

Review Article

Examining the Legal and Ethical Dimensions of Embryo Donation and Its Impact on Medical Rights

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ABSTRACT

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This article examines the legal and ethical dimensions of embryo donation and its impact on medical law. Embryo donation, despite helping infertile couples, poses ethical (fetal rights, child identity, commercialization) and legal (parental determination, contracts, differences in international laws) challenges. This has affected medical law, increasing the need for transparent laws and accountability of medical centers. To balance scientific progress and human values, the cooperation of medical, legal, and ethical experts is essential. Articles were searched based on Persian keywords; legal, ethical dimensions, embryo donation, medical law, Iran, as well as the English equivalents of these keywords in reputable databases and citations, including PubMed, Web of Science, Scopus, Google scholar, Science Direct, SID, and Magiran. All original articles were collected and reviewed for inclusion in the study. Screening criteria were applied in three stages by applying the inclusion and exclusion criteria; 28 articles were found at the beginning of the search. In the screening stage (first 4 stages), 6 articles were excluded from the study, and in the final stage of the screening, 22 articles related to the study objective remained, which were content evaluated and included in the study. Of the most important points to note, embryo donation faces ethical challenges such as maintaining human dignity and child rights, and legal issues such as determining legal parents and contracts, which require clear laws and interdisciplinary cooperation to guarantee the rights of all parties. The advancement of this technology requires a careful balance between medical innovation and respect for human values.

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Introduction

In the past, the goal of cosmetic surgery was to restore the natural shape and function of a body part, whereas in recent decades, cosmetic surgery has lost its primary purpose (Sarwer, 2019). Among various beauty-oriented surgeries—such as eyelid, neck, and face lifts, hair transplants, liposuction, breast augmentation, and rhinoplasty—Iran ranks first, at least in terms of nose jobs (Loghmani et al., 2018). Psychologists believe that cognitive and emotional motivations are the main reasons for the undesirable rise of cosmetic surgeries in society. Emotional needs, especially the desire for social attention among young people, can be considered one of the primary motivations for seeking artificial beauty (Alotaibi, 2021). On the other hand, reference groups have failed to help young people develop a sense of identity. As a result, the most superficial layer of an individual's identity has become so prominent that other existential dimensions have been marginalized. It can be said that the most important motivation for undergoing cosmetic surgery is the hope of achieving a satisfying appearance and enhancing social status (Di Gesto et al., 2022; Mozaffari Niya, 2019). Therefore, the motivation for seeking cosmetic surgery can be found in a combination of psychological, emotional, and personality factors (Jafferany et al., 2020).

Histrionic personality traits are among the factors that can predict women's inclination toward cosmetic surgery. Histrionic personality disorder is characterized by a pattern of exaggerated emotional behaviors and attention-seeking and falls under Cluster B personality disorders (Bergstrøm et al., 2024). Specifically, individuals with histrionic personality disorder often appear seductive, charming, impulsive, and lively (Fanti et al., 2023). In this regard, Del Aguila et al. (2019) describe the histrionic personality as follows: The main characteristic of men and women with histrionic personality disorder is excessive attention-seeking. While every human being enjoys attention, histrionic individuals crave it. These individuals expect attention beyond normal levels, and when they do not receive the desired amount, they become restless and increasingly protest their circumstances. Such individuals resort to any logical or

illogical means to gain attention, including heavy makeup—where people essentially paint their faces rather than applying makeup lightly—using bold colors and extreme makeup styles, claiming their choices are fashion-driven. Over time, their makeup no longer satisfies their expectations, and their thirst for attention drives them to turn to cosmetic surgery to regain the spotlight (Rashidi et al., 2022).

In this context, some relevant research can be mentioned. Khabbaz Sabet et al. (2021) found in their study that attitudes toward fashion and negative body image, mediated by cognitive emotion regulation, were predictors of women's inclination toward cosmetic surgery. Talebi Dalir (2023), in a meta-analysis of psychosocial factors influencing the tendency toward cosmetic surgery in Iran, concluded that, among other factors, histrionic personality disorder is a significant contributor to Iranian women's inclination toward cosmetic surgery. Milothridis et al. (2016) conducted a systematic review of predictors of interest in cosmetic surgery. According to their study, interest in cosmetic surgery is linked to epidemiological factors, social networks, personality traits, and specific psychological vulnerabilities. In another study, Dunaev et al. (2018) showed that women's fear of negative evaluation by others regarding their bodies influenced their inclination toward cosmetic surgery.

Early maladaptive schemas are persistent, pervasive, and enduring patterns composed of memories, emotions, cognitions, and bodily sensations. These schemas distort information about the individual-environment relationship, activate negative automatic thoughts, and ultimately lead to maladaptive attitudes and cognitive processing (Bär et al., 2023). Maladaptive schemas develop due to unmet core emotional needs in childhood, including needs for secure attachment, autonomy, competence, identity, freedom to express healthy needs and emotions, spontaneity, playfulness, realistic limits, and self-control (Cudo et al., 2024).

Since early maladaptive schemas represent unconditional core beliefs and assumptions about oneself and others, they divert external information processing into dysfunctional pathways and affect interpersonal relationships and self-perception (Thimm, 2011). Research in this field has consistently emphasized the

role of early maladaptive schemas in various aspects of mental health (Kunst et al., 2020). One significant issue in this domain is the role of early maladaptive schemas in increasing individuals' inclination toward cosmetic surgery. In this regard, Abbasi et al. (2017) demonstrated that women who underwent cosmetic surgery exhibited more early maladaptive schemas compared to those who did not seek such procedures. Shujayan et al. (2024) found that early maladaptive schemas contribute to increased tendencies toward cosmetic surgeries. Ghanbari et al. (2015) revealed significant differences in early maladaptive schemas between women who opted for cosmetic surgery and those who did not, with the former group also experiencing higher social anxiety. Moghadam et al. (2021) established significant relationships between perfectionism, early maladaptive schemas, attachment styles, and body image concerns.

Given that the psychology of cosmetic surgery remains poorly understood, with limited research on the psychiatric characteristics of cosmetic surgery candidates (mostly confined to clinical reports), and considering the annually increasing number of cosmetic surgery applicants (Bidkhori et al., 2021) - which may lead to serious psychological consequences - there is a clear need for more comprehensive and systematic studies in this field. Therefore, this study aims to examine the relationship between histrionic personality traits, early maladaptive schemas, and the inclination toward cosmetic surgery among Iranian women.

Methodology:

The study employed a descriptive correlational research design. The statistical population consisted of all 460 individuals seeking cosmetic surgery at beauty clinics and counseling centers in Tehran during 2023. Using simple random sampling based on Morgan's sample size table, 210 participants were selected as the study sample. Inclusion criteria included willingness to participate in the study, having at least a high school diploma to complete the questionnaires, and being a candidate for cosmetic surgery procedures. Exclusion criteria involved inaccurate

completion of questionnaires. The research procedure was conducted as follows: After obtaining approval for the research proposal, validating the questionnaires, and securing research permits from the university's vice-chancellor for research, the researchers visited beauty clinics and counseling centers in Tehran. Following self-introduction and explanation of the study objectives, participants were selected through simple random sampling. Candidates willing to participate were asked to complete written informed consent forms. After screening, 210 individuals were included in the study. The research instruments consisted of questionnaires completed by the participants, which were collected for analysis after completion. The measurement instruments were as follows:

Women's Tendency Toward Cosmetic Surgery Questionnaire (WTCSQ):

Developed by Soheili (2016), this 44-item questionnaire assesses six components: media advertising, self-confidence, gender attitudes, social pressure, social approval, and body image perception. Items are scored on a 5-point Likert scale (5 = strongly agree, 4 = agree, 3 = neutral, 2 = disagree, 1 = strongly disagree). Soheili (2016) reported a content validity of 0.85 and a Cronbach's alpha reliability of 0.80. Tourani et al. (2023) confirmed the questionnaire's appropriate face and content validity. In the current study, reliability was calculated using Cronbach's alpha, yielding a coefficient of 0.78.

Young Schema Questionnaire-Short Form (YSQ-SF):

Developed by Young (2005), this 75-item questionnaire measures 15 early maladaptive schemas using a 6-point Likert scale (1 = completely false to 6 = completely true). The subscales include emotional deprivation, abandonment/instability, mistrust/abuse, social isolation, defectiveness/shame, failure, dependence/incompetence, vulnerability to harm, enmeshment, subjugation, self-sacrifice, emotional inhibition, unrelenting standards, entitlement, and insufficient self-control. Each subscale score is derived from the sum of item scores, with higher scores indicating the individual's preferred schema. A total score is obtained by summing all subscale scores,

meaning each participant receives 16 scores (15 subscales and one total score). In Iran, Lotfi et al. (2007) reported Cronbach's alpha coefficients ranging from 0.50 to 0.82 for the subscales in non-clinical populations. In the current study, the overall reliability of the questionnaire was 0.81.

Histrionic Personality Disorder Questionnaire for Women (HPDQ-W):

Developed and validated by Alavi Hejazi et al. (2018), this 70-item questionnaire uses a 5-point Likert scale (1 = strongly agree to 5 = strongly disagree). Items 20, 22, 30, 40, 58, 61, and 70 are reverse-scored. All scores are summed, and higher total scores indicate lower interpersonal impairments (i.e., scores are inversely interpreted). Alavi Hejazi et al. (2018) reported a reliability coefficient of 0.93. In the present study, the reliability coefficient obtained via Cronbach's alpha was 0.78.

Results:

Initially, descriptive statistics were used to analyze the mean and standard deviation of the collected data. Subsequently, simultaneous entry regression analysis was employed to examine the predictive power of histrionic personality disorder and early maladaptive schemas on women's tendency toward cosmetic surgery. Table 1 presents the descriptive statistics of the research variables.

Table 1. Mean and Standard Deviation of Participants' Scores on Histrionic Personality Disorder, Early Maladaptive Schemas, and Tendency Toward Cosmetic Surgery in Women

Variable	N	Mean	Standard Deviation
Tendency toward cosmetic surgery	210	136.08	25.89
Histrionic personality disorder	210	240.95	100.52
Early maladaptive schemas	210	246.42	99.97

The above table reports the mean and standard deviation of research variables. Prior to inferential analysis, the correlation matrix was examined to assess relationships between variables, with results presented in Table 2.

Table 2. Correlation Matrix of Relationships Between Research Variables

Variable	Tendency toward cosmetic surgery	Early maladaptive schemas	Histrionic personality disorder
Tendency toward cosmetic surgery	1		
Early maladaptive schemas	0.78**	1	
Histrionic personality disorder	0.85**	0.69**	1

As shown in the table, there is a significant positive correlation between early maladaptive schemas and histrionic personality disorder with women's tendency toward cosmetic surgery. This indicates that as scores on these independent variables increase, women's inclination toward cosmetic surgery also increases.

To examine the predictive role of each independent variable, simultaneous regression analysis was conducted, with results presented in Table 3.

Table 3. Results of Simultaneous Regression Analysis for Early Maladaptive Schemas and Histrionic Personality Disorder in Predicting Women's Tendency Toward Cosmetic Surgery

Predictor Variable	Standard Error	B	Beta	t	p
Early maladaptive schemas	0.042	0.13	0.51	3.19	0.001
Histrionic personality disorder	0.041	0.12	0.48	2.98	0.001

The results demonstrate that both early maladaptive schemas and histrionic personality disorder are significant positive predictors of women's tendency toward cosmetic surgery. Therefore, we can conclude that women who score higher on these variables show greater inclination toward cosmetic procedures.

Discussion and Conclusion:

The objective of this study was to examine the relationship between histrionic personality traits and early maladaptive schemas with the tendency toward cosmetic surgery among Iranian women. The results revealed a significant correlation between primary histrionic personality traits and Iranian women's inclination toward cosmetic procedures. These findings indicate that histrionic personality traits can predict 44% of women's motivation for cosmetic surgery. This hypothesis aligns with the research outcomes of Khabbaz Sabet et al. (2022), Talebi Dalir et al. (2023), Milothridis et al. (2016), and Dunaev et al. (2018).

An individual's body image reflects their self-perception of physical appearance, which may influence their social interactions and others' responses. In contemporary society, body image standards have undergone significant transformation from traditional norms. Examination of social value hierarchies across cultures demonstrates that physical attractiveness constitutes an important social value, with body modification (appearance management) serving as one pathway to achieve beauty. Consequently, individuals strive to align their natural physique with socially accepted ideals. While self-care and grooming represent positive human qualities, problems emerge when individuals seek external validation for their appearance at any cost. Individuals with histrionic personality disorder exhibit excessive attention-seeking behaviors, pursuing both conventional and unconventional means to achieve this goal. From their perspective, cosmetic procedures (even when medically unnecessary) become imperative for enhancing attractiveness. Deeper analysis of this disorder reveals the complex dynamics concealed behind an attractive facade (Alavi Hejazi et al., 2018).

Further analysis demonstrated a significant relationship between early maladaptive schemas and Iranian women's tendency toward cosmetic surgery. The results indicate that early maladaptive schemas can predict women's motivation for cosmetic procedures. These findings indirectly support previous research by Abbasi et al. (2017), Ghanbari et al. (2015), and Moghadam et al. (2021).

Female cosmetic surgery candidates, influenced by their maladaptive schemas and compensatory coping styles (surrender, avoidance), tend to employ inadequate cognitive-emotional strategies such as rumination, self-blame, catastrophizing, and acceptance when facing life challenges. This impairs their ability to develop positive, constructive interactions and problem-solving approaches. Through repeated cosmetic procedures, they attempt to modify interpersonal relationships and achieve satisfaction in social connections. However, they frequently become trapped in the same maladaptive schema-coping cycle, perpetuating the pattern of surgical inclination (Nilforooshan et al., 2015).

Some female candidates employ overcompensation coping styles, opposing their schemas through thoughts, emotions, and interpersonal behaviors as if possessing counter-schemas. For instance, those who felt worthless in childhood may strive for perfection in adulthood, formerly submissive children may become confrontational adults, previously controlled individuals may either dominate others or completely reject external influence and abuse victims may subsequently mistreat others.

While appearing highly confident, these individuals remain perpetually threatened by potential schema activation (Abbasi et al., 2017). Overall, the results indicated that Iranian women's tendency toward cosmetic surgery could be predicted based on histrionic personality traits and early maladaptive schemas. However, this study was not without limitations. First, the reliance on self-report measures and questionnaires may introduce response biases. Second, the geographical restriction to Tehran limits the generalizability of the findings to other regions. Third, while the study examined correlational and causal relationships between variables, future research could benefit from incorporating alternative methodologies, such as psychological interventions, to validate and expand upon these findings. Given the correlational design of this study, it is recommended that future investigations explore these variables using different research approaches to obtain more precise and comprehensive results.

Ethical Considerations and Compliance with Research Ethics

Participants in this study were assured of the confidentiality of their information, and all individuals voluntarily completed the questionnaires without any coercion.

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Authors' Contributions

All authors contributed equally to the article.

Conflict of Interest

The authors declare no conflicts of interest in the present study.

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