# An Analysis of Embryo Adoption 

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As we begin this New Year, we are reminded through a Wall Street Journal article ${ }^{1}$ of all of the frozen embryonic lives who will most likely never get to experience the joy of celebrating a new year. There are approximately 1.5 million frozen human embryos in the U.S. alone, ${ }^{2}$ all because the reproductive technology industry continues to treat human lives as expendable commodities. One possible solution to rescue the overwhelming amount of frozen lives is embryo adoption, and there have been several public cases of embryo adoption recently, such as that of Timothy and Lydia Ridgeway, who were frozen for 30 years, ${ }^{3}$ and Molly Gibson, ${ }^{4}$ who was frozen for 27 years.

The concept of embryo adoption can be justified through specific Catholic Ethical and Religious Directives, such as defending the right to life and human dignity by allowing these children to be born, as well as the goal of healing, as embryo adoption saves these children from death. ${ }^{5}$ When analyzing embryo adoption through the Principle of Double Effect, which is attributed to St. Thomas Aquinas, the process seemingly fits every condition for the principle. First, embryo adoption saves embryonic human lives, so it is an act which is morally good, or morally neutral. The subsequent conditions, according

[^0]to "Catholic Arena," are that "the 'evil effects' of an artificially induced pregnancy can be 'tolerated' because saving life takes absolute priority: The good effect of saving a life is caused 'as directly as the bad' and the good effect of saving a life is 'proportionate to compensate' for the bad." ${ }^{1}$

It is important to thoroughly examine embryo adoption because, on the surface, it seems like a wonderful opportunity to respect life that was created through a morally illicit practice. However, upon further examination, the aforementioned justification of embryo adoption according to the Principle of Double Effect fails to take many aspects of the process into consideration. Through the embryo adoption process, society is, ironically, continuing a culture that doesn't respect human life, human dignity, the totality of human persons, or the sanctity of the marital act. In fact, in pursuing embryo adoption, one may indeed be participating in material cooperation in evil. ${ }^{7}$ As Catholic author and adoptive mother Emily Stimpson Chapman states of embryo adoption, "The more we researched the process...the more uncomfortable we became with it. This was primarily because it would require us working with doctors and clinics who are part of the IVF Industry. At one point, I was researching how the process worked and started looking over information on the website of the local hospital that provides that service. There, I noticed that on the same page where the clinic talked about embryo adoption, they also were offering to buy the eggs of healthy young women. To give those people money and credibility seemed like material cooperation ${ }^{8}$ in the evil they were committing. We also didn't want to encourage the continuation of their industry by creating a market for unwanted embryos." ${ }^{9}$

[^1]Philip Ridegway, Timothy and Lydia's adoptive father, stated that "It was God who ordained these children would be created 30 years ago, God who provided and sustained them in the freezer, God who allowed them to survive the thawing process and be implanted. We're trusting God that whatever he has planned for them is for his glory and our good." ${ }^{10}$ Rachel Ridgeway also shared with me that they "...couldn't be more humbled and amazed that in 30 years, God waited for [them] to be their parents." These quotes show the mindset of couples who go into the process while assuming that God will create good out of their free will decisions to create their own ideas of ideal from a non-ideal scenario. However, simply because God can create good out of non-ideal scenarios does not mean that he pre-ordained the non-ideal scenario.

## The Principle of Double Effect Analysis

Upon further examination of the Principle of Double Effect, ${ }^{11}$ the act of continuing the lives of those embryonic persons abandoned to the freezer is indeed a good, or at least morally neutral act. In this scenario, persons pursuing embryo adoption would be keeping in line with the ERD "...to respect the sacredness of every human life from the moment of conception until death." ${ }^{12}$ However, this act may not be good or morally neutral if a woman is simply pursuing embryo adoption because she wants the chance to carry a child herself as a last resort option, as the motivation is not on giving the child life, but rather, the desire to experience pregnancy. Secondly, according to Austriaco: "...the intention of the agent must be directed toward realizing the beneficial effect and avoiding the foreseen harmful effect of his actions." The intention of the agent is most often towards giving these children life and avoiding any negative consequences of the act, though, as will be analyzed, the harmful effects of these actions are vast. The final conditions of the Principle of Double Effect, that "...the beneficial effect must not come about as a result of the harmful effect," and that "...the beneficial effect must be equal to or greater than the foreseen harmful effects, ${ }^{" 13}$ are where the moral concerns with embryo adoption truly lie.

[^2]First, the beneficial effect of giving children life can indeed come about as the result of a harmful effect if couples who undergo IVF know that embryo adoption is an option and they haphazardly create an excess of embryos in the process upon learning that there is a "pro-life" solution for what to do with their excess children. This mindset is harmful because it is one of many acts which continues to feed an industry that, unfortunately, promotes the reality that the beneficial effects of embryo adoption are not equal to or greater than the foreseen harmful effects.

The Ridgeways adopted Timothy and Lydia through the National Embryo Donation Center, ${ }^{14}$ a Christian center upholding that life begins at conception, which works closely with Southeastern Fertility Center, a non-discard facility. ${ }^{15}$ While Southeastern Fertility Center is to be commended for refusing to create embryos in their facility using donor gametes, offer genetic testing, facilitate surrogacy, or freeze or discard any embryos, creating children in laboratories should be discouraged even if no children are thrown away, as manufacturing children in laboratories is an affront to human dignity. Even if fertility centers don't freeze embryos and require their couples to either transfer them or donate them, they are still complicit in the commodification of embryonic human beings that comes with the inherent trial-and-error of the transfer process.

## Preimplantation screenings

Simply because Southeastern Fertility Center takes a "non-discard" approach does not mean that this is not the case for thousands ${ }^{16}$ of other fertility clinics that participate in this multi-billion dollar practice. ${ }^{17}$ It is standard practice in fertility clinics to first perform preimplantation genetic screenings to not only determine the likelihood of implantation success, but also to screen for chromosomal abnormalities such as Down Syndrome, and inherited genetic anomalies such as cystic fibrosis and spinal muscular atrophy. Embryos are often chosen for transfer based on their likelihood of successful implantation in the

[^3]womb by a screening process that picks the "best" blastocysts to implant. After these blastocysts are screened, only the ones determined "genetically healthy and normal" are transferred with the hopes of implantation. The embryos not transferred are then frozen, destroyed, or used for scientific research. If it's decided for any reason that too many embryos have implanted, or the babies are deemed to be the wrong sex, or not developing as the parents desire, abortions may be performed until only the desired number and quality remain. ${ }^{18}$

## Success Rates

The success rate for implantation of created embryos is also not high, as only $7 \%$ of labcreated children will be born alive. ${ }^{19}$ Of the number of eggs retrieved per cycle, which is around 10 to 15 , about 70 to 80 percent will fertilize, and between one-third and one-half of these embryos will actually implant. ${ }^{20}$ Also, in 2012, it was reported that "more than 1.7 million embryos prepared with the aim of helping women become pregnant have been thrown away since records began 21 years ago. ${ }^{21}$

The average live birth rate among women aged 35-37 (using their own eggs) is $42.8 \%$. Women aged 38-40 have a live birth rate of $35.5 \%$. Further, after the first IVF cycle, less than $30 \%$ of women have a live birth, and there's a paltry $45 \%$ success rate after three full cycles of IVF. Two-thirds of patients will be successful after six or more cycles. How many little lives are being lost through the trial-and-error transfer process? ${ }^{22}$

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## Totality of healing

The ERDs also state that, "since a Catholic health care institution is a community of healing and compassion, the care offered is not limited to the treatment of a disease or bodily ailment but embraces the physical, psychological, social, and spiritual dimensions of the human person. The medical expertise offered through Catholic health care is combined with other forms of care to promote health and relieve human suffering. For this reason, Catholic health care extends to the spiritual nature of the person."23 At the start of the embryo transfer process for the transfer of adopted embryos, women are instructed to use birth control pills to suppress ovulation, as well as use estrogen and progesterone to prepare the uterine lining and increase the chances of successful implantation. ${ }^{24}$ However, birth control pills as well as synthetic hormones in general increase the risk of cancers ${ }^{25}$ and cardiovascular issues such as heart attack, stroke, and blood clots. ${ }^{26}$ The providing of medications that are accompanied with potentially fatal risks in order to treat a bodily ailment in a manner that is not necessary is not keeping with the directive to care for the totality of the person and promote health and relieve human suffering. Further, those pursuing the IVF process will often undergo preimplantation screenings on their embryos to avoid having children with disabilities, but, ironically, children born through in vitro fertilization are also at a higher risk for ailments such as cardiovascular disease, cancers, premature bone development, and intellectual disabilities. ${ }^{27}$ Those pursuing IVF are truly not focusing on the totality of health for these human beings nor the common good.

[^5]Another aspect of embryo adoption that does not take into consideration the "physical, psychological, social, and spiritual dimensions of the human person" ${ }^{28}$ is that these children will have to struggle with the same vague or nonexistent genetic identity issues ${ }^{29}$ and a variety of externalizing disorders ${ }^{30}$ that donor conceived and adopted children face. Over 80 percent of donor-conceived children ${ }^{31}$ desire to know the identity of their biological fathers and/or mothers, and donor children disproportionately struggle with questions about their identity, depression, delinquency, and substance abuse. ${ }^{32}$ Embryo adoption opens the door for children to experience genealogical bewilderment and feelings of rejection, as well as physical separation from biological siblings. These children are not brought into the world by an act of love between their parents, but were picked out of a freezer like a cold block of flounder product and know that they are the "excess" children that their biological parents did not want to transfer. Even with the best of intentions from the adoptive parents, what does being conceived in this manner do to one's dignity? To one's sense of identity?

## Marital union

Lastly, this way of adopting children is also a distortion, clearly, of the one-flesh marital union, with its prescribed way of procreation, as it separates the unitive and procreative nature of the marital act. In embryo adoption, the woman is literally carrying the one flesh of another marital union and raising that flesh as an extension of her own marital union, while at the same time, the child is primarily, in fact, not of her flesh at all. As stated in

28 "Ethical and Religious Directives for Catholic Health Care Services." United States Conference of Catholic Bishops. 2018. https://www.usccb.org/about/doctrine/ethical-and-religious-directives/upload/ethical-religious-directives-catholic-health-service-sixth-edition-2016-06.pdf.
${ }^{29}$ Rose, Joanna. n.d. "A Critical Analysis of Sperm Donation Practices: The Personal and Social Effects of Disrupting the Unity of Biological and Social Relatedness for the Offspring." https://eprints.qut.edu.au/32012/1/Joanna_Rose_Thesis.pdf.
${ }^{30}$ Keyes, Margaret A., Anu Sharma, Irene J. Elkins, William G. Iacono, and Matt McGue. 2008. "The Mental Health of US Adolescents Adopted in Infancy." Archives of Pediatrics \& Adolescent Medicine 162 (5): 419. https://doi.org/10.1001/archpedi.162.5.419.
${ }^{31}$ Mahlstedt, Patricia P., Kathleen LaBounty, and William Thomas Kennedy. 2010. "The Views of Adult Offspring of Sperm Donation: Essential Feedback for the Development of Ethical Guidelines within the Practice of Assisted Reproductive Technology in the United States." Fertility and Sterility 93 (7): 2236-46. https://doi.org/10.1016/j.fertnstert.2008.12.119.
32 "My Daddy's Name is Donor." Institute for American Values. 2010. https://fluxconsole.com/files/item/441/56197/My-Daddys-Name-is-Donor-FullStudy.pdf.
the ERDs, "The Church's commitment to human dignity inspires an abiding concern for the sanctity of human life from its very beginning, and with the dignity of marriage and of the marriage act by which human life is transmitted. The Church cannot approve medical practices that undermine the biological, psychological, and moral bonds on which the strength of marriage and the family depends...Reproductive technologies that substitute for the marriage act are not consistent with human dignity. Just as the marriage act is joined naturally to procreation, so procreation is joined naturally to the marriage act. ${ }^{" 33}$ Not only does embryo adoption enforce the idea in society that it is morally licit to separate the marital act from procreation, it creates a distorted view, and a scandal, of the marital act to the children conceived in this manner who may come to view the separation of the marital act from procreation as morally licit.

## Conclusion

The ERDs also state that "...Catholic health care services are called to respect the inherent dignity of every human being and to contribute to the common good. ${ }^{34}$ We are not contributing to the common good nor respecting human dignity while we are fueling an industry that continues to commodify embryonic human beings. Those of us who know life begins at fertilization want to give every forgotten and abandoned child a chance at life, but embryo adoption enables one to go out of one's way to contribute to a child's experiencing the pain of being abandoned, intentionally creates non-ideal situations for the child, and further supports an industry-the IVF industry-which centers around nothing more than commodifying children and causing the deaths of many of these children throughout the IVF process. In upholding the Principle of Double Effect's conditions: "...the beneficial effect must not come about as a result of the harmful effect," and "the beneficial effect must be equal to or greater than the foreseen harmful effects," ${ }^{35}$ and upholding the sanctity of human life, human dignity, the totality of human persons,

[^6]and the sanctity of the marital act, ${ }^{36}$ we should be striving towards the ideal, not going out of our way to create more non-ideal situations.

While it is indeed a noble thing to give those stuck in frozen limbo a chance at life, that impulse to good needs to be understood in the light that embryo freezing, regardless of what happens with the embryos later, always promotes the creation of more embryos. This concern is unrelated to any altruistic motives that embryo adopters may have while trying to do the best they can to respect human life and remedy an unethical situation. Regarding a path forward, for embryos currently in frozen limbo, the genetic parents of these human beings must take responsibility for the human lives they have created and transfer as many of their children as is safely possible to give them a chance at life. If parents refuse to transfer their children, then we must continue to give as many of these children a chance at life only after the IVF industry has been completely eradicated in order to stop the commodification of human beings and the creation of and freezing of excess embryos. Although some generous people are willing to sacrificially adopt frozen embryos, our society should not continue to meddle with and bypass natural procreation by creating parentless embryos in the first place. Embryo adoption is a generous response to a broken process, but ultimately that broken process needs to end.

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    ${ }^{4}$ Ertelt, Steven. 2020. "Baby Molly Sets World Record: Born 27 Years after She Was Frozen as an Embryo." LifeNews.com. November 30, 2020.
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