New technologies demand update to ethics on future genetic testing

2013 saw many changes to available prenatal testing technologies. These changes have given expectant parents unprecedented access to genetic information about their children. As these technologies advance, however, they raise important ethical questions about how much genetic information parents should have access to and how this information might influence their decisions.

23andMe caused an uproar this year when it patented a “designer baby” platform, even while it disavowed any intention to develop it. It’s still just an idea—by a company whose services have temporarily been suspended by the FDA—but it sparked plenty of bioethical hand-wringing about the lurking dystopian future it threatens.

More quietly, companies like Sequenom rapidly expanded the distribution of new early-detection blood tests for a few common genetic atypicalities like Trisomy 21, also known as Down syndrome. These tests are non-invasive and now offered as early as ten weeks’ gestation; Sequenom’s updated MaterniT21 Plus model, just released in October, now identifies some rarer abnormalities as well. Bioethical debates have accompanied this technology, too: If genetic information is available at such an early point in a pregnancy, prospective parents can more privately choose to selectively abort a fetus based on genetic traits alone.

Read the full, original story: An Ethics for the Future of Genetic Testing

Additional Resources:

- Talking about genetic disorders: How much information do we need—or want? Genetic Literacy Project
- Tangled ethics of preimplantation genetic testing, Council for Responsible Genetics
- Genetic counseling and medical ethics in the age of personal genomics, DNA Exchange