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The Minnesota Section of the American Congress of Obstetricians and Gynecologists

TO: Legislative Commission on Surrogacy
FROM: Minnesota Section ACOG
DATE: July 19, 2016
RE: Mental And Physical Effects of Gestational Surrogacy

I am writing as the Legislative Chair of the Minnesota Chapter of the American Congress of Obstetricians and Gynecologists (ACOG), the specialty's premier professional membership organization dedicated to the improvement of women's health. With more than 57,000 members nationwide and 905 in Minnesota, ACOG seeks increasing access for women to high quality safe health care.

Our members provide services to women who serve as gestational carriers to assure that they and the child they are carrying are safe and healthy. Women are waiting longer to have children. Unfortunately, for a variety of medical reasons, a growing number are unable to become pregnant and carry the pregnancy to term. The use of a gestational carrier to help these women and their partners have a baby is increasing in frequency.

Questions have been raised about the impact of gestational surrogacy on the physical and mental health of both the gestational surrogates as well as the children born from surrogacy. We do not believe that either gestational surrogates or the children they carry face statistically significant increased risks to either their physical or mental health. Gestational surrogates are screened prior to having an embryo implanted to assure that they are physically healthy and capable of carrying the pregnancy to term. They also go through an intensive mental health screening process with licensed mental health professionals to assure that they are emotionally stable and fully understand their role in the gestational surrogacy process. Potential gestational surrogates who fail to meet standards for their physical and mental health are not allowed to proceed through the process to avoid putting them and the baby at risk of harm.

A study was published earlier this year in MEDICINE & HEALTH which looked at 55 peer-reviewed published studies of the physical and mental health outcomes for both gestational surrogates and the children they carried. The research finds that children born from surrogacy have medical outcomes comparable to the results of children born from assisted reproduction technology such as IVF and oocyte donation. The psychological well-being of children whose mother had been a surrogate mother between 5 and 15 years earlier was found to be good. No major differences in psychological health were found between intended mothers, mothers who conceived using other types of assisted reproduction technology and mothers whose pregnancies were the result of natural conception.

In conclusion, there may be isolated anecdotal reports of complications for either a gestational surrogate or a child born from a surrogacy arrangement. However, the medical literature finds that gestational surrogates who participate in supervised surrogacy arrangements that meet medical and mental health standards face no increased risks to either their physical or mental health. These results are the same for children born from gestational surrogacy. ACOG encourages the Commission to recommend the Legislature enact legislation that regulates surrogacy in Minnesota to assure optimal physical and mental health outcomes for both gestational surrogates and the children born from these arrangements. The current lack of regulation in Minnesota increases the physical and mental health risks to both surrogates and children born from surrogacy.