



CONSEIL NATIONAL DU SIDA
7 RUE D'ANJOU
75008 PARIS
T. 33 [0]1 40 56 68 50
F. 33 [0]1 40 56 68 90
CNS.SANTE.FR

OPINION

ETHICS OF RESEARCH AND CARE

EN

1998 FEBRUARY 10TH

JOINT OPINION ISSUED IN CONJUNCTION WITH THE
CCNE REGARDING THE ETHICAL ISSUES RAISED BY
COUPLES WICSHING TO HAVE A CHILD, WHERE THE
MAN IS HIV-POSITIVE AND THE WOMAN HIV-
NEGATIVE

The Comité Consultatif National d'Ethique, or National Advisory Committee for Ethics [CCNE], and the National AIDS Council, wish to stress the following points concerning currently proposed solutions :

- Adoption and recourse to third-party donors in the context of medically assisted reproduction continue to be the most reliable solutions for couples wishing to avoid any risk of infection.
- The proposed solution of medical monitoring of unprotected sexual intercourse is one that entails excessive exposure to risk of infection. The Committee and the National AIDS Council consider that this method should be proscribed due to possible problems entailed in terms of prevention, mainly with regard to the mother of the child, in addition to the incompatibility between this method and AIDS prevention campaigns based on the absolute need for protected sexual intercourse.
- Intra-couple insemination of treated and tested spermatozoa of HIV-positive men appears to strongly decrease the risk since it has recently become possible to use highly sensitive techniques to measure the viral load in contact with the spermatozoa in the seminal fluid.

The National Advisory Committee for Ethics and the National AIDS Council recommend sustained implementation of the principles of precaution and vigilance as new knowledge is acquired in this area.

Considering that any medical assistance for reproduction using the spermatozoa of an HIV-positive man does not currently satisfy the necessary prerequisites, the teams already authorized by the Minister of Health must provide such assistance solely within the framework of a multidisciplinary research protocol governed by the stipulations contained in the statute of December 20, 1988, and notably the Opinion issued by the Comité Consultatif de Protection des Personnes / Advisory Committee on the Protection of Individuals.

Furthermore, given the special nature of the problem raised, the opinion of the Commission Nationale de Médecine et de Biologie de la reproduction et du diagnostic prénatal / National Committee for Reproductive Medicine and Biology and Prenatal Diagnosis could also be obtained by application of Article R. 184-3-12 of Decree 95-558 of May 1995, enacted following statute 94-654 of July 29, 1994. The Minister of Health will then need to refer the case to the Committee in accordance with the latter statute, after having been informed of the CCPRB's opinion.

The detailed arrangements for obtaining written consent to high-risk treatment from couples in which the male partner is HIV-positive must be submitted to the CNMBR, as is the case for protocols. Moreover, the information given to the couple must highlight recommendations and procedures directed at avoidance of HIV infection before, during and after medically assisted reproduction. Special medical follow-up will be provided to that effect.

Any new data likely to improve conditions for health safety will be immediately passed on those involved (the couple, laboratory staff, etc.), and will be covered in a notification of changes in the protocol to the abovementioned Committee.

The Laboratories responsible for treating the sperm of HIV-positive men must have the proper facilities and equipment to meet safety requirements for handling HIV, along with the authorization of the Minister of Health for biological procedures forming part of medically assisted reproduction.

It is desirable that couples should not be given the feeling that they are receiving separate, discriminatory treatment by ensuring that they can be treated by the same teams responsible for other couples wishing to have children, rather than being assigned to other organizations.