



CATHOLIC HEALTH

Australia

1 June, 2018

Jeanette Radcliffe
Committee Secretary
Senate Inquiry into the Science of mitochondrial donation and related matters
PO Box 6100
Parliament House
Canberra ACT 2600

Dear Committee Secretary,

Response to Inquiry into the Science of mitochondrial donation and related matters

Thank you for providing Catholic Health Australia (CHA) with the opportunity to respond to the *Senate Inquiry into the Science of mitochondrial donation and related matters*. CHA is Australia's largest non-government grouping of health, community, and aged care services accounting for approximately 10% of hospital based healthcare in Australia. Our members also provide around 30% of private hospital care, 5% of public hospital care, 12% of aged care facilities, and 20% of home care and support for the elderly.

Catholic hospitals operate on a not for profit basis with a strong mission ethos of caring for the most vulnerable and disadvantaged, and have always valued the delivery of person-centred care that is founded on a respect for human dignity and life. We are writing to reinforce concerns expressed by both the Australian Catholic Bishops Conference and the Plunkett Centre for Ethics that the use of this method of artificial reproductive technology (ART), in the form of mitochondrial donation, erodes the value of embryonic human life and engages in an approach to germline manipulation that has thus far been tightly restricted in Australia.

These proposed techniques, Maternal Spindle Transfer (MST) and Pronuclear Transfer (PNT), do not provide a cure for the disease but only prevent the potential for a mitochondrial disease to develop in future offspring. In the current state of finite resources for health and medical research, we should consider how much investment in this area of ART will be required by the system. CHA insists that any future proposals to advance the legal and ethical frameworks to allow mitochondrial donation be accompanied by a rigorous assessment on the funding impacts of this new technology.

In order to carry out a mitochondrial donation procedure, a donor egg with 'healthy' mitochondria must be sourced to supplement the mitochondrial DNA (mtDNA). Currently in Australia, women are not financially compensated for providing donor eggs. If mitochondrial donation were to become legal, there are concerns that couples wishing to source donor eggs for this form of ART may look to overseas jurisdictions to obtain these donor eggs. While countries vary in their rules and regulations about the collection and compensation women receive for donating their eggs, how women are compelled to provide eggs to prospective couples, or industries looking to capitalize on the

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expansion of this research, would need to be considered. Many countries have outlawed some forms of ART due to the exploitation of women by overseas prospective parents. Any changes to the current statues of egg donation and compensation may have the unintended consequence of shifting the unregulated sourcing of donor eggs to overseas jurisdictions that do not have the equivalent protections for women who risk exploitation.

Mitochondrial DNA is passed from the mother to her offspring. While male progeny might not risk the passage of donor mtDNA to their offspring, female progeny would pass hereditary modifications of donor mtDNA to future generations. The impacts of reproduction on genetically modified progeny remain unknown, but mandating that only male embryos be transferred in this form of ART, as the USA Food and Drug Administration Report (FDA) commissioned report recently recommended while clinical trials are conducted, sets a dangerous precedent for the selective reproduction of a specific gender. The safety and efficacy of these mitochondrial donation techniques have not been adequately assessed in clinical trials, with risks to future progeny in the form of heritable alterations to the human genome still uncertain. CHA strongly cautions against mandating the genetic selection of certain genders that could open the door for eugenic germline genetic manipulation.

CHA is committed to developing a culture that affirms life and healing and is opposed to the purposeful destruction of embryonic life and the potential risks to health and safety that come with germline genetic manipulation. We are willing to lend our expertise in the fields of health and research to assist with any further queries and if we can be of any further assistance during this review process, please do not hesitate us.

Yours sincerely,



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