



## Original Article

## The Assessment of Legal Knowledge among Obstetricians and Gynecologists about Legal Consequences of Assisted Reproductive Techniques

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## ABSTRACT

**Background and Aim:** With the emergence and proliferation of assisted reproductive techniques, the needs of societies have altered. Therefore, measuring the level of legal awareness of gynecologists and obstetricians as the primary consultants of infertile couples can be significantly influential. In this study, we aimed to provide insight into the lack of legal knowledge of this group of specialists, which undermines the quality of healthcare services.

**Materials and Methods:** This cross-sectional study was conducted among 80 gynecologists and obstetricians in Tehran, Iran, in 2016. We used a 26-item questionnaire on the common legal challenges of infertile couples.

**Ethical Considerations:** Verbal informed consent of the participants was obtained after explaining the purpose of the study and the positive consequences of enhancing medical education and improving the doctor-patient relationship.

**Findings:** In general, 30% of the participants were male and 70% were female (age range: 35-75 years). Further, 24% of the participants did not respond to the questionnaire due to limited or lack of knowledge, and 28% knew the permitted types of artificial insemination by Iran's laws. Concerning the basic rights of the child, 17% provided the correct response, and regarding the parental rights, 4% were aware of the existing legal condition. Finally, on the subject of surrogacy contracts, 22% were cognizant of the critical basics.

**Conclusion:** Based on the mentioned results and due to the deep gap between the fields of law and medicine, improvement of the existing curriculum in Iran is highly recommended.

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## Introduction

Trust is the most important element in the doctor-patient relationship and has a significant impact on the effectiveness of treatment, as well as physician and patient satisfaction (1). Patients and physicians are both involved in the formation of trust (2). Some of the

realization components of trust are related to the patient and develop one-sidedly inside him/her, the patient's awareness of the doctor's knowledge and expertise is a case in point. Some other components are related to the physician and create the doctor-patient relationship, such as the doctor's

communication skills and his/her ability to meet the patient's needs and requirements (3, 4). Regardless of the level of knowledge and education, patients are always exposed to large volumes of inaccurate information through modern technologies (5). Moreover, Iranians seldom use legal consultants in judicial and non-judicial matters. With the emergence and proliferation of assisted reproductive techniques, the needs of societies have altered; consequently, evaluating the legal knowledge of gynecologists and obstetricians to provide basic and reliable information to infertile couples must be subjected to careful scrutiny (6). This assessment can be considered as a preliminary attempt to contemplate the possible and necessary beneficial changes in the medical curriculum planning in Iran. In other words, this study aimed to provide awareness regarding the lack of legal knowledge that diminishes the quality of health care services. To the best of our knowledge, this is the first attempt to investigate this dimension of academic curricula.

### Ethical Considerations

We obtained the verbal informed consent of the participants followed by an explanation about the purpose of the study and the positive consequences of improving medical education and the doctor-patient relationship. Since all the participants were active doctors of medicine, they were assured of the confidentiality of the data. The researchers assured

the participants that every effort will be made to ensure that the data they provide cannot be traced back to them in reports, presentations, and other forms of dissemination.

### Materials and Methods

In this descriptive cross-sectional study, we employed a 16-item questionnaire addressing the common legal challenges of infertile couples. The participants included 80 gynecologists and obstetricians working in Tehran, Iran, during 2016. The respondents were selected through the non-probability sampling method in conferences held by the Iranian Women's Society of Minimally Invasive Surgery and Pars Hospital's Advanced and Minimally Invasive Manners Research Center. According to Iran medical council's online database (IRIMC), the total targeted population was 105 specialists including gynecologists and obstetricians, laparoscopy and In Vitro Fertilization (IVF) specialists, infertility and IVF specialists, infertility and IVF fellowships, IVF fellowships, laparoscopy, and IVF fellowships, and laparoscopy fellowships. To analyze the obtained data, Microsoft Excel and RStudio programs were run.

### Findings

Characteristics of the participants in terms of gender, age, duration of the activity, and inability to answer the questions are presented in table 1.

**Table 1.** Characteristics of participants

Characteristics of participants	Percent
Men	30%
Women	70%
Less than 35 years old	0%
35-50 years old	61%
More than 50 years old	39%
Duration of activity less than 20 years	71%
Duration of activity more than 20 years	29%
Declaring inability to answer all questions	24%
Declaring inability to answer more than half of questions	11%
Declaring inability to answer half or less than of questions	65%

In addition, the total awareness of the gynecologists and obstetricians as the primary consultants of infertile couples regarding the laws and regulations and the basic necessary knowledge of the concepts

and possible situations that might arise from assisted reproductive techniques have been demonstrated in general in table 2.

**Table 2.** Total awareness of gynecologists and obstructions regarding laws and regulations

Dimensions	Percent
Parental rights	6%
Child rights	26%
Surrogacy contracts	34%
Third-party rights	34%

Table 3 provides the complete data on the legal knowledge of the gynecologists and obstetricians in 26 angles of laws related to the subject of this article.

**Table 3.** The complete data on the legal knowledge of the gynecologists and obstetricians regarding related laws and regulations

Variable	Percent
1. Permitted types of artificial insemination	28%
2. Parental rights	4%
3. The right of issuing birth certificates in surrogacy contracts	3%
4. Changing birth certificate, ID, related authorities, and timings in case of surrogacy contracts	5%
5. Child rights	17%
6. The basic legal definition of kinship and blood-relation	18%
7. Inheritance right, kinship, and Mahram relation of children resulting from assisted reproductive techniques	6%
8. Citizenship and legal status of the children resulting from surrogacy arrangements	23%
9. Iranian citizenship for the donated embryos	38%
10. Inheritance right from donating parties of children resulting from assisted reproductive techniques	1%
11. Surrogacy contracts	22%
12. The nature of surrogacy contracts	0%
13. Possible definitions of "child" in surrogacy contracts	76%
14. The use of surrogacy contracts	38%
15. Legal parties in surrogacy contracts when the surrogate is a married woman	21%
16. The role of surrogate's husband in surrogacy contracts	13%
17. Rights for surrogate's husband in the case of his ignorance of the contract	45%
18. Legal parties in surrogacy contracts when the surrogate is a widow with a minor child	11%
19. Contracts' legal status in the case of minor's guardian ignorance of the surrogacy contract	10%
20. The right of issuing birth certificates in surrogacy contracts	3%
21. Changing birth certificate, ID, related authorities, and timings in case of surrogacy contracts	5%
22. Citizenship and legal status of children resulting from surrogacy arrangements	23%
23. Third-party rights	23%
24. Rights of the surrogate's husband in the case of his ignorance of the contract	45%
25. The role of surrogate's husband in surrogacy contracts	13%
26. Legal status in the case of minor's guardian ignorance of the surrogacy contract	10%

## Conclusions

Legal consultation is usually required when medical specialists recognize circumstances that are beyond the scope of their skills; however, people generally do not accept their need for legal advice (8). As a result, in the case of infertile couples, seeking answers, solutions, and advice from the treating gynecologists and obstetricians when they become informed of their infertility is a common occurrence. On the one hand, delivering the bad news to patients is a heavy responsibility that has always been left to doctors, which may have different consequences (9,10), and will eventually lead to the patient's right of being informed about all the possible treatment methods to make an informed decision.9-11 On the other hand, practitioners are obliged to respect and follow the ethical codes of autonomy, beneficence, non-maleficence, and justice (11-12, 13).

Although law and ethics are different in nature, they both are created when in alignment and coalition; therefore, ethically and legally providing the right information to patients is of great importance (14-15). There are diverse biological, legal, and social dimensions to assisted reproductive techniques that have led to the emergence of legal issues in Iran. Obstetricians and gynecologists as the primary advisors of infertile couples (concerning treatment through assisted reproductive techniques) often encounter patients' frequent questions (9,16). The lack of basic legal knowledge and providing inappropriate counseling to infertile couples not only would bring about negative psychological and legal consequences for them, but also would jeopardize the doctor-patient relationship and create pessimistic social attitudes towards medical professions (17).

We attempted to tackle one of the uprising issues in our society to provide the best health services by having adequate knowledge. Based on the presented data and since gynecologists and obstetricians are considered the primary consultants of infertile couples, we recommend modifying the existing medical curriculum in Iran or arranging a brief course of legal education on specific issues for medical specialists.

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## Conflict of Interest Statement

The author declares that they have no conflicts of interest.

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