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From the Editor's Desk

John P. Mullooly
The Ethics of Genetic Research and Therapy

When Gregor Mendel evolved the theory of genetic inheritance in 1895, little did he realize how far his investigations would go in the next 100 years. As we look back over this span of time, we are amazed at the scientific progress which has been made. With this scientific development come the unquestioned benefits to mankind of the developments. The ability to eliminate or modify certain diseases is already with us. The encouraging reports of curing cystic fibrosis are daily reported in the news. A host of other diseases are under active investigation and show signs of great progress.

However there is a dark side to this scientific progress and questions are being raised as to the wisdom of this scientific research. What are the ethical questions which should be answered as we progress in genetic research? Attempts are being made by various bodies to ask and to answer some of these questions.

In this issue of the Linacre Quarterly, a statement by Catholic physicians of Great Britain is being published which lays out the ethical parameters of genetic research. This report of approximately 1,000 physicians was submitted to Parliament and authored by the Duke of Norfolk. It is a clear exposition of the ethical position of Catholic physicians who value life and respect the dignity and sacredness of the human being.

Generally speaking, the report makes a distinction between somatic research and therapy in contrast to germ cell research and therapy. For the most part, somatic therapy deals with genetically inherited diseases in an
individual such as a child with cystic fibrosis. If genetic therapy leads to an ameliorate or cure of this condition in the individual, it is sound ethical practice to embark on such a course. This type of therapy is no different than any other medical therapeutic course such as an appendectomy for a patient suffering from appendicitis.

The authors of this report draw the line where germ cell therapy and research are discussed because of the various reservations about consent and abuses. To alter the genetic constitution of an egg or sperm prior to fertilization is seen as an abuse and violation of the rights of the potential person to be. One can see the abuses which can follow from germ cell research or therapy. In an article by George J. Annas, published in the Hastings Center Report, (July/August, 1989), entitled “Who’s Afraid of the Human Genome?” the author outlines some of the objections to this project. “The basic legal and ethical issues implicit in the human genome project are on the first level the same issues involved in the current genetic screening for various traits such as carrier status for sickle cell and Tay Sachs disease. Mapping and sequencing the basic genome could, of course, lead to screening an almost unimaginable scale — not only for certain diseases and traits, but also for tendencies toward certain diseases, such as cancer or manic depression. Where all genetic traits can be deciphered in a genetic code, we will enter a new realm — taking not simply a quantitative step, but a qualitative one . . . There will be issues of information control and privacy. Employers, insurance companies, the military and government, among others, will want to have access to the information contained in our genome.” Knowing our history, it is difficult to see how the individual’s privacy will be protected from abuse.

Annas goes on to warn about eugenics, the improvement of the human species either by weeding out the “undesirables” or by actually using genetic techniques to increase the number of desirable traits in the offspring.

A third level of concern, according to Annas, is the fact that powerful technologies do not just change what human beings can do, but can change the way we think about ourselves. “The ability to completely screen embryos could lead to a market in ‘high grade embryos’ that could be bought and sold. They could be gestated by contract to surrogate mothers and the resulting child delivered to the purchasers of the embryo. This could lead to not only putting a specific price on human characteristics but also viewing children as commodities that have no rights or interests of their own but that they exiar to further the interests of parents and future societies.”

The ethical position of our fellow British Catholic physicians is well founded and I am sure that we would agree with them in their reservations about germ cell research. This position is consonant with “Donum Vitae” and the magistrial teaching of the Church. As the current debate about genetic research continues, it will be helpful for us all to keep in mind the ethical distinction which our British colleagues have made. This distinction

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will help us all who are committed to the sacredness and dignity of human life to keep our balance in regard to genetic research, scientific progress and the ethical commitment we have as Christian physicians.

—John P. Mullooly, M.D.
Editor

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