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Letters to the Editor

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Letters to the Editor

(From the Desk of the President of the Catholic Medical Association, John D. Lane, M.D.)

My Dear Friends and Colleagues:

As I write this letter we've recently concluded our 72nd Annual Meeting and National Conference in Philadelphia, where more than 400 members and guests enjoyed three days together with outstanding speakers, powerful spirituality and warm camaraderie! Look for highlights of the meeting as well as a listing of your new CMA Officers and Regional Directors on our website, and watch for our winter newsletter for a full report on this important meeting.

Our Board of Directors also met in Philadelphia and implemented a number of important new initiatives, which will also be explained in more detail in the upcoming newsletter. For now, I want to share with you just a few of the highlights of the past year as we continue in a time of transition with the revitalization of the CMA.

- In 2003 alone, we've already enrolled more than 250 new members!
- More than a dozen new Guilds are in formation, and existing Guilds are hosting outstanding events! (Check our website calendar for more info!)
- CMA's new website made its debut in late August and the number of web visitors already far exceeds our expectations.
- Our new CMA Conference Sponsor & Advertising program yielded more than \$52,000 to help

offset conference costs — this is a CMA record!

- Our headquarters office is receiving more than 30 calls and e-mails per day, with a wide range of questions and requests for CMA help and materials. Example: Members of the public call almost daily seeking Catholic physicians in their area.
- CMA spokesmen have appeared on EWTN, and the Catholic press is beginning to cover us more frequently.
- Increasingly, like-minded groups are asking for CMA's collaboration: we've co-sponsored Diocesan conferences, joined in *Amicus* briefs, assisted with the Vatican's World Day of the Sick, and joined in speaking out forcefully in the Terri Schindler Schiavo case.
- Pro-life groups in Canada and England used our booklet, *Homosexuality & Hope*, in education campaigns for Members of Parliament, and our website bookstore has boosted sales of HH dramatically, with bulk orders the norm.
- Our Lansing, Michigan Guild has launched a CMA Radio Show, "Vital Signs," broadcast nationally.
- We issued a prototype newsletter, "STAT!" that we hope will become a regular feature.
- Plans are well underway for our 2004 conference, *The Vocation of Medicine in the Third Millennium*, to be held September 23-25, 2004 in Orlando, Florida — watch our website for updates!

As I assume the Presidency of the Catholic Medical Association, I am both honored and humbled to serve the Church, our brothers and sisters in Christ, and our beloved organization at this critical time in history. If we have any hope of changing the culture in the spirit of John Paul II to restore the dignity of life, faith and family in society today, then the CMA must expand its reach throughout the medical profession. Your board of directors shares in the firm conviction that the CMA can make a difference, and we have made **a decision to grow** at all levels of our organization. We urge you to take part in our **"LET'S GROW!"** campaign by recruiting at least one new member!

The decision to grow requires an investment of time and treasure, and with the increased activities described above, we feel the financial growing pains. But nonetheless, we cannot waiver. We must forge ahead, increase our funding and work together as a family and as a team to promote and defend Catholic teachings in the medical and bioethical arena, and indeed society at large. It is time for the CMA to have a place at the table!

You will soon receive your 2004 dues invoice; The new amounts reflect the critical need for revenue to fund our growth. The Board made this decision to increase the CMA dues only after arduous months of discussion and planning. I want to assure you that in the year ahead we will be also seeking new sources of revenue apart from member dues, including grants, as well as an encore of our Conference Sponsorship and Advertising program — however, it is important to realize that member

dues provide the backbone of CMA's operating costs.

Please note also that we have changed the timing of the dues billing to a calendar year for the convenience of all. In the past you have been billed in the summer and your payment straddled two half-year periods, so normally you would have been billed this past July, 2003. With the new system, your payment will cover your dues through the entire year 2004 ahead. If the new amount gives you "sticker shock," please take a moment to realize that you've enjoyed a six-month "grace period" — (essentially free membership) from July-December 2003.

In closing, I want to thank you in advance for your continued support, and ask for your prayers as I begin my new assignment as your President. As always, I invite you to contact me, or any of our Board members, with your advice and ideas! In these blessed seasons of Thanksgiving and Advent, Pat joins me in sending all best wishes from our family to yours.

**Sincerely in Christ the Redeemer,
John D. Lane, M.D.
President**

Frozen Embryos and Divorce

To the Editor:

When the "right to privacy" was discovered in the "shadows" of the meaning of the constitution (*Griswold v. Connecticut*) and the "right to abortion" was discovered in the "penumbras" of that same august document in *Roe v. Wade*, we might have prepared ourselves in the medical profession to be confronted

by other ephemeral rights that would have to be dealt with and presumably honored in our dealings with patients.

The right "not to reproduce" is the latest of such previously unrecognized points of law which has arisen in the context of disputes related to the disposition of frozen embryos generated by couples who have divorced prior to implantation.^{1,2} The so-called "right not to reproduce" was logically and obviously effectuated in the pre-IVF era by choosing celibacy, sterilization or some effective means of birth control. The American Bar Association Section on Family Law, in proposing a policy for the disposition of frozen embryos has stated, with what would seem biologically to make eminent good sense, that "the right not to reproduce" is extinguished at the moment the embryo is created. This supporting statement is used to buttress a proposed ABA policy which would declare with what would seem again to be impeccable logic "the party wishing to proceed in good faith and in reasonable time with gestation to term and to assume parental rights and responsibilities should have possession and control of all the frozen embryos."

Reminiscent of the Wizard of Oz's declaration to Dorothy to "pay no attention to the man behind the curtain" is the failure of Forster et al.² and Robertson¹ to admit that there is an existing third party who must be taken into consideration when these matters are litigated. Surely all of the arguments as to *when* life begins are rendered moot when we are able to *make* life begin in a Petri dish in the IVF procedure.

The embryo is thus an existing human being, despite attempts by the authors to dehumanize it as "genetic material" to be "passed" or "gametes" to be implanted (obviously gametes cannot be implanted unless and until fertilization occurs). Human beings are unique and irreplaceable. Another human being, either existent or theoretically to be conceived does not replace the embryo whose life is ended by what Robertson calls a "policy of non-transfer or discard."

There is a cavalier discussion of the future procreative ability of the parent whose petition to preserve the embryos is rejected. Unless she is a woman over 40 or he an azospermic male, it is stated that no injustice is being done because they can just go ahead and reproduce again.

No obstetrician with empathy would attempt to assuage the sorrows of the mother of a stillborn to "go ahead and have another one." Obviously if there was a recourse to IVF in the first place, there was a problem of infertility in one or both partners. Couples don't choose to spend thousands of dollars on IVF willy-nilly if they are able to "reproduce genetically with another person" without difficulty.

It is interesting that the alleged "right not to reproduce" does not conjure up a corollary "right to reproduce." The same father (as in the Davis case) who can overrule his wife's desire to preserve their progeny after IVF cannot, in another context, overrule his wife's decision to abort their child. In the real world it is impossible to "use one's unique genetic material to create a child against one's will." The father must willingly cooperate, since there is no

way to steal his sperm. It is not at all unusual for a father to wish to be rid of his child after it is conceived either extra-maritally or within marriage. Does anyone seriously argue in that kind of situation that he can assert that the continued existence of the child is "violation of his bodily integrity and personal choice"?²

It is clearly possible for a parent offering a child for adoption to waive all future visitation rights and to be relieved of future responsibility for child support. Surely similar disclaimers could be legally formalized in the IVF conflict situation. It is problematic to assert, as Forster et al. have done² that a man appropriately should have a "right not to reproduce" which precludes and transcends his ex-spouse's ability to carry their child and raise it individually or with another man.

Prior agreements at the time of application to the IVF clinic would, as Robertson states, solve some of the problems. It would prevent such anomalies as the New York Court of

Appeals holding in the *Kass v. Kass* case that the wish of a divorcing husband to have embryos "donated to an IVF clinic for research" should prevail over the wife's desire to use them for reproduction. The use of embryos for "research" is arguably against the law or certainly contrary to the 1995 Federal Regulations on the use of embryos for experimentation.

**- Eugene F. Diamond, M.D.
Professor of Pediatrics
Chicago, IL**

1. J.A. Robertson, "Disposition of Frozen Embryos by Divorcing Couples Without Prior Agreement," *Fertil and Steril*, 71:996, 1999.

2. H. Forster, et al., "Comment on ABA's Proposed Frozen Embryo Disposition Policy," *Fertil and Steril*, 71:994, 1999.