

Sense of unreality in maternal role after uterus transplantation

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Becoming a mother after receiving a uterine transplant, with the radical change in daily life it brings, gives a feeling of unreality beyond everyday experience. A study led by University of Gothenburg

researchers describes the emotional reactions of women who have undergone what was not feasible less than ten years ago.

This qualitative study of women's feelings about motherhood after [uterus transplantation](#) is now published in the scientific journal *Human Reproduction*. The first author is Stina Järholm, Associate Professor of Psychology at the University of Gothenburg and a clinical psychologist at Sahlgrenska University Hospital.

Järholm belongs to the [uterus transplantation](#) research group that has attracted international attention for its medical advances, and has also distinguished itself for their research and publications on the long-term psychological impact of transplantation on donors, recipients, and partners.

The present study comprised seven women who had either lacked a uterus since birth or needed to have it surgically removed. All seven had lived in the belief that they would never be birth parents. When they received a uterus transplant in 2013, their average age was 29 years.

The results, based on annual interviews with the women up to 2018, clearly show that in many ways they experienced their situation similarly to most other mothers. Becoming a mother felt both thrilling and challenging, and couple relationships were put to the test.

Anxiety and sense of surveillance

Simultaneously, the women had worries connected with the actual procedure. Some had fears about the baby being adversely affected during the pregnancy, and some felt the pregnancy was not truly their own, given the extensive medical supervision they were under.

"I wonder if you love your child in a different way, for the very reason

that it came into being as it did," one woman reflected in an interview. Another woman laughed a little when she related how sometimes, when she was out shopping with her child, she would suddenly think, "What have I done?" and "What if people around me knew?"

"Psychologically, becoming a mother after a uterus transplant seems to be a mixture of feeling just like anyone else and, at the same time, struggling with a sense of unreality," states Stina Järvholm.

The uterus transplants from living donors in 2013 were part of the world's first systematic, science-based research project in this area. It was led by Mats Brännström, the University of Gothenburg Professor of Obstetrics and Gynecology at Sahlgrenska Academy and Chief Physician at Sahlgrenska University Hospital.

After the first birth in Gothenburg in 2014, another seven births followed before a woman outside Sweden gave birth to a child after a [uterus transplant](#). To date, 12 babies have been born within the framework of the Swedish research project, while the worldwide total is about 40.

Improved support in trying situations

Järvholm emphasizes that transplanting the uterus is an advanced form of infertility treatment that extends over many years and includes recipients, parties and donors alike.

"The findings help us to provide psychological support at times when the women are under extra strain—when, for instance, they are repeatedly attempting to get pregnant without success or having miscarriages—and for those who need to leave the project without becoming parents in the way they'd hoped," Järvholm says.

"The knowledge we've gained is also useful for people who meet these women while they're pregnant. It helps them to provide good support based on the [women](#)'s specific needs and to understand that what was previously impossible is becoming a reality," she concludes.

More information: Stina Järholm et al, Striving for motherhood after uterus transplantation. A qualitative study concerning pregnancy attempt, and the first years of parenthood after transplantation, *Human Reproduction* (2021). [DOI: 10.1093/humrep/deab260](https://doi.org/10.1093/humrep/deab260)

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