Looking at current technologies and pharmacological therapies for assisted reproductive techniques (ART) through the perspective of ethical and legal regulation

Guest Editor: Vittorio Fineschi MD, PhD

Department of Forensic Sciences. “Sapienza” University of Rome, Italy

Numerous studies are devoted to assisted reproductive techniques (ART). However, current technologies and pharmacological therapies are yet evolving. A legislative change in this field is well linked to medical science, which by its nature constantly evolving; in particular, the increasing of knowledge involves the identification of new methodologies, which are able to offer achievement of objectives previously unthinkable and therefore the law should conform to this evolutionary process.

These emphasize the scope of the health professionals' duty to inform these women even more thoroughly. The extent of information provided in counseling should be adapted to the particular clinical and obstetric condition of these women. The content should include risks to the woman as well as to the embryo, fetus and unborn child. This includes the high risk of maternal complications and clinical associated problems, as well as the current scientific limitations and uncertainties that still surround these techniques. Physicians need, through detailed counseling, to clearly inform patients considering these technologies of the maternal and fetal risks.

The role of maternal age as a possible accelerator of the relationship between unfavorable outcomes and the use of ART still remains a subject for debate.

These pregnancies must be managed with protocols aimed at intensive monitoring and prenatal assistance, with all the specific predictive tests, prophylactic measures, monitoring and contingent specific therapies for the most frequent complications. Couples should be provided with evidence-based information on the techniques and their implications, as well as on the performance of the techniques themselves in advanced reproductive age women. Parental age is not a criterion to
terminate parental rights; surely maternal age must be a clinical criterion to determine eligibility for assisted reproduction.

**Timeline:**
Deadline of submission: July 30th, 2015.

**CONTRIBUTORS**

V. Fineschi (Italy) Editorial

H. Selman (UK) Gonadotropins and ovarian stimulation treatment: impact on oocyte and embryo quality.
elmy.selman@yahoo.com

A. Pacchiarotti (Italy) Ovarian stimulation protocol in IVF: state of art.
arypac@alice.it

T. Mahmood (UK) The state of art about assisted reproductive techniques.
tmahmood@RCOG.ORG.UK

P. Benedetti Panici (Italy) A retrospective study on advanced maternal age and assisted reproductive techniques.
pierluigi.benedettipanici@uniroma1.it

C. Kyriacou (Cyprus) Heterologous fertilization: the opinion of Italian physicians and a brief European overview.
P. Frati (Italy) Mix-up during assisted reproductive technique: what is in the best interest of the newborn?

paola.frati@fastwebnet.it

FP Busardò (Italy) Accidental thawing of embryos, cryopreserved for transfer. fra.busardo@libero.it

Few more may be included in the future.