Even many so-called "good Catholic couples" all over the world and in our own country seem not to observe the teachings of Humanae Vitae. Many are not aware of the document in the first place. A few know it only to an extent of knowing that this document says, "NO PILLS". To a great extent, it has been the failure of the clerical community that has not communicated to its faithful what the official documents exactly say. Some moral theologians consider the distinction between "natural" and "artificial" methods contraception irrelevant in an intentionalist paradigm of ethics. Can the questions regarding birth control and responsible parenthood be resolved in a dialogue with the partners, and if necessary, in consultation with a medical expert?

Pope Francis reminds us of a teaching by Saint Thomas Aguinas who taught that the Church's moral teaching has its own "hierarchy" in the virtues and in the acts which proceed from them.7 Thomas Aguinas explains: "Mercy is the greatest of all the virtues, since all the others revolve around it and, more than this, it makes up for their deficiencies. This is the particular to the superior virtue, and as such it is proper to God to have mercy, through which his omnipotence is manifested to the greatest degree."8 Vulnerable humans who may use contraceptives, the divorced and remarried are looking forward to compassion, mercy and inclusion in the Church rather than condemnation and exclusion.

The maxim, that the theory must indeed be true and the practice is not so important, may not be a good norm, because at once the question arises, if the gap between theory and lived-reality is too big, is the theory really realistic? Then the Church would have a problem of credibility in her teaching! The Church and the Magisterium cannot be indifferent, when a large number of their believers do not

<sup>&</sup>lt;sup>7</sup>Pope Francis, Apostolic Exhortation Evangelii Gaudium - The Joy of the Gospel, Trivandrum: CIPH, No. 242, 2013, 35. Cf. S. Th., I-II, q. 66, a. 4-6.

<sup>&</sup>lt;sup>8</sup>Evangelii Gaudium, 36. Cf. S. Th. II-II, q. 30, a. 4.

follow the matters of sexual morality any longer. There is something to be thought about seriously. Pope Francis has rightly opened the door for discussion in the upcoming Synods on Family.

### Part II: Modern Medical and Technological Challenges

# 4. Infertility and Reproductive Technologies

Infertility is not a curse; it only indicates that a couple is not able to conceive a child either because of medical illnesses or reasons unknown to human mind. When infertility is caused by medical conditions of husband or wife, there are different medical treatments. Within a marriage, a homologous assisted insemination has been accepted by the Catholic Church because it does not injure the unitive and procreative act of marriage. Reproductive technologies challenge the very understanding of Catholic marriage itself. According to the Church, each and every act of sexual intercourse must contain or reflect two core meanings: (i) two-in-one-flesh intimacy (the unitive meaning) and (ii) openness to the possibility of conceiving new life (the procreative meaning). Rejecting technologies that replace the act of conjugal love, the Catechism of the Catholic Church instructs:

A child is not something owed to one, but is a gift. The supreme gift of marriage is a human person. A child may not be considered a piece of property, an idea to which an alleged right to a child would lead. In this area, only the child possesses genuine rights: the right to be the fruit of the specific act of the conjugal love of his/her parents, and the right to be respected as a person from the moment of conception (#2378).

In homologous insemination, gathering sperm — most often through solitary sex of masturbation — and then injecting it into the woman with a syringe seems to interrupt the couple's intimacy. Similar thing happens with in vitro fertilization. When one surgically retrieves eggs from the woman, mixes them with semen in the lab and then injects them into the woman, the laboratory seems to supersede the couple in this act of conception.

Heterologous insemination procedures are even less morally acceptable since it involves donors (AID = Artificial Insemination by Donor) and at times surrogate mothers. In some sense, the actual couple is no longer procreating their own offspring. Medical science does it for them, with or without biological contribution, certainly not requiring their two-in-one-flesh lovemaking at all.

The Catholic Church officially holds that conception is morally right only when it is the result of the marital act between the married

partners. The CDF's Instruction Dignitas personae explains it very clearly that "human procreation is a personal act of a husband and wife, which is not capable of substitution... The desire for a child cannot justify the "production" of offspring just as the desire not to have a child cannot justify the abandonment of a child once he or she has been conceived."9 Thus, to conceive a human life by any other means other than natural marital act whether procedures are homologous or heterologous is morally wrong. However, there is continuous reflection and in-depth discussions to find acceptable solutions to help the suffering infertile couples.

#### 5. Morally Permissible and Debated Fertility Technologies

There are ordinary medical treatments which are widely used as well as high-tech medical technologies, which married couples can easily avail themselves, which at the same time are debated in the Catholic Church with regard to the morality of using these medical treatments and technologies.

In addition to low-tech diagnostic examinations and medical treatments, such as, hormone treatments to stimulate ovulations; corrective surgeries to remove scar tissue or to reposition reproductive organs by women and wearing looser underwear; adopting healthier eating habits including exercise and rest by men, there are high-tech fertility treatments, such as,

those techniques of assisted conception that respect the unitive and procreative meanings of sexual intercourse and do not involve the destruction of human embryos or their deliberate generation in such numbers that it is clearly envisioned that all cannot implant and some are simply being used to maximize the chances of others implanting, may be used as therapies for fertility.10

There is a technique called SIFT (sperm intrafallopian tube transfer). Woman's ovaries are hyperstimulated under general anesthesia and "washed" or prepared concentrate of sperm are injected into the fallopian tubes so that conception can occur there. There are other medical technologies which are considered under this high-tech category: Gamete Intra-Fallopian Transfer (GIFT) and Tubal Ovum Transfer (TOT). They are ethically debated. In the GIFT

<sup>&</sup>lt;sup>9</sup>Congregation for the Doctrine of Faith (CDF), "Instruction Dignitas Personae on Certain Bioethical Questions, " Zenit (December 12, 2008) and Acta Apostolica Sedis 100 (2008) 858-887: No. 16.

<sup>&</sup>lt;sup>10</sup>U. S. Bishops Conference, Ethical and Religious Directives for Catholic Health-Care Services, Washington: 1994, n. 39.

procedure, sperm and ova are collected from the genital tracks after the normal intercourse including the use of perforated condom with openness to procreation. While disallowing morally illicit act of masturbation for semen retrieval, the official Catholic Church would allow surgical removal of sperm (needle injected into the testicle). These gametes, namely, sperm and ova, will be capacitated, that is, cleansed and chemically treated prior to transferring them through laparoscope into woman's fallopian tubes, where natural fertilization can take place. The success rate is about 28% and higher than that of IVF.

Tubal Ovum Transfer (TOT), also called Lower Tubal Ovum Transfer (LTOT) involves the retrieval of ova from the fallopian tubes and reinsertion into the uterus. Natural intercourse would follow thereafter facilitating easier access for the sperm to near the ovum. This was considered when scar tissue or blockage was diagnosed in the woman's fallopian tubes or when the sperm count was low or slow. This method has been relatively unsuccessful. Since 1985 this method has been modified with the insertion of both sperm and ovum into the uterus. The assistance is given only to the extent of transferring the sperm and ovum into the uterus to bypass female tubal blockage. Both GIFT and TOT facilitate the conjugal act to be successful in impregnation.

Some bishops and scholars, like Cincinnati's Archbishop Daniel E. Pilarcyzk and *Donum Vitae* committee members Bartholomew Kiely and Elio Sgreccio see GIFT and TOT as aids to natural intercourse and procreation. They hold these reproductive technologies to be morally permissible. However, moral theologians like Benedict Ashley, Kevin O'Rourke and Richard McCormick question the naturalness of retrieving gametes and reinserting them via needles and micropipettes. They do not believe that GIFT and TOT are substantially different from artificial insemination and IVF.<sup>11</sup>

Since the time of CDF's Instruction *Donum Vitae* on Respect for Human Life in Its Origin and on the Dignity of Procreation, in 1987, there are no official acceptance of GIFT and TOT, though Cardinal Joseph Ratzinger responded to the media then that physicians must "make a decision based on his or her informed conscience." In the absence of official pronouncements, physicians and infertile couples

<sup>&</sup>lt;sup>11</sup>See William E. May, *Catholic Bioethics and the Gift of Life*, 90-95; Richard C. Sparks, "Helping Childless Couples Conceive," St Anthony Messenger (April 1997). A*vailable at* http://www.americancatholic.org/ Messenger/Apr1997/feature1.asp.

are free to weigh the merits of these procedures in the light of existing moral principles making their own conscientious decisions in good faith. The Church would not oppose a treatment if it does not substitute the natural marital act.

#### 6. In-Vitro Fertilization Technology

Louise Brown, who was fertilized in vitro, was born in 1978. That marked a new history in reproductive technology and was heralded as a triumph is medicine and science. In vitro fertilization and embryo transfer (IVF-ET) was first carried out by obtaining a single egg (ovum), from Louise Brown's mother whose fallopian tubes had been surgically removed, through a laparoscopy. 12 The single egg was fertilized by her husband's sperm in vitro, and the resulting embryo was then transferred to her womb (uterus) two days after the fertilization.

Today a nuanced standard practice of retrieving ova is through ultrasound-guided transvaginal aspiration and not by laparoscopy which requires general anaesthesia. Prior to the retrieval of ova (Oocytes), the ovaries are (over)stimulated with ovulatory drugs such as Clomid, Pergonal and Metrodin to produce several oocytes. Today the clinics fertilize more embryos than one by mixing the sperm and ova in the petri dish that have been "washed" and "capacitated" making them more apt to fertilize. Fertility specialists transfer two to four embryos to the womb to increase the probability of implantation of at least one. It is possible that all of them get implanted causing multiple pregnancies. Embryos which are not implanted are frozen in cryopreservation either for future transplantations or donations or research.

IVF-ET process has also undergone changes and combinations of generating human life through new technologies are made possible: ZIFT (zygote intrafallopian tube transfer) facilitates the transfer of the zygote (embryo) produced in IVF into the fallopian tube rather than having it transferred into the womb; PROST (pro-nuclear tubal transfer) transfers the very early embryo into the fallopian tube by use of a laparoscope. Many infertile couples avail IVF technology with great frequency. IVF clinics are many in India. Catholic couples

<sup>&</sup>lt;sup>12</sup>It is a procedure which requires general anesthesia and through which the physician aspirates the woman's egg through hallow needle inserted into the abdomen and guided by a narrow optical instrument called a laparoscope.

too make use of this technology. Within the Church, there are differing views regarding the morality of IVF.

### 6.1. Batting for IVF-ET?

When Cardinal Albino Luciani who was soon elected Pope was asked for a comment about the birth of IVF baby Louise Brown, he began congratulating the happy parents wishing the new baby and the family a healthy and blessed life. However, he tactfully added that it needed a more in-depth moral study. Many Catholic leaders have voiced that although IVF does harm to the marital union and to the couple themselves, the children conceived through IVF are precious in the sight of God even though the means through which they were conceived are immoral.

Some Catholics voice themselves in favour of IVF with subsequent Embryo Transfer. The argument goes like this: in the homologous system — that is, between the married couples — this method IVF-ET may be allowed as a medical treatment. IVF need not necessarily be seen as substituting the marital act. It could be considered a remedial assistance as in the case of assisted fertilization where normal marital act could take place. Definitely the immoral act of masturbation could be avoided. The only difference would be that the fertilization takes place outside womb. Supporters of this view believe that as long as science and technology are used to assist a loving, committed married couple to conceive their own biological or genetic child, this ought to be considered as medical help and not as unwarranted interference. This position needs further reflection in the Church.

In response to *Donum Vitae* in 1987 in a speech to student physicians at the University of Chicago Medical Center, Chicago's Cardinal Joseph L. Bernardin said,

I have heard the pain of loving couples, Catholic and non-Catholic, who desperately want the gift of a child. My heart reaches out to them. Theirs is a difficult burden, and I share their pain. We must offer them love, support and understanding. And in the end, after careful and conscientious reflection on this teaching, they must make their own decision.<sup>13</sup>

<sup>13</sup>See Kevin Klose, "Infertile Couples Must Make Own Decision, Cardinal Says," Washington Post (May 02, 1987). Available at http://articles.latimes.com/1987-05-02/local/me-3224\_1\_infertile-couples.

Thus, the discussion of the moral rightness or wrongness of modern reproductive technology must start there, with the very real, often painful situation of the married couple who have difficulty in conceiving.14

It is often the case that those who seek help for their infertility are good couples who desire blessing and privilege of parenthood very much. Empathy, compassion and gentleness are called for from every corner. It is within this context of compassion that Jesus showed to the adulteress woman that we need to look at these couples, fertility therapies and more issues related to them. Not all technologies are objected by the Church. Fertility treatments that do not interfere with or substitute for conjugal lovemaking are accepted. Richard Sparks makes a plea, namely, why don't we consider case-by-case to use the more invasive and sophisticated technological options.<sup>15</sup> Each situation is different and unique and deserves our attention and respect. Compassion for the suffering couple should also accompany a careful moral discernment about the use of modern reproductive technologies.

George Lobo gave importance to the personal values to the couples than focusing on the artificial method. Although IVF via AIH (Artificial Insemination by Husband) looks to be an attack on the typical experience of marriage, making it into a 'biological laboratory', it seems a couple eagerly desiring a child and sincerely finding the procedures of assisted insemination unsatisfactory would not be doing wrong by having recourse to AIH. IVF-ET in the case of AIH would be a lesser evil, if the emphasis is put more on personal values than the mere physical structure of the act, and when it is performed as a last resort to fulfil the desire of the couple who suffer too great a strain from childlessness.16

My serious problem lies not in IVF technology in itself, but in the grave repercussions it has. The infertile couples have not been effective in restricting the number of production of embryos by the IVF clinics that normally produce more than just required for implantation/reproduction for reasons of economy and strenuous

<sup>&</sup>lt;sup>14</sup>Cf. Richard C. Sparks, "Helping Childless Couples Conceive," St Anthony Messenger (April 1997). Available at ttp://www.americancatholic.org/ Messenger/Apr1997/feature1.asp

<sup>&</sup>lt;sup>15</sup>Richard C. Sparks, "Helping Childless Couples Conceive."

<sup>&</sup>lt;sup>16</sup>See George Lobo, Current Problems in Medical Ethics, Allahabad: St Paul Publications, 1974, 152.

process involved. While IVF has not solved the problem of infertility since its success rate is very low at about 18%, it has on the contrary brought other moral problems with regard to the surplus embryos. Pope John Paul II thus rightly made an,

appeal to the conscience of the world's scientific authorities and in particular to doctors, that the production of human embryos be halted, taking into account that there seems to be no morally licit solution regarding the human destiny of the thousands and thousands of 'frozen' embryos which are and remain the subjects of essential rights and should therefore be protected by law as human persons.<sup>17</sup>

### 6.2. IVF Surplus Embryos and Stem Cell Research

Stem cell scientists want to use IVF surplus embryos for high ranking research for any way they are going to die. The new term pre-embryo¹³ sprang up in the mid-eighties of the 20th century. Literally it indicates that a creature that precedes the embryo itself is not an embryo. Many argued that pre-embryos are not individuals until the implantation into the uterus or until the primitive streak takes place, and thus it would be ethically permissible to use the IVF surplus embryos up to this stage for research purposes. Using human embryos for obtaining embryonic stem cells for research began in 1998.¹¹ The key problem of using embryos in stem cell research lies in the destruction of embryos in the process. While extracting inner mass cell from the embryo at the blastocyst stage, the embryos dies. In other words, in embryonic stem cell research, embryos are killed. This leads us to the serious question about the moral status of the embryos. Are these embryos biomaterials or humans?²⁰ Embryos,

<sup>&</sup>lt;sup>17</sup>John Paul II, "Address to the Participants in the Symposium on "Evangelium vitae and Law" and the Eleventh International Colloquium on Roman and Canon Law (24 May 1996)," AAS 88 (1996) 943-944.

<sup>&</sup>lt;sup>18</sup>Günter Rager, *Die Person: Wege zu ihrem Verständnis*, Studien zur theologischen Ethik 115 (Fribourg i. Ue: Academic Press Fribourg/Freiburg i. Br.: Verlag Herder, 2006) 197. Edmund D. Pellegrino, a famous Catholic physician and theologian at the Georgetown University Medical Center questioned the use of the term calling it an illusory category of convenience, which does not have any corresponding reality in nature. See his article, "The Pre-Embryo: An Illusory Category of Convenience," *Pediatrics in Review* 20 (1999) 32-34. The term "pre-embryo" was originally invented by Clifford Grobstein in 1979 and endorsed by the Ethics Committee of Fertility and Sterility (of America) in 1986, of which Grobstein was a member.

<sup>&</sup>lt;sup>19</sup>See James. A. Thomson, Joseph Itskovitz-Eldor, Sander S. Shapiro, et. al., "Embryonic Stem Cell Lines Derived from Human Blastocysts," *Science* 282/5391 (6 Nov 1998) 1145-47.

<sup>&</sup>lt;sup>20</sup>J. Charles Davis, *The Ethics of Human Embryonic Stem Cell Research: Proposals for a Legal Framework for India*, New Delhi: Atlantic Publishers and Distributors P. Ltd.

whatever way they are brought into existence, are humans from the moment of conception and have the same moral status and right to protection like adult humans. Humans grow as humans from instant of conception and not unto humans during the biological development. Embryos are humans and not biomaterials. Can one human life be sacrificed in order to save another? The embryonic stem cell research calls for serious attention on the morality of IVF technology itself once again, for IVF poses ethical problems not only before and during but also after the use of the technique.

Eberhard Schockenhoff says that IVF surplus embryos are innocent creatures. Non-implantation has already deprived them of opportunities for development. This itself is a moral wrong. This persisting injustice cannot serve to justify further harm. Absence of need for implantation does not reduce embryos into objects.<sup>21</sup> We do not accept any experiment on dying patients either, because they (we) are going to die anyway. There are also other challenging guestions: who would have the ownership if the couple dies? or should there be a divorce? The question of extra embryos is a significant moral issue. The cause of an American couple who died in a plane crash leaving two frozen embryos behind in Australia brought this potential problem into public attention.

#### 6.3. The Official Catholic Position

The Instruction Donum Vitae asserts that IVF will injure the inseparable bond between the "union of couples and the procreation of offspring." IVF makes the offspring a product of technology against the gift of God through natural marital act, but it raises a number of other serious problems as well. Many Catholics are not aware that IVF is highly an immoral procedure that should be avoided according to the Church. John M. Haas lists at least four reasons why Catholics should understand IVF to be wrong:22

1. First, it goes against God's plan for the way children are to born into the world. They are to be conceived exclusively through the

<sup>2014.</sup> For a precise discussion, see my article on "Embryos: Humans or Biomaterials? Ethics and Law," in the forthcoming book New Horizons in Christian Ethics edited by Clement Campos and Scaria Kanniyakonil, Bangalore: ATC Publications, 2014.

<sup>&</sup>lt;sup>21</sup>E. Schockenhoff, Ethik des Lebens: Grundlagen und neue Herausforderungen, Freiburg i. Br./Basel/Wien: Herder, 2009, 455.

<sup>&</sup>lt;sup>22</sup>John M. Haas, "Preaching Points on In Vitro Fertilization," Ethics and Medics 32, 9 (September 2007) 5-6.

marital love of husband and wife, whereas in IVF technicians rather than the couple fertilize the ovum and sperm in a glass in a laboratory.

- 2. Second, some embryos are almost always killed in this procedure, since doctors choose only the healthy embryos to place in the womb. Some are frozen in liquid nitrogen for future implantation or experimentation.
- 3. Third, more than one embryo is normally placed in the uterus with the hope of at least one implanting and eventually to be born. Possibilities are there to kill the extra embryos in the womb.
- 4. Fourth, IVF treats children as though they were commodities or biomaterials. IVF also leads to genetic engineering, "designer babies" and "leftover" embryos to serve as materials for stem cell research.

IVF involves often the creation of extra embryos, most destined for long-term limbo status in the frozen laboratories with the fate of natural death or for potential use for stem cell research, embryo experimentation or embryo donation. The success rate of IVF assisted pregnancies is 13 to 18% for the first time and diminishes during the successive attempts. One should not forget that the cloning of the sheep Dolly was a success only after 277 failures. The human image (Das Menschenbild) gets into danger if humans are reduced to biological things.<sup>23</sup> Therapeutic cloning is much more instrumentalizing than the use of surplus embryos, because it creates (research) embryos with the specific aim of destroying them.

Embryos cannot be treated as a mere commodity. Embryos are humans and persons created in the image and likeness of God. The dignity/sanctity of human beings is founded on God who is inviolable. Thus as John Paul II says, "the inviolability of the person which is the reflection of the absolute inviolability of God, finds its primary and fundamental expression in the inviolability of human life."<sup>24</sup>

#### 7. Conclusion

Technological uses in (re-)production of humans do not sound good to the ears, since human life is to be seen a gift of God as such.

<sup>&</sup>lt;sup>23</sup>Josef Schuster, "Genetechnik und Ethik," http://www.sankt-georgen.de/leseraum/schuster4.html, 1-4. Cited in J. Charles Davis, "Exploring the Boundaries of Bodiliness: A Theological Challenge to Transhuman Advances," JPJRS 14/2 (2011) 131-148, 140f.

<sup>&</sup>lt;sup>24</sup>John Paul II, Post-Synodal Apostolic Exhortation *Christifideles Laici* on the Vocation and Mission of the Lay Faithful in the Church and in the World, 1988, 38.

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The very term technology gives the impression of a product than a gift. Thus, we need much more reflection on the spiritual aspect of human life. Hannah's tears did not go in vain. God listened and answered her prayers and gave her not just one but six children. He never fails to hear the cry of his people. God intervenes and answers our prayers even today. But there are also times when God says, "No" to his children's requests. God may have other plans for such couples. There are millions of orphans crying for a home and for love. Could this not be an answer to barrenness? Adoption is a concrete expression of love of neighbour. One may not forget that a child is a gift of God and not a right of the couples.