

ADVANCED GCE

CRITICAL THINKING

Ethical Reasoning and Decision-Making

F503/RB

RESOURCE BOOKLET

To be issued with the question paper

**Wednesday 26 January 2011
Afternoon**

Duration: 1 hour 30 minutes



INSTRUCTIONS TO CANDIDATES

- Use Documents 1, 2, 3 and 4 to answer the questions.

INFORMATION FOR CANDIDATES

- The information contained in the resource documents was accurate when this booklet went to press, but some details may have subsequently become out of date.
- This document consists of **8** pages. Any blank pages are indicated.

INSTRUCTION TO EXAMS OFFICER/INVIGILATOR

- Do not send this resource booklet for marking; it should be retained in the centre or destroyed.

Document 1

The world's oldest mum at 70 – but geriatric mothers are bad for baby

The news this week that a woman has given birth to a baby girl at the age of 70 filled me with horror. She and her husband had longed for a baby all their married lives and were delighted when IVF* allowed them to put an end to gossip they'd endured for years – childlessness is a social stigma in the country where they live.

But is this really any reason for having a child? To me it sounds like the ultimate in selfishness. We're becoming used to having anything we want at any time. But a child isn't a commodity.

The politically-correct approach to infertility is that every woman has the right to bear a child but, to my mind, pregnancy and birth are unnatural and foolhardy for an old woman with a frail and ageing body. No woman was designed to have a baby at 70. But, perhaps more importantly, it's a contravention of a child's right to grow up with its parents – the chances of the child being orphaned before adulthood are high.

Just because the technology is there doesn't mean we should necessarily use it. I believe doctors and fertility experts should exercise judgment about not only the fitness of the mother's body but also the wellbeing of a baby born to ageing parents.

The case of the 70-year-old woman did not occur in the UK, but there is no law to stop it from happening here. Most clinics in the UK tend not to give IVF to women over 45. The older you are, the lower your chances of success, especially if your own eggs are being used. Chances are better if you use donor eggs, which are only taken from women under 36, but still lower than they would be in a younger woman.

Source: Dr Miriam Stoppard's column in the Daily Mirror

* IVF: see Document 2 for definition.

Document 2

In-vitro fertilisation (IVF)

is just one of several techniques available to help couples with fertility problems to have a baby. It involves surgically removing an egg from the woman's ovaries and fertilising it with sperm in a laboratory. For those women who cannot produce eggs of their own, donor eggs may be used. The fertilised egg, or embryo, is then placed back into the woman's womb to grow and develop.

Who can have IVF?

In the UK, guidelines suggest that couples may be eligible for some free IVF treatment on the National Health Service (NHS) if:

- the woman is between 23 and 39 years of age at the time of treatment, and
- a cause for their infertility problems has been identified, or
- they have had infertility problems for at least three years.

However, the decision on who can have IVF is made by local health authorities, and priority is given to couples who do not already have children.

Going private

You may wish to consider private treatment. Private treatment for infertility can be very expensive, and there is no guarantee that it will be successful. For example, a cycle of IVF at a private clinic typically costs between £4000 and £8000, depending on the clinic and treatment selected.

Success rate

The success rate of IVF is determined to a large degree by the age of the woman undergoing the treatment. Younger women tend to have healthier eggs, which increase the chances of success.

In 2006, the percentage of IVF cycles started that resulted in a live birth were:

- 29% for women aged under 35,
- 26% for women aged 35–37,
- 17% for women aged 38–39,
- 11% for women aged 40–42,
- 5% for women aged 43–44, and
- less than 1% for women aged over 44.

Source: the NHS website

Document 3

Should we impose an age limit on IVF? No

To impose an age limit on IVF is random and unkind and does not reflect underlying health issues. It is true that the older a woman gets, risks associated with pregnancy go up. But they are still relatively low compared with the very strong desire for motherhood in later years. To assume that women can't recognise the risks and weigh up the decision is woefully paternalistic.

The medical view in countries where IVF is regularly given to women in their fifties is that as long as the woman is in good health at the outset – doesn't smoke, has normal blood pressure and is a healthy weight – she is likely to come through without significant problems. Donor eggs come from women under 35, so the risks of a pregnancy miscarrying are very low.

A fit 55-year-old can expect at least 25 years of healthy active life; a woman in her sixties might look and feel very young. It depends entirely on the individual case. It is vital to assess psychological state and find out what the motivation is. Do they have a support network – a partner, extended family and any experience of looking after children? The vision of the beautiful baby asleep in the cradle is not the reality. They need to be able to cope with looking after a teenager.

A lot of women want to sort out their education, career and financial stability before they have a baby. By the time they get there, biological time has run out. Often they have held off, desperately hoping the right man was just around the corner. There are often very good reasons for waiting – they may have been caring for elderly parents.

In all cases the child's welfare is of the highest importance. But lots of children conceived the old-fashioned way grow up as carers for elderly or disabled parents. Half of babies are made by accident. In my experience, a woman willing to put herself through the difficulties of IVF has made a very considered decision. Evidence suggests that children born into unusual circumstances tend to receive better-quality parenting. Older people tend to be financially and emotionally more secure.

Source: Dr Gillian Lockwood, Medical Director, Midland Fertility Services

Midland Fertility Services describes itself as “the Midlands’ longest established independent fertility clinic providing fertility treatment for both NHS and private patients”.

Document 4**What effect does the mother's age have on pregnancy?**

It is unfortunately true that simply by being older, you have had more chance to develop medical disorders such as diabetes, high blood pressure or other chronic diseases, which can affect pregnancy and birth. Research on the effect of age on childbirth also reports an increase in the frequency of pregnancy complications such as pregnancy-induced diabetes, low lying placenta and premature birth.

What effect does the mother's age have on the baby?

Your chance of having a baby with a genetic abnormality rises from 1 in 500 between the ages of 35-39, to 1 in 250 between 40–44, up to approximately 1 in 70 if you are 45 or over. Despite the increased risk with increased age, it is important to remember that the vast majority of babies are fine. Except for the factor of genetic abnormalities, figures suggest that babies of older mothers are no more at risk of most birth defects than those of younger mothers.

Source: Babycentre.co.uk website

Babycentre.co.uk describes itself as “the UK’s number one pregnancy and parenting website. Every month, two million parents and parents-to-be visit us for helpful information, expert advice and friendly support.”

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