

Babies who have more than two 'parents'

Is the introduction of surrogate motherhood a medical and legal milestone or does it open a Pandora's box of ethical questions?

Allison Kaplan Sommer

explores both sides of the issue

A sense of euphoria has been wafting through the hallways of the maternity ward in Haifa's Rambam Hospital ever since last week's delivery of twins. The babies were the first in Israel to be born to a woman who has no genetic link to her children – the nation's first surrogate mother.

The delivery, by cesarean section, "was an unbelievably emotional experience," said Dr. Yosef Itskovitz, who headed the Rambam team. "We are all still walking on air."

But what was indeed a significant medical milestone also represents the opening of a Pandora's box of legal, ethical and emotional questions. As reproductive medical science forges ahead, societal attitudes regarding families lag behind. Most of us are still far from being completely comfortable with the reality that a couple's fertilized egg may now be carried inside the womb of a woman who is being paid for the service, a woman who knows that once the baby she has nurtured inside her body is born, her relationship with the infant is formally over.

The sensitivity of the situation was not lost on the medical team at Rambam. Some wept when they took the newborns away from the distressed surrogate mother. She had told her doctors that she did not want to look at them.

Itskovitz admits that, pleased as he is with his breakthrough, and even as he prepares to work with additional couples who have been approved for surrogacy by a government committee – 15 have been given the go-ahead – he still has some reservations about the whole process.

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not completely resolved after the birth. Although the surrogate mother said throughout the pregnancy that she wanted a "completely clean break" from the babies once they were born and did not wish to see them immediately after their birth, Itskovitz reports that following the delivery she experienced "very strong emotions."

She has inquired repeatedly about their health, seen their pictures in the newspaper, and "is even talking about the possibility of some kind of connection" with the family, Itskovitz says.

Some critics are disturbed by the physical and emotional cost to the surrogate mother, despite her having agreed to carry out the pregnancy. Rivka Meller-Olshitzky, chairwoman of the Israel Women's Network, has been a vocal opponent of surrogate motherhood ever since the debate over its legalization began in the early 1990s.

Today she says that reading the stories of the nation's first experience with surrogacy has only reinforced her disgust and concern about the long-term consequences of a practice which she likens to slavery and trafficking in human organs.

"I think it was awful and that the medical team was justified in crying when it happened," she says. "This woman's body was prepared for breast-feeding and being a mother to twins, she had undergone dramatic hormonal changes – and suddenly there were no babies for her to mother."

"Over the years I've argued with people who have said surrogacy is no different from a man donating his sperm. I think it is far different from sperm donation – far greater medical risks exist. A cesarean section after all, is an operation. When else do we allow people to undergo an operation for money? Selling one's organs is illegal; I believe a woman's uterus is an

been given the go-ahead, he still has some reservations about the whole process.

"From a medical point of view, it is just so fantastic to help couples who have been struggling for so long to have children. These are very frustrating cases medically — where we have eggs, sperm, and the woman simply does not have the ability to carry the child," Itskovitz says.

"Surrogacy offers us a solution to these problems. On the other hand, the price is high and the process is complex, particularly for the surrogate mother. Now that we have been through it, we know just how difficult it can be," the doctor adds.

This first surrogate pregnancy and birth, he says, was "quite an ordeal."

The surrogate, a single mother struggling economically, went through a psychological crisis when she learned she was carrying twins and had second thoughts at other points in the pregnancy. Several times she considered ending the pregnancy, which is permitted under the surrogacy contract, but doctors convinced her that abortion was not the answer. Much of the tension stemmed from friction between the genetic parents and the surrogate over which of her day-to-day activities were too risky for the fetus.

"The dynamic between the surrogate and the couple was very complex. They wanted to protect her as an incubator, and she wanted to live her regular life," explains Itskovitz.

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no different from a man donating his sperm. I think it is far different from sperm donation — far greater medical risks exist. A cesarean section after all, is an operation. When else do we allow people to undergo an operation for money?

"Selling one's organs is illegal; I believe a woman's uterus is an organ and she should not be able to sell or rent that either. What is so sacred about a couple's gene pool? Why can't they adopt?" Olshitzky says.

Professor Eliezer Jaffe of the Hebrew University of Jerusalem School of Social Work, who is active on the issue of overseas adoptions and is familiar with the pain of couples who desperately want children, supports surrogate motherhood and believes the introduction of this practice is a significant step toward helping these families. He notes that many people run into tremendous difficulties and complications when pursuing the route of adoption.

"My overall feeling about it is that Israel has opened up an important new avenue for couples who are struggling with infertility. I think it's a breakthrough piece of legislation," Jaffe says.

Yet Jaffe doesn't believe that the surrogacy option will drastically reduce the number of couples seeking to adopt babies either domestically or overseas.

"Certainly, there are couples who will do everything possible to have their own biological child, and the idea of surrogacy is the extreme of that line," Jaffe says. "But on the other hand, there are other couples where the desire for a genetic link is outweighed by the fact that they do not want another person involved in their family, they don't want to have to cope with a surrogate during the course of the pregnancy, and they don't want to enter into a contract with a third party.

"I believe these couples will still be attracted to the option of adoption, particularly overseas adoption, and other kinds of closed adoption where there is no contact with the birth parent," the professor says.

JAFFE acknowledges that there were problematic elements in this first case of surrogacy, but predicts that "experience teaches us lessons." In fact, Itskovitz says, he and his team have already drawn lessons from the experience, and he recommends some changes in

the procedure.

A government committee of professionals is responsible for screening the couple and the surrogate. In Itskovitz's view, the medical and psychological screening of candidates for surrogacy should be stricter. He maintains that this first surrogate mother ran into trouble because of her difficult economic circumstances and what emerged as emotional fragility.

From a medical point of view, it would have been more advantageous to choose a woman who had not previously undergone a cesarean section. In addition, he said, a special program must be developed to have the pregnancies followed by an experienced team of psychologists and social workers, and an obstetrician who is sensitive to the situation.

But Olshitzky believes that no matter how it is structured, the system will inevitably favor the interests of the genetic parents over the rights of the surrogate mother. She points to the fact that this first mother was "convinced" by the team not to have an abortion. "They pressured her not to abort thinking of the couple, not looking at her problems, at her suffering.

"There is a competition between the human rights of the couple and of this extremely poor woman, and she lost out," Olshitzky says.

In effect, there is a limit to how much the surrogacy can help pull a woman out of poverty. The surrogacy law limits the amount of compensation a surrogate can receive, covering expenses and a fixed sum.

"And think of it, her body is essentially working 24 hours a day for this couple: she should be getting hundreds of thousands of shekels," Olshitzky says.

In deference to the sensitivities of religious parties when the law was drafted, it was decided that surrogate mothers must be single, and may not carry children for family members. This rules out situations in which the surrogate mother may be in a position to go through the pregnancy with a better support system.

And what about the child? At a Hebrew University conference on surrogacy several years ago, which coincided with the Knesset debate of the issue, Jaffe recalls that several people expressed concern about the welfare of a baby

produced through surrogacy, and questioned whether learning of the way they came into the world could create an identity crisis.

"I argued at the time, and still believe, that there is little difference between these issues and the issue of adopted children," Jaffe says. "During discussions about adoption 20 or 30 years ago, similar questions were raised. Well, today adoptions are a routine part of our landscape, and I believe that in a decade or two, surrogacy will be the same." Jaffe feels strongly that when the time comes, children who are born through surrogacy will and should be informed about their origins.

"In that way surrogate motherhood resembles adoption. The more you try to hide things, the worse it is. Withholding the truth can create terrible problems. Telling all at the appropriate time is the healthiest way to handle things," Jaffe says.

If there is one point both proponents and opponents of surrogacy agree on, it is that the practice seems to be here to stay.

Despite all the differences, Itskovitz concludes that this first experience appears to have gone well, "not perfectly, but – considering the fears we had going in, both medical and psychological – it went well.

"Every future couple and surro-

gate will have their own individual stories and issues, but we have the security and confidence that we can cope. I am sure as the years pass it will become more and more routine."

Even Olshitzky admits that now the practice is legal and actually taking place, it will be very difficult to put the genie back into the bottle. "I truly regret it," she says.

"There is something in Israeli society pushing people to feel that they must have a child from their own genes, and to view adoption as an inferior option. Some might see the first surrogate birth in Israel as progress – but I see it as going back to the darkest days in history."