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November 3, 2006
Posted: 11/03/06

Scott and Geri Bowman of Tallmadge, Ohio, shown here with their children, 4-year-old twins Joey and Angie and 2-year-old Addie, decided to donate their extra embryos, created through in vitro fertilization, to a childless couple. (RNS photo by Lynn Ischay/*The Plain Dealer* of Cleveland)

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By Susan Glaser

Religion News Service

CLEVELAND (RNS)—Geri and Scott Bowman started fertility treatments in 2001 with just one thing on their minds—having a baby. Five years and three children later, the couple confronted the fallout of their success.

What should they do with the embryos they created but then no longer needed?

It's a problem facing thousands of couples nationwide.

Science helps them get pregnant. But science may be less helpful afterward, when it's time to decide what to do with these nascent life forms—"babies waiting to be born," as one mother put it—the size of a speck of dust and preserved at minus 320 degrees Fahrenheit, sometimes for years.

"To an awful lot of people, it's a very difficult decision," said James Goldfarb, director of the in vitro fertilization program at the Cleveland Clinic.

A study by the RAND Corp. in 2002 estimated there were 400,000 human embryos stored in fertility clinics in the United States, a number that has undoubtedly increased since then; the Cleveland Clinic alone has 4,200, nearly 1,000 of which are more than 10 years old.

"We want to keep them here, under our control, until our patients decide what to do with them," Goldfarb said. He concedes, however, that for some, doing nothing is a decision in itself.

The embryos are the products of in vitro fertilization, a procedure pioneered in the late 1970s that is now a relatively commonplace treatment for couples experiencing fertility problems.

According to the American Society for Reproductive Medicine, 48,756 children were born in the United States in 2003 as a result of in vitro fertilization.

The procedure involves the retrieval of eggs from a woman's ovaries after several weeks of hormone treatments.

In a lab, the eggs are mixed with her husband's (or a donor's) sperm, then implanted into the woman's uterus several days later.

Doctors typically transplant two or three embryos into the woman; the remainder—on average, seven or eight—can be frozen for future use.

Couples can use these frozen embryos if their initial attempt fails or if they want more children, though success rates with frozen embryos aren't as high as with "fresh," Goldfarb noted.

Couples are encouraged to make a decision about any unused embryos before they initially undergo in vitro fertilization.

But Geri Bowman, a mother from Tallmadge, Ohio, said that for couples dealing with infertility, decisions about the future always take a back seat to current struggles. "At that point in time, it's all about 'I want to get pregnant. I want to have a baby.'"

Years later, however, a parent's perspective often changes, as it did with the Bowmans. Their decision to donate the embryos to another couple proved more complicated than they expected.

After their fertility doctor declined to get involved in the donation process, they contacted two embryo adoption agencies, settling on a facility in

Tennessee, which now has possession of the embryos.

Meanwhile, the issue hung over them for months. “In the back of your mind, there’s no closure,” said Scott Bowman. “I don’t think people understand how big of an issue it is. There are so many embryos out there that people don’t know what to do with.”

Some patients ask their doctors to fertilize just two or three eggs, negating the need to make a decision about any excess. Two years ago in Italy, a law went into effect prohibiting the creation of more than three embryos at a time, and requiring they all be implanted simultaneously.

But most couples in the United States want doctors to create as many fertilized eggs as possible, which has led to the increasing number of embryos in storage, said Goldfarb.

Money plays a role as well. Each in vitro cycle, as the process is known, costs an average of $12,400, according to the Society for Reproductive Medicine, and insurance seldom pitches in. Using a frozen embryo costs just a fraction, about $1,500.

Couples who are finished having children—or finished trying—and have remaining embryos have several options, at least hypothetically. They can opt to have their embryos destroyed. They can donate them to an infertile couple. Or they can designate them for research.

A small percentage of patients dispose of the embryos, usually after they receive a storage bill from their clinics, which charge between $200 and $400 annually.

Research involving human embryos, including embryonic stem cell research, is severely limited in the United States because of a ban on federal funding for such experimentation. Couples can agree to keep the embryos frozen until research opportunities develop.

A strong opponent of embryonic stem-cell research, President Bush has advocated so-called embryo “adoptions,” or the donation of embryos to infertile couples. When he vetoed legislation in July that would have eased funding restrictions on research, Bush surrounded himself with 18 families who had children from adopted frozen embryos.

A handful of embryo adoption centers have opened in the past several years, boosted by millions of federal dollars to promote the practice.

Susan Glaser writes for The Plain Dealer *of Cleveland*.