

Prominent research IGI lab temporarily suspends germline editing research

This post addresses a question that I've been asked in many ways by many people: what about germline editing? After the IGI started the ball rolling with a small meeting in Napa, we penned a call for [a temporary moratorium on germline editing](#) and have been lobbying for a larger summit. I think it likely that restriction or proscription of germline editing will be the outcome.

At this time, the IGI Lab will not do research on human germline editing for several reasons. The media loves to talk about designer babies, but we actually don't know the first thing about the genetic basis behind complex traits like beauty or intelligence. But we do know a lot about genetic disease, particularly so-called monogenic disorders, in which a problem in a single gene causes the disease. [Online Mendelian Inheritance in Man](#) currently contains about [3,500 disorders](#) that have a clinical phenotype for which the molecular basis is known. It's clear that we should start with one of these, such as sickle cell disease, cystic fibrosis, muscular dystrophy, or Huntington's disease. The thing is, curing most genetic diseases wouldn't require germline editing. By now we're [very good at bone marrow transplants](#). And once delivery systems are ironed out, even non-hematopoietic diseases could be cured in adults with gene correction therapy. But eventually achieving the above will take a lot of work.

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