Should women without uterus opt for transplant over surrogacy?

The GLP aggregated and excerpted this blog/article to reflect the diversity of news, opinion and analysis.

Cleveland Clinic surgeons just performed <u>the nation's first uterus transplant</u>; nine more are planned as <u>part of a clinical trial</u>. The goal is to make it possible for a woman with a damaged or missing uterus to become pregnant. This is innovative, skilled surgery. But it does not represent real progress for infertile women.

The wholly understandable desire to bear a child does not justify the significant risks to mother and fetus posed by uterine transplants, not to mention the enormous financial cost. Safer, less costly, and more certain ways to have children already exist. When it comes to uterine factor infertility, we must ask ourselves: What is more important, the experience of pregnancy or the health of a woman and her future child?

The risks include infection, rejection of the uterus, and miscarriage or stillbirth due to failure of the uterus. In Sweden, where nine uterus transplants have already been done, the donated uterus was removed in two cases before pregnancy could be attempted because of infection or the development of serious blood clots.

There are also risks to the baby. The child the prospective mother attempts to create will dwell in a temporary womb from a dead donor in an immunosuppressed body. Of the <u>four babies</u> born in the Swedish trial, <u>all were premature</u>. Since none of the babies are more than 1 year old, we don't yet know whether the procedure carries any long-term risks for them.

Read full, original post: Uterus transplants are no match for the safety of surrogacy