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Moral attitudes and beliefs among couples pursuing PGD for sex selection


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Abstract This article reports the results from a study of couples participating in a research protocol in which IVF/preimplantation genetic diagnosis (PGD) was available for non-medical sex selection. The study sought to characterize the moral attitudes and beliefs of couples actively pursuing IVF/PGD solely for purposes related to sex selection. Eighteen couples participated in ethnographic interviews from November 2005 to April 2006. These interviews explored couples' motivations for pursuing sex selection, moral beliefs and attitudes regarding sex selection and sources of moral ambivalence about the use of IVF/PGD for sex selection. Couples reported a combination of motivations for pursuing sex selection, including a desire to limit family size, concerns about parental age and financial concerns about multiple pregnancies. Many couples compared their decision to choices about abortion, maintaining that individuals have a right to make such decisions privately. Couples frequently expressed anxiety about telling their other children and family members about their plans to use IVF/PGD for sex selection. Few couples cited concerns about the physical or emotional burdens of IVF/PGD. The study's findings suggest that couples pursuing IVF/PGD for sex selection view this as an ethically complex decision and express considerable uncertainty about the ethical acceptability of this practice. 

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Introduction

The use of assisted reproduction treatment for non-medical sex selection has been the subject of much ethical and professional debate. Non-medical sex selection consists of any non-medically indicated use of treatment to select gametes or embryos for sex. This includes family balancing, the practice of choosing spermatozoa or embryos on the basis of sex to balance out the ratio of girls to boys in a family. The ethical permissibility of using sperm separation techniques for preconception sex selection have been debated elsewhere (Dahl, 2005; Robertson, 2001; Simpson and Carson, 1999). This paper is concerned with the combined use of IVF/preimplantation genetic diagnosis (PGD) to screen embryos for family balancing purposes by sex selection.

Proponents of IVF/PGD for sex selection have appealed to reproductive autonomy, privacy in reproductive decision making and the moral superiority of preimplantation selection over sex selective abortion (Dahl, 2007; Malpani et al., 2002; Merhi and Pal, 2008; Savulescu, 1999; Savulescu and Dahl, 2000). Opponents have argued that the use of assisted reproduction treatment to select embryos on the basis of sex reinforces existing sexism and expectations of conformity to stereotypical gender norms, presents undue physical burdens on women undergoing the procedures involved and is inconsistent with the ideal of parents having unconditional love for their children (Blyth et al., 2008; Herissone-Kelly, 2007; Levy, 2007; Seavilleklein and Sherwin, 2007). Several medical organizations have issued opinions stating that the creation and destruction of embryos to select for sex, or to enhance gender variety in the family, is an inappropriate way to allocate scarce medical resources and perpetuates gender bias (American College of Obstetricians and Gynecologists' Committee on Ethics, 2007; FIGO Committee for the Ethical Aspects of Human Reproduction and Women's Health, 2006; Human Fertilization and Embryology Authority, 2002; Robertson, 2002; The Ethics Committee of the American Society for Reproductive Medicine, 2004). Despite this professional opposition, the use of IVF/PGD to screen the sex of embryos for non-medical purposes appears to be increasing and in the USA in 2005 comprised up to 9% of IVF/PGD cycles (Baruch et al., 2008).

Although debates about the acceptability of using IVF/PGD for sex selection have appealed to a range of moral, political and religious values, these discussions have not included the perspectives of the users. This gap in current discussions about sex selection reflects the paucity of available empirical data on the motivations of individuals and couples who have used IVF/PGD to select embryos based on sex. Insight into how patients using IVF/PGD for sex selection conceptualize this practice can further elucidate ethical perspectives on sex selection, generate new normative claims about the acceptability of this use of IVF/PGD, and inform the development of ethical guidelines for clinical practice regarding sex selection.

The need to examine patient perspectives is pressing, particularly given that a recent survey estimated that PGD

is available at 75% of fertility clinics in the USA and is used in about 4–6% of IVF cases at those clinics, resulting in approximately 3000 IVF/PGD procedures conducted annually in the USA (Baruch et al., 2008). A review of research studies on IVF/PGD archived in the PubMed database suggests that existing studies of users' motivations have focused on individuals seeking IVF/PGD to screen embryos for heritable genetic conditions and aneuploidies (Franklin and Roberts, 2006; Kalfoglou et al., 2005; Katz et al., 2002; Lavery et al., 2002; McGowan, 2008). None of these studies have sought to describe individuals seeking IVF/PGD to screen embryos for non-medical reasons. Other researchers have prospectively assessed fertility patients' preferences for various sex-selection techniques, although participants in these studies were not actively pursuing sex selection in the context of their fertility treatment (Jain et al., 2005; Missmer and Jain, 2007). Finally, while studies have examined patients' use of assisted reproduction treatment for non-medical sex selection (Colls et al., 2009; Gleicher and Barad, 2007; Goossens et al., 2008), these studies have sought to quantify the extent to which patients desire to have either a girl or a boy and have not sought to more fully examine couples' motivations or concerns about the use of IVF/PGD for sex selection.

This article reports the results from a study of couples participating in a research protocol in which IVF/PGD was available for sex selection. As far as is known, this is the first study to examine the moral attitudes and beliefs of couples actively pursuing IVF/PGD solely for purposes related to sex selection. The couples participating in this study were among the earliest potential adopters of IVF/PGD for sex selection and provided a unique opportunity to examine the range of moral attitudes and beliefs held by couples seeking IVF/PGD for sex selection. The aims of the study were to: (i) describe the motivations of couples interested in using IVF/PGD for sex selection; (ii) characterize moral beliefs and attitudes among couples interested in using IVF/PGD for sex selection; and (iii) examine the extent to which couples interested in sex selection report feelings of moral ambivalence about the use of IVF/PGD for sex selection. Results from this study provide much needed empirical data for clinicians facing the difficult task of deciding whether, and in what manner, to offer patients the option of using IVF/PGD for sex selection.

Materials and methods

Clinical setting

Couples pursuing IVF/PGD for purposes related to sex selection were recruited through a research study at Baylor College of Medicine, a private medical school in Houston, Texas. The research study, entitled 'Family balancing through preimplantation genetic diagnosis: patient interest and motive', used conventional IVF techniques in combination with PGD to determine the sex of fertilized embryos prior to embryo transfer. Sex selection was offered to

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