Lavinia - ASISA Bioética
Comité de Bioética y Derecho Sanitario

ASSISTED REPRODUCTION AMID DOMESTIC VIOLENCE

CLINICAL CASE[1]

Ana a 35-year-old woman with secondary infertility is under the care of Dr. López in the assisted fertility department of a private hospital, where she is scheduled for a consultation for in vitro fertilization. During the consultation, her partner expresses doubts about the assisted reproduction process, so they schedule another appointment for a later date, where they would make a final decision.

One week after requesting the follow-up consultation, Ana was treated in the emergency room for injuries resulting from a physical assault by her husband. She presented with injuries on both arms and her right cheek, in addition to showing anxiety and emotional distress. At the emergency room, Ana disclosed previous similar incidents but explicitly stated she did not want to press charges because her husband "has been going through a difficult time since the passing of his mother two years ago." Upon reviewing her medical records, staff noted that Ana was undergoing in vitro fertilization with her current partner and contacted Dr. López to inform him of the incident. Dr López document the episode from the emergency room in his own medical records for Ana.

Three weeks later, to Dr. López's surprise, Ana returned to the scheduled follow-up accompanied by her partner, with whom she continued to live. Upon reviewing the record, no further notes had been added since the emergency room incident. The gynecologist then told the couple that he needed to speak with Ana privately. When asked about the violence, Ana revealed she had not reached out to support services and stated that she wants to have a child "above all else". She insisted that she did not want to wait any longer. Dr López then proceeded to explain that she needed to report the current situation and expressed that he did not consider it responsible to have a child with someone who is abusing her. Ana argued that she would be happy having a child and was confident that their relationship problems would gradually resolve, especially if they have a child.

Uncertain about what to do from here, Dr López schedules another appointment with Ana for two weeks later to address the issue further. He's unclear whether he should support Ana's desire to conceive or to priortize protecting her health given the ongoing domestic abuse.

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[1] Case inspired by the MIR exam question from January 2026:
"In relation to domestic violence, indicate the correct statement:
1. It occurs more frequently in socially disadvantaged families with limited economic resources.
2. Perpetrators often present with severe psychiatric disorders that explain violent behavior..
3. Victims rarely get healthcare services for fear of being identified as victims.
4. Pregnancy is a period of risk for the onset or worsening of domestic violence".

ETHICAL ANALYSIS OF THE CASE

Dr. López dilemma stems from the fact that the patient is entitled to receive treatment, yet this conflicts with the fact that the end result of the treatment would result in the birth of a child in an abusive relationship. If both parties of the couple consent to the procedure, they would have the right to undergo assisted reproduction, but would it truly be beneficial to Ana? Is this an appropriate environment in which to bring a child into the world?

If Dr. López proceeds with the treatment, the couple's autonomy, especially Ana's, is respected and equity is upheld, since the same eligibility criteria for treatment applies to all patients. However, Dr. López is considering suspending treatment, primarily, to protect Ana's health. Domestic Violence should not be overlooked, and unfortunately, has been shown to intensify during pregnancy and postpartum. The correct answer to the MIR exam question is option 4.

POSSIBLE COURSES OF ACTION

- File an injury report to notify a judge of the situation, regardless fo whether one was already completed by the emergency department.
- Confirm whether an injury report was sent by the ER department and, if not, complete and submit one.
- Call the police so they can arrest Ana's partner in the ER.
- Keep Ana enrolled in the assisted reproduction program, since this is her wish.
- Keep Ana enrolled in the assisted reproduction program, but on the condition that the sperm donor is not her current partner, but instead, and anonymous donor.
- Confit that Ana's husband wishes to proceed with the treatment. If so, obtain his informed consent.
- Get a social worker involved in the case.
- Refer the patient to mental health services so the situation can also be addressed from that perspective.
- Speak with Ana so she can carefully reflect on the fact that continuing with treatment may be significantly harmful to both her and her future child.
- Inform Ana that the treatment will only continue if she seperates from her partner.
- Suspend treatment, and explain to Ana and her partner that is is being halted due to domestic violence.
- Pause the treatment until there is an outcome from the legal process, since an injury report has been filed. They must therefore intervene.

RECOMMENDED COURSE OF ACTION

- In situations involving violence, it's essential that an injury report be filed. Therefore, Dr. López must confirm whether this was done by the physicians who treated Ana in the emergency room. If not, he must complete one himself. If Dr. López believes she s at significant risk, the police should be contacted.
- Because the injury report initiates legal proceedings, Ana should have primary care and be referred to social and mental health services while the case is being resolved. This acts as a multidisciplinary intervention.
- Assisted reproduction should therefore be suspended throughout this process. Ana should be informed of the potentially harmful consequences for both herself and her future child.

- Once the legal proceedings and the psychosocial assessment have been completed, reproductive treatment may be reconsidered, dependant of the outcome of all evaluations. This should not occur before all assessments have been completed and the patient closely monitored.

DISCUSSION

Medical practice must go beyond what happens in the consultation room. Patients are not merely numbers, but individuals whose lives may involve difficult circumstance that healthcare professional sometimes have a duty to address. One such circumstance is domestic violence.

In Ana's case, the issue of violence must be addressed before processing with treatment. Continuing with IVF could be harmful to her, as pregnancy has been shown to worsen the dynamics of domestic violence. No assisted reproduction should be carried out while legal proceedings are on going nor while psychosocial interventions are taking place. Each area must be fully assessed.

In cases such as these, it's possible that IVF may ultimately not be appropriate. Protecting the patient's health, and even her life, as well of that as any future child must take precedence over the desire to get pregnant. Additionally, Ana may still be able to fulfill this wish in the future, either on her own (through donation) or with another partner.

Sgd.: ASISA-Lavinia Committee on Bioethics and Health Law
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