American Society for Reproductive Medicine Addresses Preconception Gender Selection

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Principle VIII reads, “A physician shall, while caring for a patient, regard responsibility to the patient as a paramount.” Principle IX reads, “A physician shall support access to medical care for all people.”

Privacy was added to Principle IV’s list of patient rights. In Principle V, the words “maintain a commitment to medical education” were added to the list of physician duties. Under Principle VII, in addition to recognizing community activities, a physician should also recognize activities contributing to the “betterment of public health.”

The Preamble to the Revised Principles of Medical Ethics now emphasizes that “a physician must recognize responsibility to patients first and foremost…” The introduction stresses that the principles are standards of conduct, not laws, that “define the essentials of honorable behavior for the physician.”

For a copy of Principles of Medical Ethics or more information, see http://www.ama-assn.org/ama/pub/printcat/4256.htm.

*JAR

ESA URGES MORE PEER REVIEWED RESEARCH ON ENVIRONMENTAL EFFECTS OF GMOs

Genetically modified organisms (GMOs) may or may not pose undue threat to global ecological health. In light of the current paucity of conclusive data, the Ecological Society of America (ESA) adopted a statement in May 2001 urging the continued need for peer-reviewed research to address this concern.

“It’s important to recognize that some GMOs can possess genuinely new characteristics that may require much greater scrutiny, in terms of scientific research, than organisms produced by traditional techniques of plant and animal breeding,” says Diana Wall, ESA committee chair and Director of the Natural Resource Ecology Laboratory at Colorado State University. A copy of the statement can be obtained at http://esa.sdsc.edu/statement 0601.htm.

Specific points of interest include formal possibilities for potential risk associated with the release of genetically modified crops or insects into the natural environment. Potential negative effects include the unintentional creation of new or heartier pests, loss or alteration of natural genetic diversity, or detriment to “non-target” species. Specific fears include the potential for genetically modified salmon, for example, to out-compete native fish populations. In addition, viruses, genetically altered and released to control unwanted insect populations, may have unanticipated effects on other populations of insects, birds or soil organisms.

The society acknowledges the positive potential for GMOs “to play a role in sustainable agriculture, forestry, aquaculture, and bioremediation.” However, due to the novelty of GMOs in these instances, “both deliberate and inadvertent releases of GMOs into the environment could also have negative ecological impacts under certain circumstances.” ESA, therefore, recommends a cautious approach to the environmental release of GMOs. Long-term, scientifically based risk assessment will prove the safest remedy for environmental concerns associated with the release of genetically modified plants and animals.

*MD

AMERICAN SOCIETY FOR REPRODUCTIVE MEDICINE ADDRESSES PRECONCEPTION GENDER SELECTION

According to a May 2001 statement by the American Society for Reproductive Medicine (ASRM), preconception gender selection for nonmedical reasons should not be indiscriminately prohibited or condemned. The practice, ASRM argues, is unlikely to increase the risk to children, women, or society. The technique, unlike preimplantation or prenatal sex selection, does not destroy embryos or fetuses or intrude on a woman’s body. The ASRM statement provides an in-depth ethical analysis of preconception gender selection after describing selection techniques.

Although ASRM maintains that preconception sex selection would unlikely have any dire consequences for individuals or society as a whole, it cautions against the practice’s widespread use. Recognizing the significant ethical concerns related to preimplantation genetic diagnosis for sex selection, the Committee attempted to balance competing concerns for if and when safe and effective techniques become available.

In its arguments for preconception gender selection, of particular importance is reproductive liberty, or allowing couples discretion in reproductive matters. Supporters of this argument acknowledge that respect for personal liberty does not make the practice of preconception gender selection inherently good, but maintain that disagreement with a choice is not, independently, reason enough to prohibit it.

On the other hand, many worry that such techniques could serve to strengthen gender discrimination or cause psychological harm to sex-selected offspring due to unattainable parental expectations. On the societal level, some are concerned that preconception selection could lead to sex ratio imbalances or the commodification of offspring. ASRM claims that of the arguments against preconception gender selection, the most compelling is that of increased gender discrimination. However, ASRM contends that sex ratio imbalances are highly unlikely and that the technique could even bring the two genders into an improved balance due to gender preferences.

ASRM advises that the most appropriate use of preconception gender selection techniques would be to use them only to increase the gender variety of the individual family. However, it recommends that four conditions for parents be followed. Potential parents should be advised of the risk of failure in preconception gender selection techniques. They must affirm that they will fully accept children of the opposite gender if the technique fails. Additionally, parents must be counseled not to have unrealistic expectations about their children’s behavior due to their gender. Finally, they must be offered the opportunity to participate in research regarding the safety and efficacy of preconception selection. The full statement can be found in Fertility and Sterility, Volume 75, No.5, May 2001, 861-864)

*VG

ENDOCRINE SOCIETY APPROVES CODE OF ETHICS

In January, the Endocrine Society approved a code of ethics drafted by its Ethics Advisory Committee. In two sections, the Code outlines the responsibilities of the society as an organization and those of its members, while establishing official positions on controversial issues such as embryonic stem cell research.

The stated purpose of the Code is to identify the highest standards of professional behavior, to delineate expectations for the conduct of individual members, and to support adherence to those expectations through the issuing of sanctions for violations. The sanctions outlined in the Code include expulsion from the society and prohibition from publishing in any of the Society’s journals. However, Joan Zaro, (Societies continues on page 7)