

Is clinicians' decision making affected by 'precious baby' phenomenon?

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Parents who conceive through assisted reproductive technologies (ART) are likely to receive different medical advice in relation to prenatal testing than those who conceive naturally, academics have suggested.

An international study has revealed that almost 45% of [clinicians](#) would immediately recommend a 37-year-old mother undergo amniocentesis – an invasive prenatal test which screens for Down's syndrome – if she had conceived naturally. However, just 19% of doctors would recommend the procedure for a mother whose baby had been conceived through assisted technologies.

Previous research papers have suggested [parents](#) who conceive through ART may be more likely to opt for birth by Caesarean section, rather than a natural birth, in an attempt to minimise any perceived risk to their baby. But the [academics](#), in a paper published in the *Human Reproduction* scientific journal, suggest there may now be evidence that doctors are also affected by the so-called 'precious baby' phenomenon.

Dr Yaniv Hanoch, Associate Professor in Psychology at Plymouth University, co-wrote the study. He said: "Some pregnancies are deemed by parents to be more valuable than others, particularly if conception has taken several courses of assisted reproductive treatment to achieve. But you might expect clinical recommendations regarding pregnancies to remain consistent, particularly when it comes to tests for serious medical conditions. However, this study demonstrates there may be a tendency for clinicians to be affected by the nature of the pregnancy before

determining the parents' wishes."

The study was undertaken by Dr Hanoch alongside Dr Naama Srebnik and Dr Avi Tsafir, from the Department of Obstetrics and Gynecology at Hebrew University, Jerusalem; Dr Talya Miron-Shatz from the Center for Medical Decision Making, Ono Academic College, and Dr Jonathan J Rolison, from the School of Psychology at Queen's University, Belfast.

It used answers from around 160 obstetricians and gynaecologists, who completed an anonymous questionnaire based around a hypothetical scenario, with around half told the expectant mother had conceived naturally and the other half told ART had been employed.

In total, almost a third (31.9%) immediately recommended amniocentesis, while a further 31.3% recommended the procedure having sought further clarification about the apparent high risk to mother and baby. However, this figure differed when the nature of the pregnancy was taken into account.

The clinicians' breadth of experience and use of the procedure were also taken into account, with results showing longer service in the medical profession to have some correlation with their willingness to offer amniocentesis.

The researchers added: "Even without a medical indication, more clinicians would recommend [amniocentesis](#) to a woman with normal screening test results in a spontaneous pregnancy than to one who had undergone ART. Thus far, researchers have provided only indirect evidence to support the claim of differential management of ART pregnancies, but our findings show they do not appear to be immune to the 'precious baby' phenomenon."

Provided by University of Plymouth

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