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Current Medical-Moral Comment

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THOMAS J. O'DONNELL, S.J.

While some consider human artificial insemination identifiable in history as early as the second century, John Hunter of England is usually regarded as the modern pioneer. It was under John Hunter's direction that the wife of an English merchant was successfully inseminated with her husband's sperm in 1799. Others would look upon Robert Dickinson's work, almost a hundred years later, as the real starting point. The practice though did not attain much clinical prominence in American medicine until the late 1930's.1

Now developments of new dimensions in the techniques of artificial insemination continue to appear in literature. Less than six years ago J.A.M.A. reported in its "Questions and Answers" that although the frozen sperm had been used in animal husbandry for many years, very little had been done with such techniques in the field of human reproduction.2

More recently, however, two significant reports have appeared in Fertility and Sterility. Perloff, Steinberger and Sherman reported successful pregnancies with spermatozoa which had been stored in liquid nitrogen for almost six months.3 Fernandez-Cano, Malkin, Garcia and Rock reported successful pregnancies with spermatozoa which had been stored at minus 49 degrees C. They had used glycol as their protective agent.4 A year later Perloff and Steinberger reported success with a sperm frozen up to ten months.5

Artificial insemination in humans had been rejected as immoral by Pope Pius XII in 1940. On this subject the Pontiff said: "With regard to artificial fecundation, not only is there reason to be extremely reserved, but it must be absolutely rejected. In speaking thus, one is not necessarily forbidding the use of artificial means destined solely to facilitate the natural act or achieve the attainment of the natural act normally performed."6

In the teaching of the Church with regard to this matter, the distinction between artificial insemination and artificial aids to natural insemination is of great importance. Artificial insemination is identified, from a moral viewpoint, as any process whereby the male spermatozoa are brought into juxtaposition with the female ovum by any means apart from and wholly independent of the act of natural coitus. All such means are held to be contrary to the natural law.

Although somewhat uninspiring in itself, the source of this very positive and delicately respectful beauty doctrine is the uniquely reverence-humanity and deeply human significance of the marital act itself. As Pope Pius XII pointed out: "Such procreation is, at the same time, in conformity with the corporal and spiritual nature and the dignity of the spouses, and with the normal and felicitious development of the child."7

It is in the distortion of this uniquely meaningful beauty that the basic immorality of artificial insemination lies. Other distorted dimensions of human nature are often added: such as the disorder of masturbation to obtain the sperm, or the injustice and irresponsibility inherent in the concept of the donor sperm, or the grotesque procedure of bringing forth a new life under laboratory conditions in vitro where it cannot survive. All these aspects, though gravely immoral in themselves, are really only additions to the basic immorality of artificial insemination.

The distinction between this and artificial aids to natural insemination is best introduced by reviewing the distinction expressed in the papal document already quoted: "In speaking thus, one is not necessarily forbidding the use of certain artificial means destined solely to facilitate the natural act or to achieve the attainment of the natural act normally performed."8

In other words, anything that can be done to assist the childless couple in their desire to express the depth of their marital love and the meaningfulness of their marriage in procreation merits consideration. Of course, it must remain within the framework of moral rectitude and be accomplished within the context of the natural marriage act.9,10,11,12

Several techniques have been referred to me from time to time. These are mentioned here without comment on their medical acceptability or efficiency, since this is a matter for the individual physician to evaluate. But I mention them because I have discussed them with several theologians who have felt that they are acceptable artificial

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aids to natural insemination and within the moral framework laid down by Pope Pius XII.

1. The recovery of as much as possible of the husband's ejaculate from the wife's vagina, by means of a syringe, following the act of coitus and the immediate reposition of it at the cervix.

2. The collection and reservation of amounts of the husband's sperm by use of a perforated condom in a series of acts of coitus; which can then be spun down, leaving a residue containing a heavy concentration of spermatozoa, to be placed in the wife's vagina either immediately before or after an act of marital intercourse.

3. Marital intercourse with a perforated condom which is then brought immediately to the physician's office by the wife. There the physician deposits the residue from the condom into a polyethylene tube which terminates in a cup fitted to the cervix and follows by a plastic ball to prevent retrograde escape of semen from the cervical cup. This device is left in place for several hours.

I have reported these three techniques as illustrative of many which are investigated to aid the infertile couple. At this time their moral acceptability is derived from the consideration that insemination occurs with the husband's sperm originally derived in natural acts of intercourse and subsequently deposited sufficiently within the context of the marital act as to be considered an artificial aid to natural insemination rather than strict artificial insemination.

Moreover, coitus with a condom, of such material as to protect the viability of the sperm and so perforated as to allow for passage of some of the ejaculate into the vagina while retaining some (either by testing or subsequent reposition) is indeed a compromise of the usual marital act. It is, however, obviously without contraceptive intent; and sufficiently minor an accidental to leave the marital act substantially intact and to be permissible for a serious reason. It would, of course, be morally disordered if done with contraceptive intent.

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