

# A Precious Goal

Jewish couples navigate the turbulent waters of infertility.

Ronelle Grier Special to the Jewish News aura B. never considered she might not be able to have children of her own. At 33, after four years of trying, she realized it might not be just "a matter of time."

"My husband and I always wanted children," she said. "When we began to realize that this was something we couldn't just take for granted, the longing began to overwhelm us.

"I would have considered adoption, but my husband wanted to continue his family's genetic line. I began to worry that if I was unable to conceive, I would lose my husband. It was a constant battle to maintain my self-esteem."

Although infertility is a medical problem, it carries a stigma of shame and self-blame, which is why Laura and others requested that their real names be withheld from this article.

"It is every infertile woman's secret belief that she is somehow at fault," said Rabbi Lauren Berkun of Congregation Shaarey Zedek in Oakland County. "This is even reinforced in the Torah, when Hagar the maidservant criticizes Sarah, Abraham's wife, for her barrenness."

Laura and her husband persisted. After a disappointing
experience with the fertility drug
Clomiphene, followed by a multitude of tests and medical procedures, including laparoscopic surgery, they decided to try in vitro
fertilization or IVF. During the
second cycle, she conceived and,
a few years later, Laura repeated
the procedure and had her second
child. For couples like Laura and
her husband, the cost of conception is high — financially, physi-

cally and emotionally.

IVF procedures run approximately \$12,000, even more for ICSI, a technique that involves intracytoplasmic sperm injection directly into the egg. ICSI has a significantly higher success rate, especially when sperm problems are present. Fertility drugs, especially the injectable hormones, can cost upwards of \$1,000 per month. Insurance coverage varies; some plans pay for diagnostic procedures and lab tests, but most do not cover IVF.

Laura estimates they spent almost \$50,000 on infertility treatment, including all the preliminary work-ups, medications and IVF procedures for both pregnancies. In addition to several invasive procedures, she had to go through 12 weeks of painful intramuscular injections each time. Emotionally, the constant cycle of rising and falling hopes each month as she waited for pregnancy to occur took its toll. She survived by immersing herself in work and seeking support from close friends and a professional therapist.

"The emotional pain felt most searing around the High Holidays," she said. "Perhaps it was hearing about God's mercy on the barren Hannah [giving her Samuel], or maybe it was the yearly ritual of calling all the babies born in the preceding year up to the bimah."

The American Fertility Association estimates that 10 percent of the childbearing population in the United States experiences some form of infertility. About 40 percent of these cases can be attributed solely to the male, such as low sperm count or poor motility. Another 40 percent are attributable to the woman, including insufficient or poor quality eggs, blockages of the fallopian tubes or uterine abnormalities. The remaining 20 percent involve a combination of male and female issues or are undiagnosed. No statistics exist on the incidence of infertility in the Jewish community.

According to Dr. Mersol-Barg, a reproductive endocrinologist and fertility specialist in Birmingham, common treatments include oral medications, such as Clomiphene and Metformin, or FSH hormone injections to stimulate ovulation; intrauterine insemination (IUI) using sperm from the husband or a donor; or surgery to repair internal scarring around the fallopian tubes and ovaries.

Because both the quantity and quality of a woman's eggs declines with age, Dr. Mersol-Barg urges women to seek treatment sooner rather than later,

"A woman under 35 should seek treatment if her cycle is normal and she has been trying to conceive for a year," he said, even sooner if her periods are irregular. Women between 35 and 40 should see a specialist after trying for six months, assuming they have no other problems, and women who are 40 or older should go the minute they even *think* about becoming pregnant."

### Infertility And Judaism

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## Tips To Maximize Fertility

- Minimize stress. Yoga, deep breathing, regular exercise, talking with supportive friends or a therapist can all be helpful.
- Limit caffeine and alcohol. This applies to men, also, as heavy drinking can cause sperm abnormalities.
- Don't smoke. It can increase the chance of miscarriage and lower the success rate of IVF.
- Eat a healthy, balanced diet high in fresh vegetables, fruits and fiber, and low in fat and sugar. Being too thin can be detrimental to pregnancy.
- Exercise regularly but moderately. Don't drain your energy or compromise your health.
- Avoid self-prescribed herbal remedies. St. John's Wort can have a negative effect on male fertility. Check with your doctor.
- Avoid some prescription drugs.
   They can affect ovulation and male fertility. Tell your doctors you are trying to conceive.
- Avoid environmental hazards such as pesticides, paint thinners and other chemical solvents.
- American Fertility Association www.theafa.org

## **Infertility Resources**

These organizations, Web sites and books provide information and support relating to infertility:

The American Society for Reproductive Medicine: www. asrm.org

The American Fertility
Association: (888) 917-3777
www.theafa.org

Resolve, the National Infertility Association: (888) 623-0744 www.resolve.org

A T.I.M.E. (A Torah Infertility Medium of Exchange): (718) 486-7662 www.atime.org

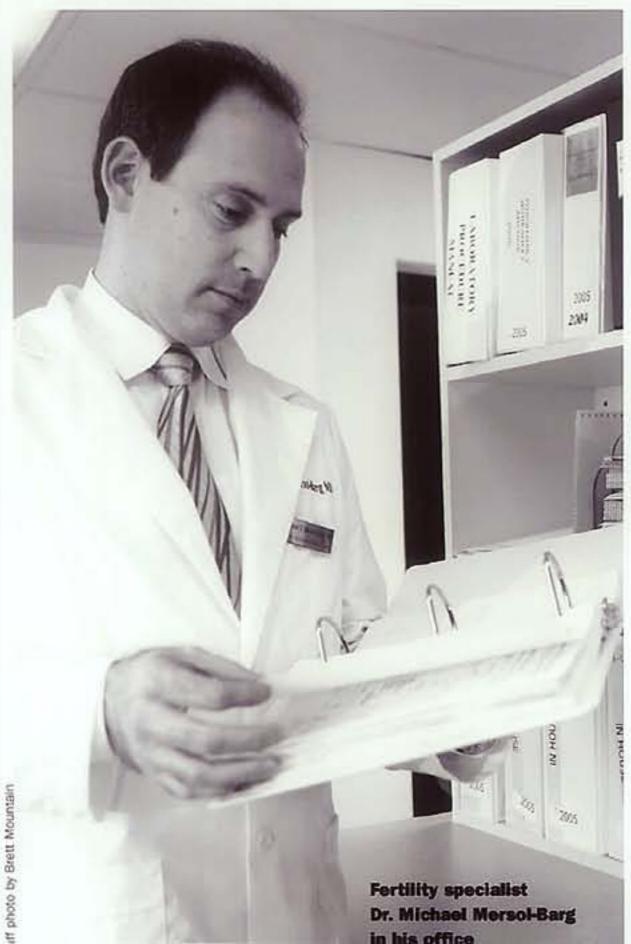
And Hannah Wept: Infertility, Adoption and the Jewish Couple by Michael Gold

Be Fruitful and Multiply: Fertility Therapy in Jewish Tradition by Richard V. Grazi

Tears of Sorrow, Seed of Hope: A Jewish Spiritual Companion for Infertility and Pregnancy Loss by Rabbi Nina Beth Cardin

Jewish Family Service (JFS)
provides help for those dealing with perinatal loss, infertility, adoption and other issues.
Support groups, referrals and counseling are offered in Oak Park and West Bloomfield.
Contact Ellen Yashinsky-Chute at (248) 592-2300 or visit www.





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Infertility is a recurring theme throughout the Torah, beginning with Abraham's wife, Sarah, who was "barren" until she gave birth to Isaac at almost 90 years old. Matriarchs Rebecca and Rachel struggled with infertility, as did Hannah, whose poignant prayer has become a well-known part of Jewish scripture.

"Death is mourned, divorce is at least acknowledged, but infertility is suffered in silence," said Rabbi Berkun. "There is no ritual for miscarriage or even stillbirth. The Torah reminds us that we have to work in partnership with God. Prayer and Jewish meditation can increase a couple's connection to God and to each other."

Like any crisis or major challenge, infertility can test the bonds of marriage, bringing a couple closer together or driving them apart.

Dr. Jackie Raznik Shapo, an Ann Arbor therapist who specializes in infertility issues, says it is essential for couples to view this as a joint problem and confront it together, rather than trying to place blame on each other.

"I encourage couples to engage in enjoyable activities together, such as exercise, movies, dining out or sex, even if it's hard to muster the motivation," said Dr. Shapo. "A relationship can survive the challenge of infertility and even become stronger, but it does require effort."

This approach worked well for Tracy Bruce-Harrison and her husband, Don Harrison, of Shelby Township. Their 14month-old son, Grant, was conceived through an ICSI procedure performed by Dr. Mersol-Barg, and their second child, who was conceived naturally, is due at the end of the month.

"We actually managed to make it fun," said Don. "Whenever Tracy was scheduled for a procedure, I'd plan something special for us to do afterwards, like going out for lunch or dinner or to the park. I gave her backrubs, and I made her laugh a lot."

Chana K., who is Orthodox, experienced the personal pain of infertility, along with the communal pressure to begin having children right after marriage. When treatment was unsuccessful, she and her husband adopted a son but did not give up the dream of having their own biological child. Finally they adopted another son.

"There was a lot of pressure, and our community was not terribly understanding. But I thank God that I went through those bumps so I could help the next person," she said. She says the lack of openness within her community ended up strengthening her marriage.

"Because we didn't have any outside support, we turned to each other, which was very positive," said Chana, who since has helped several other infertile Orthodox couples go through the adoption process.

Dr. Shapo advises couples to get as much information as possible, to remain positive, yet realistic, to practice gratitude and forgiveness, and to treat themselves and each other with gentleness and compassion. She adds that it's important to acknowledge and let go of grief, which is a normal part of the process.

Applying ancient Jewish law to modern technology poses a challenge for religious leaders and couples who want to conceive without violating any commandments.

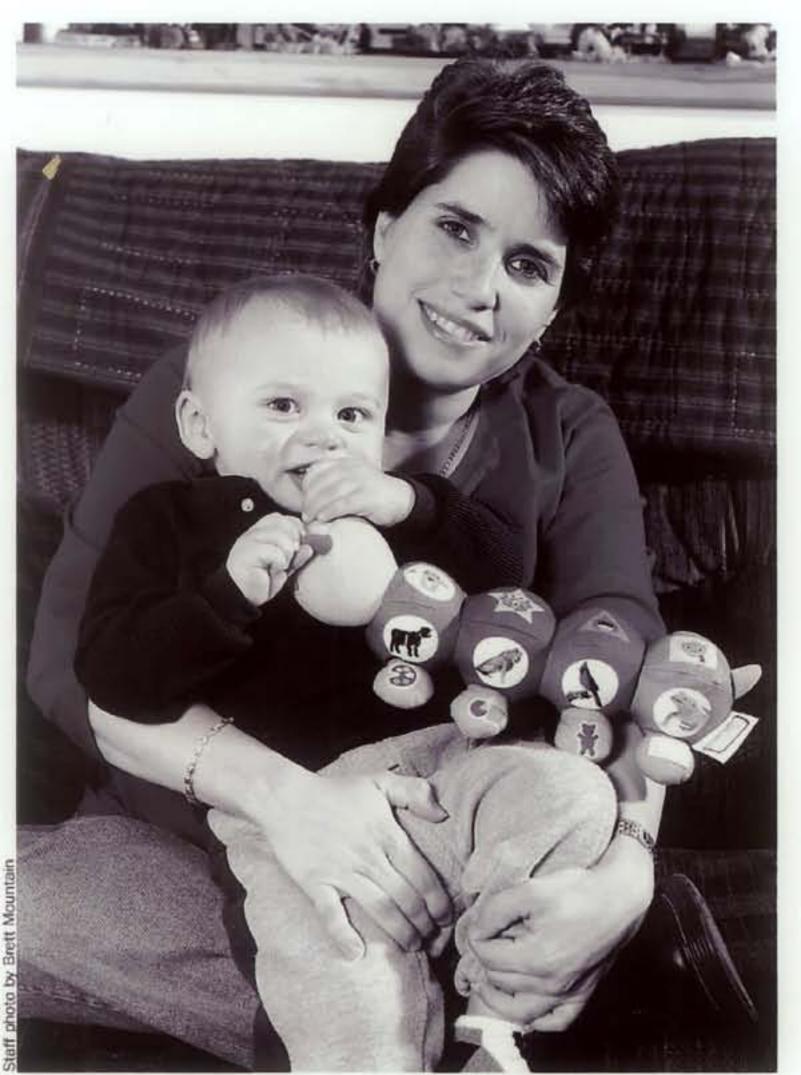
According to Rabbi Asher
Eisenberger of Congregation
Agudas Yisroel Mogen Abraham
in Southfield, the Orthodox
movement generally condones
the use of fertility drugs and
procedures such as IVF and ICSI,
but draws the line when it comes
to using donor eggs and sperm or
surrogates.

"We try to make it as easy as possible for a couple to conceive within the context of Jewish law," said Rabbi Eisenberger, who is also a faculty member of Yeshiva Beth Yehudah in Southfield.

"There is such an array of options today; a couple should always consult with their rabbinic guide to decide what's right for them."

The Conservative and Reform movements generally encourage the use of any assisted reproductive technologies that will enable a couple to have children.

"Bearing children is a precious goal in Jewish tradition, and procedures like donor insemination allow a couple, who might otherwise be childless, to fulfill this great mitzvah," said Rabbi Rachel



Tracy Bruce-Harrison of Shelby Township holds her 14-month-old son, Grant. Tracy and her husband, Don, are expecting another child soon.

Shere of Adat Shalom Synagogue in Farmington Hills.

#### **New Avenues**

Alternative modalities, such as acupuncture and yoga, are becoming increasingly popular.

Julie Silver, a board-certified acupuncturist in West Bloomfield, sees about 30 women a week for infertility, many of whom seek acupuncture as a complement to more traditional treatments such as fertility drugs or IVF. She estimates that about 60 percent of these patients eventually become pregnant.

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"Chinese medicine focuses on the body as a whole," said Silver, who also treats men with infertility issues. "Healing one area often heals other areas. Also, fertility treatment can be stressful, and acupuncture is very relaxing."

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Because stress can upset the body's hormonal balance, reducing stress through the practice of yoga can improve a woman's chance of becoming pregnant,

according to several studies

cited in a recent issue of the Yoga

Journal.

Rabbi Berkun recommends yoga, along with prayer and meditation, both for the woman trying to become pregnant and the couple.

"Yoga is wonderful for relieving stress and anxiety," she said.

"As a Jew, there was a lot of emphasis on education and accomplishment," said Laura. "I waited until my 30s so that I could fulfill myself in other ways. I found that all choices have costs. In the end, will delaying childbirth for career advancement be the most 'intelligent' choice for the future of the Jewish people? I wonder."

Dr. Mersol-Barg says, "There is great hope for couples suffering from infertility. The key to success is seeking care in a timely manner. Overall, about 75 to 80 percent of couples seeking fertility therapy succeed in their quest for a biological child."