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MARCH 2009

Fertility & Pregnancy

YOUR GUIDE TO FERTILITY & PREGNANCY



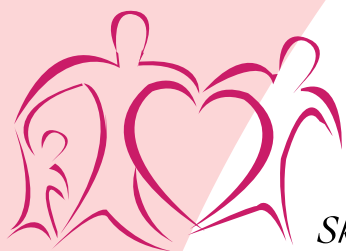
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MEDIA PLANET

FERTILITY & PREGNANCY

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Facing Change

BY: KEN MOSESIAN, EXECUTIVE DIRECTOR OF AMERICAN FERTILITY ASSOCIATION



Last year I wrote an article addressing how issues surrounding the topic of infertility would only become more intense in the coming year. What I didn't realize is the degree to which the infertility conversation would enter mainstream media, and how quickly.

Thus far in 2009, the topic of infertility is everywhere. Whether it's the mother of eight babies in California or a 60 (plus) year-old woman becoming pregnant through in-vitro fertilization (IVF), infertility has become part of most people's daily listening and reading, if not daily conversation.

As I write this in mid-March, I'm wondering what's going to happen this week when the Georgia State Senate considers a "personhood" bill, which defines life at the moment of conception and ascribes all human rights to the embryo from that point forward. The bill would make anyone who damages or destroys an embryo criminally liable, subject to both fines and imprisonment. It

would further forbid any disposition of unused embryos except the option to donate them to another couple. The option to freeze embryos for use at a later date, donate them to scientific research, or dispose of them would be illegal if this bill becomes law.

There are several other bills floating around state legislatures right now. Many are designed to dictate to physicians and patients having difficulty conceiving how many embryos they can create, how many they may transfer, and what the disposition of any unused embryos must be.

New questions are being raised about the use of sperm taken posthumously from a male for the purpose of continuing a family line or ensuring inheritance. Who has the final say in these matters?

Egg freezing is emerging as the most asked about fertility topic of the year. Women and men want to know if eggs can be frozen for use at a later date, similar to what is currently being practiced with unused embryos. If so, what's the success rate? Is this something we should be encouraging? Are there risks? What are they?

Egg freezing, taking sperm from dead men, legislators dictating what physicians and patients can and can't do, and the very real possibility of microscopic tissue being called a "child" are just some of the

issues The American Fertility Association (The AFA) is helping consumers sort through as they begin or find themselves in the midst of their family building journeys.

7.3 million American women experience difficulty conceiving or bringing a pregnancy to term. Fertility challenges among men may be just as high, as male factor infertility is the sole or contributing cause in about 40% of infertile couples. We are, indeed, faced with a significant challenge.

In addition to providing education and support for those facing fertility challenges, this year, The AFA began an infertility prevention program in which we take education to young women at places they already frequent – like nail salons and health clubs.

Why? There are types of infertility that can be prevented. Avoiding environmental toxins, taking into account the biological clock (fertility begins to decline at age 27 for women and 35 for men) and preventing STD's are all things that can keep options open for individuals and couples if and when they decide to have children. As everyone knows, prevention, when possible, is the best cure.

Our mission is simple: prevent infertility whenever possible and support people in building

families of choice. To learn more,


visit us at www.theafa.org.

The American Fertility Association, a 501 (c) (3) national non-profit organization is a lifetime resource for infertility prevention, reproductive health and family building. AFA services and materials are provided free of charge to consumers and available to everyone without reservation.

These services include an extensive online library, monthly online chats, telephone and in-person coaching, a resource directory, hosted message boards, daily fertility news and a toll-free support line.

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How to Find an Egg Donor

You've decided to have a child with help from an egg donor, but are overwhelmed by where to begin. With so many agencies to search the process can quickly become time consuming and costly.

To make the task easier, three competing agencies have teamed up to create the Donor Network Alliance, a collection of egg donor agencies from around the country. For \$100 for two weeks, intended parents have access to mini-profiles of anonymous egg donors on www.donornetwork-alliance.com.

DNA was formed by two Chicago-based agencies, Alternative Reproductive Resources and ConceiveAbilities, both of Chicago, and The Center for Egg Options of Northbrook, IL. "We got the idea from the real estate multiple listings and decided to get together and create a database with basic information about each donor," says Robin von Halle, founder and president of Alternative Reproductive Resources. "The intended parent can go to just one place, kind of like one-stop shopping."

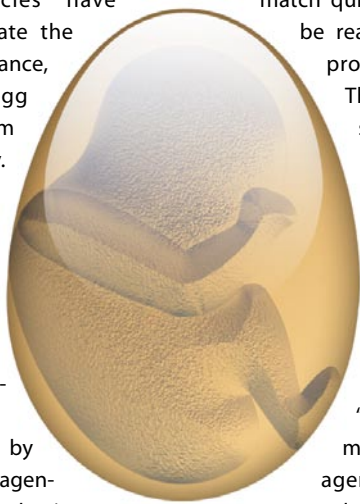
Having egg donor profiles in one place will simply the search considerably, says Nazca Fontes, president of ConceiveAbilities. "All intended parents

want to find the right donor who they feel reflects who they are," she says. "Endless searching through multiple agencies detracts from the optimism of pursuing the successful option of egg donation. By removing unnecessary barriers, patients will find the right match quicker and easier and be ready to start the IVF process much sooner. The bottom line is a speedier pathway to parenthood."

Nancy Block, R.N. president of The Center for Egg Options, says DNA is a great service for egg donor agencies, too. "We have promotional materials ready for the agencies to download and distribute to the physicians they work with, which can only bring in more business for them," she says.

Agencies must also meet certain standards, she says. "There are a minimum number of donor cycles each member must have completed and we do require each to sign an agreement which states, among other things, that the members abide by ASRM (American Society of Reproductive Medicine) guidelines," Block says.

The alliance expects to house at least 10,000 donor profiles by the end of its first year. Already, about 20 agencies have expressed an interest.



Cryopreservation

In recent years, the number of pregnancies resulting from the fertilization of frozen eggs has increased. This success is due, in large part, to a better understanding of the physiology of eggs as well as advancements leading to improved freezing technologies.

One group that benefits from this technology is women who have been diagnosed with cancer and want to preserve their fertility. And now EMD Serono of Rockland, MA, has created the Human Oocyte Preservation Experience (HOPE) Registry, a comprehensive national patient registry in the U.S. that is designed to study the safety and efficacy of egg freezing procedures, or oocyte cryopreservation. "We are thrilled to play a major role in accumulating

data on this new fertility treatment," says Fereydoun Firouz, President and CEO of EMD Serono. "As a leader in fertility health, EMD Serono is proud to support the HOPE Registry to evaluate oocyte cryopreservation techniques that may prove to be a viable option to assist women in preserving their fertility." Information gleaned from the registry will provide insight into the technology of egg freezing as well as the health of children born by the procedure. Although egg freezing remains experimental, estimates show that almost 500 children have been born worldwide using these techniques, and only four children had a genetic abnormality.

"Each year, more than 140,000 people

are diagnosed with cancer during their childbearing years," says Lindsay Nohr Beck, Founder and Executive Director of Fertile Hope, a nonprofit that provides reproductive information and support to cancer patients and survivors. "The HOPE Registry is expected to substantiate egg freezing as an option, so that fertility is one less obstacle these patients may need to overcome in fulfilling their dreams of becoming a parent and living the lives they imagined prior to their cancer diagnosis."

Beck herself is a cancer survivor who used egg freezing before having chemotherapy. Cancer patients should talk to their oncologists before considering the procedure.

Acupuncture

Modern medicine blames many factors for a woman's infertility, but traditional

Chinese medicine suggests the problem may be a cold uterus. That's where acupuncture can help, some experts say.

Acupuncture is an ancient form of Chinese medicine that dates back thousands of years. Tiny needles are inserted into corresponding points on the body, which opens up pathways, so that proper energy flow is restored. As a result, organs function better, sleep becomes more restful, and the ability to heal is improved. In women with infertility, acupuncture can help regulate menstrual periods, enhance ovary functions, balance hormones and relieve stress, which is believed to hamper fertility.

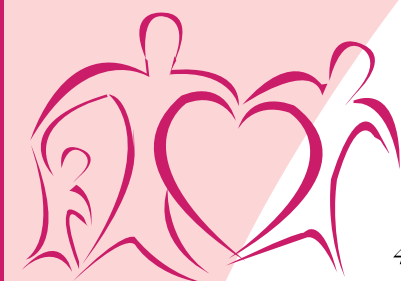
"Acupuncture improves the blood flow directly to the uterus, and makes the uterus warm," says Licai Yang, owner of Acupuncture Fertility Center in Chicago. "This is why a large percentage of our patients wind up getting pregnant naturally, and why some patients fail with IVF, only to get pregnant naturally later on."

Acupuncture also strengthens the energy in the uterus. "It becomes very easy to have a miscarriage if the uterus has less energy to hold," says Licai Yang, who runs three "Fertility Acupuncture Centers" in Illinois. "Acupuncture helps the uterus become strong enough to hold on to the fertilized egg and allow it to grow."

Science suggests that acupuncture can indeed play a part in overcoming infertility.

In fact, a 2002 study done in Germany compared two groups of women undergoing IVF.

Of those who got acupuncture, 43 percent became pregnant, compared with 26 percent of women who did not receive the treatment. Licai Yang, who has specialized in fertility acupuncture for 20 years, said she prefers to help patients get pregnant naturally and recommends acupuncture to any woman undergoing IVF.



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Gestational Surrogates: The Right Choice For You?

For some couples, the journey through infertility leads to a gestational surrogate, a woman who carries your child conceived by in vitro fertilization. Finding the right surrogate becomes another leg of that journey.

Before enlisting a gestational surrogate, it's important to know whether you're comfortable with the idea, says Robin von Halle, president and founder of Alternative Reproductive Resources in Chicago, an agency that helps connect intended parents with gestational carriers. "You have to ask yourself, 'Is this the right thing for me?'" von Halle says. "How am I about giving up this power? You also need to know if you can afford it." Enlisting a gestational surrogate isn't cheap, and depending on circumstances, can cost as much as \$100,000, which includes all expenses associated with the pregnancy.

Couples often turn to gestational surrogates when the intended mother can produce viable eggs but cannot carry the embryo due to an existing medical condition or other factors. In situations where the mother does not

have healthy eggs, an egg donor is used in conjunction with the surrogate. Men may require a sperm donor.

Gestational surrogates, von Halle says, are typically women who love being pregnant. They tend to be married, stay-at-home moms with two or three kids, and who need the extra income, which can be as much as \$30,000. "Most carriers are emotionally rewarded by the experience of helping an infertile couple realize their dreams of becoming parents," says Melissa B. Brisman, Esq., LLC, of Park Ridge, New Jersey, an attorney focusing her practice on reproductive law. Brisman says she helps find about 200 gestational carriers in a year.

Brisman says she begins her search for a gestational surrogate in one of 30 states where intended parents can get their names on the birth certificate. "That way, they don't have to adopt their own biological child," she says. Gestational carriers fill out lengthy applications and are interviewed before ever meeting the intended parents.

Gestational surrogates undergo physical exams to make sure they are healthy. In addition, they and

their partners must submit to a criminal background check. Brisman says she also sends a social worker to visit their homes.

Both the surrogate and her partner usually have psychological screenings too. "The most important thing we look for is a strong support system," von Halle says. "We often get a lot of single women, who have their moms or sisters around. They also can't be too needy. They have to have their own lives and not need a relationship with the intended parents or feel a strong need to attach."

To ensure that the arrangement is legally sound, intended parents also require assistance from lawyers. ARR is represented by the Chicago law firm of Ballard, Desai, Bush-Joseph & Horwich, leading specialists in reproductive technology law. As a lawyer, Brisman also drafts contracts and obtains court orders for all gestational carrier arrangements that her firm handles as well as for clients who need legal work only.



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Advances in IVF

Years ago, the idea that you could fertilize an egg outside the womb seemed a like distant dream and the stuff of science fiction. But assistive reproductive technology has come a long way, and advances in ART continue to reshape how infertile couples – as well as single-sex couples, single adults and cancer survivors – are able to enjoy the joys of parenthood.

According to Dr. Meike Uhler, M.D., a reproductive endocrinologist at the Fertility Centers of Illinois in Chicago, some of the latest developments in ART include:

* Third party reproduction. For some couples, attempting or achieving pregnancy requires outside assistance from another person. That person may be an egg donor, a sperm donor or a surrogate who agrees to implant a couple's embryo in her uterus during the nine months of gestation. "The process of using an egg or sperm donor, or surrogate has become much more common in recent years, particularly in Illinois which has more progressive surrogacy laws than many other US states," Dr. Uhler says. "Many people travel to Illinois from around

the country and overseas due to these relaxed laws."

* OncoVitrification. Women who are diagnosed with cancer often worry about the impact of treatments on their fertility. That's where OncoVitrification comes in. Vitrification, also known as egg freezing, allows a woman to freeze an egg before she is ready to get pregnant. That's what Susie Arhangelos of Saline, Michigan, did when she learned she had breast cancer in April 2007. "I was 37 at the time and didn't want the option to have more children taken away from me," she says. "I already have a son who is now six. My oncologist said 'You might want to harvest your eggs.'" Arhangelos liked having that option, and on May 6, 2007 — her 12th wedding anniversary — 12 eggs were retrieved from her ovaries, eight of them healthy. Nine days later, she started chemotherapy. Now, 38, Arhangelos says she and her husband are ready to start talking about having another baby. "For a cancer patient who is told these things are being taken away from you, having that option was wonderful," she says.

* Single embryo transfer. In the past,

it was common to transfer several embryos into a uterus during IVF. After all, transferring more embryos boosted the odds for a successful pregnancy. But these days, more patients are opting to transfer just one embryo as a way to limit the dangers associated with delivering triplets or more. "The rate of multiple births for ART is higher than that of the normal population," Dr. Uhler says. "Most of these are twin pregnancies. But if more than two embryos are transferred, the risk of higher order multiple pregnancies becomes a concern. Multiple pregnancies have increased risks for both mother and babies, particularly preterm delivery."

* Preimplantation Genetic Diagnosis (PGD). Some women experience recurrent miscarriages, several failed IVF cycles and unexplained infertility. PGD may be recommended if your physician suspects that these problems — or advanced maternal age — are the result of embryos being affected by genetic disease.

To help them pinpoint the problem, doctors can screen embryos for genetic abnormalities such as Down's syndrome and select the embryos to implant during

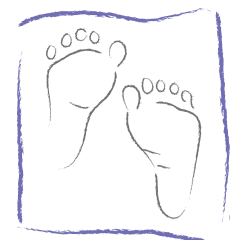
IVF. PGD testing can only be done during an IVF cycle where eggs and sperm have been united in the laboratory and have developed into embryos. But the technique is not without controversy. "There are some doctors out there who use this technology to pinpoint physical characteristics such as gender, hair color, eye color," Dr. Uhler. "It's highly controversial and a misuse of the technology." FCI, she says, offers preimplantation diagnosis for single gene defects and preimplantation genetic screening for chromosomal abnormalities.



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What to consider when using a Gestational Carrier

BY: MELISSA BRISMAN

Consider This

Many couples and individuals suffering from infertility are turning to gestational carriers to start or expand their families. Most gestational carriers enjoy being pregnant and are emotionally rewarded by helping the intended parent(s) realize their dreams, and receive compensation for this service.

The legal issues vary depending on the individuals involved. Some questions intended parent(s) need to ask are:

Where does your carrier reside and where will she deliver?

Intended Parent(s) must be fully informed of the state laws governing gestational surrogacy where their carrier resides. The issuance of birth certificates vary and certain conditions must be satisfied prior to placing the intended parent(s) on the birth certificate. Sometimes an adoption may be necessary for some parents

to obtain full legal custody of their own children.

Does the Gestational Carrier carry Medical Insurance?

Insurance is very costly and can be a significant issue. If your carrier has insurance, an exclusion of benefits for claims made for a gestational carrier pregnancy may exist. The medical bills can be overwhelming if the proper insurance is not in place. There are insurance agencies that will provide coverage for gestational carriers who lack such benefits. Money spent now could save thousands later.

Is the Gestational Carrier experienced?

There are many pros and cons to working with an experienced GC as opposed to working with a first-timer. While a gestational carrier who has been involved in this type of arrangement before has the experience and knowledge of the process, there are higher compensation amounts and additional fees

for related pregnancy events. A first time carrier will usually request lower compensation, however, she will not have the experience or knowledge of an experienced carrier

Why you Need a Contract.

An intelligently drafted contract between IP's and their GC will address all of the above issues and more. IP's MUST consult with a qualified attorney who practices reproductive law for their contract. This contract serves to protect the interests of all parties, and clearly states the obligations and responsibilities of each party. The GC and her partner/husband need independent legal counsel.

Once you have decided to pursue a gestational carrier arrangement the first step is to find a group like Melissa B. Brisman, Esq., LLC to help find a GC and prepare you for the exciting journey ahead. Our experienced staff is ready, willing and able to help you have a positive experience.

Are You In *The Know*?

Medical experts agree: if a couple hasn't conceived after a year of regular unprotected intercourse – six months if the woman is over 35 – then it's time to seek help from a medical specialist. That's the common definition of infertility, a problem that affects about seven million Americans.

But a survey of 714 women has found that most women wait longer than the recommended time before seeking medical advice. The survey, which was co-sponsored by Fertility LifeLines™, a free support service provided by EMD Serono, and Conceive Magazine, found that 64 percent of the women had been trying to conceive for a year or more, and 32 percent were waiting to seek medical help.

Although 86 percent of respondents knew at least one person who had trouble getting pregnant and 40 percent knew three or more people who did, 70 percent of the women surveyed were surprised when they started having trouble themselves.

The survey also revealed the overwhelming emotions associated with infertility. It found that 52 percent reported feeling stress, 44 percent felt

jealous about other's people's baby news, and 41 percent felt depressed or sad most of the time. Another 78 percent felt fearful, while 77 percent were angry some of the time. Fifty-four percent said they felt a loss of control at least some of the time.

Not surprisingly, women are desperate for information about infertility. Only about half felt the available information on infertility was adequate. Twenty-three percent felt there wasn't enough on emotional issues; 22 percent wanted more on dealing with stress, and 22 percent wanted more information for men.

To address that void, Fertility LifeLines™ and Conceive have created a free booklet called "In The Know: What No One Tells You About Fertility." The goal of the booklet was to address the many issues surrounding fertility concerns in a quick read, written in a friendly, candid girlfriend-to-girlfriend style," said Kim Hahn, founder and CEO of Conceive.

Patients and healthcare providers can order a complimentary copy of "In The Know" by registering at www.FertilityLifeLines.com or by calling 1-866-LETS-TRY (1-866-538-7879).

The Male Infertility Test

Infertility isn't just a woman's issue. For 20 percent of all couples, the problem is the man's, says the American Fertility Association. For another 30 to 40 percent of couples, the problem lies with both partners.

Men suspected of infertility typically undergo a semen analysis, which assesses count and quality. But sometimes, these men have problems with sperm motility – the sperm's ability

to swim to a waiting egg -- caused by sperm antibodies.

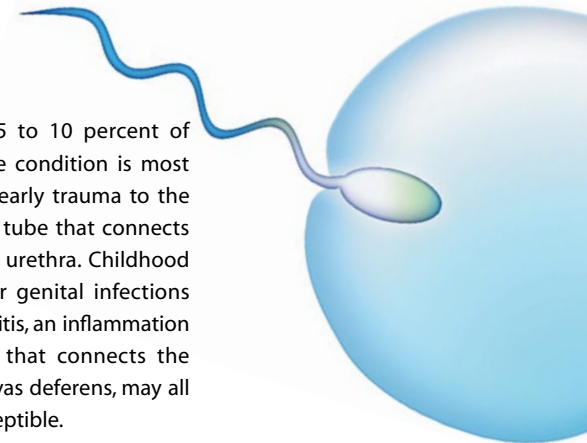
Jan Friberg, M.D., PhD., a reproductive endocrinologist in Chicago, offers a test that looks for these antibodies. The antibodies are proteins that attack sperm cells, causing them to clump and become inactive. "The problem is, men with sperm antibodies have normal sperm counts and with perfectly normal characteristics," Dr. Friberg says.

"Conventional tests miss the problem because they're done without observing the sperm sample for some time. Sperm antibodies don't immobilize sperm until several hours later."

Even sperm that do enter the cervix are rejected by defenses in the woman's body. "Each time they have sex, the sperm from a guy with antibodies will fail to penetrate," Dr. Friberg says.

Dr. Friberg says sperm antibodies

occur in about 5 to 10 percent of infertile men. The condition is most likely caused by early trauma to the vas deferens, the tube that connects the testes to the urethra. Childhood hernia surgery or genital infections such as epididymitis, an inflammation of the structure that connects the testicle with the vas deferens, may all make a man susceptible.



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Taking a Proactive Approach to Conception

When you're struggling to get pregnant, it might seem as if you're the only one who's having a tough time. But according to the American Fertility Association, 7.3 million women in the U.S. have some kind of difficulty trying to conceive.

Even the healthiest woman can take steps to improve her chances, says Ethan Lynette, a partner in Fairhaven Health, a specialty supplier of natural fertility and pregnancy products in Bellingham, Washington. Here's how:

* **Know your body.** Many women spend years trying to prevent pregnancy, but are at a loss when it comes time to start a family, says Amos Grunebaum M.D., director of obstetrics and the chief of labor and delivery at the New York-Presbyterian Hospital and the Weill Cornell Medical Center in

Manhattan. "Do you really understand your own cycle?" he asks. "Do you know when you ovulate? Do you know which are the only fertile days that you can achieve pregnancy? Has your partner been tested for sperm count, motility? These are basic questions, and surprisingly, many don't know the answers."

Learning when you're ovulating is critical. Ovulation occurs when the ovary releases an egg, which is then available for fertilization. Some at-home testing products like OvaCue and Fertile Focus, detect changes in the saliva. Other methods involve look for changes in urine. Ovulation can also be measured by taking your basal body temperature every morning – it rises about one degree after you've started ovulating.

Still another method of determining

fertility is to examine the cervical mucus. A woman can do that by using clean, dry fingers or toilet paper to collect and examine the mucus in her cervix, which changes throughout her cycle. During ovulation, the amount of cervical fluids increases significantly and resembles raw egg whites. L-arginine, an amino acid, can help promote the production of cervical mucus by stimulating the body to make nitric oxide, a natural vasodilator.

* **Get the right nutrients.** Any woman who is contemplating getting pregnant should start taking vitamins. "Many women don't realize that pregnancy and proper prenatal nutrition should optimally begin prior to your conception efforts," Grunebaum says.

Of special importance

is folic acid, a B vitamin that helps prevent neural tube defects like spina bifida. Other essential nutrients include iron, omega-3 fatty acids, calcium, magnesium and vitamins A, B6, B12 and E.

Certain herbal remedies may be necessary, too. Chasteberry, also called vitex, is an herb that may help restore hormonal imbalances. "It helps them get back on track and regulate their cycles, especially if they have PCOS (polycystic ovarian syndrome) or other hormonal problems," Lynette says.

Men dealing with infertility may benefit from natural remedies, too. More specifically, they may consider taking L-carnitine, an amino acid that may improve

a man's sperm count and motility.

* **Reduce stress.** While the science on whether stress can cause infertility is uncertain, one thing is for sure: stress can upset the menstrual cycle. Stress can also affect other aspects of health including diet and sleep.

To keep stress in check, look for healthy outlets such as yoga. "The benefits of yoga on stress reduction are well-established, and reducing anxiety about achieving pregnancy can actually increase chances of conception," says Kelly Andrews, founder and CEO of Fairhaven Health. Other outlets include tai chi, meditation, hobbies and spending time with friends.



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Fertility Health and Fitness

Corrina Utzinger had been trying to get pregnant for 18 months when she went to the Fertility Center of Illinois. After two failed IVF cycles, she joined a weekly class called Dealing with Disappointment at Pulling Down the Moon in Chicago, an integrative health care center for couples dealing with infertility. She also began getting weekly acupuncture treatments. Midway through, she became pregnant. She continued with acupuncture for her first trimester, and did yoga and meditation DVDs at home. She also got massages at Pulling Down the Moon through the rest of her pregnancy.

Today, Utzinger, 32, is convinced the holistic treatments helped. "Not only do I have a beautiful, healthy, four month old baby girl, but this was the first cycle in which we had embryos that were high enough quality left over to freeze," she says. "I believe that the acupuncture and changes to my diet had a positive impact on my eggs and overall embryo quality. The yoga and meditation improved my state of mind and gave me an outlet to deal with the stress."

As any woman who has dealt with infertility knows, struggling to get pregnant is stressful. Many couples

delay seeking treatment in part because of the stress they anticipate, says a survey by EMD Serrano, Fertility LifeLines and Conceive Magazine. According to the survey, 64 percent of women have been trying to get pregnant for a year or longer (experts recommend treatment after a year without success if you're under 35 or after six months if you're 35 and up).

To get through the experience, women need to take steps to care for themselves, says Tami Quinn, co-founder and co-owner of Pulling Down the Moon, which offers yoga classes, nutrition counseling, acupuncture and massage.

Although doing yoga and massage can't guarantee pregnancy, both can relieve stress, especially when everyone around you is having the same experience, Quinn says. Yoga itself has several benefits. Forward folding poses for instance, can induce relaxation, while gentle backbends can help relieve depression, Quinn says.

Adina Reichlin, owner of Breathe Bodyworks in Chicago, says prenatal massage is especially important for teaching proper breathing techniques. Massage relaxes tight muscles, which in turn, helps you breathe more deeply and bring more oxygen to the lungs.

"Pregnant women really need to get massage because their body is changing," Reichlin says. "They need to learn to breathe through their rib cage. And if they practice it, they can use it during labor." Proper breathing can also eliminate the stress that women experience when they're trying to get pregnant.

Another way to minimize the effects of stress is with chiropractics. Michelle Steins, D.C., owner of Core Chiropractic in Chicago, says adjusting the spine can help boost nervous system control of the reproductive cycle. By doing so, it can regulate the release of reproductive hormones and decrease the amount of stress hormones in the body. "The adjustment helps make sure the hormone release is at its most optimal," says Steins, who also does acupuncture.

In addition to reducing stress, it's important to consume the right kinds of food, Quinn says. She recommends that women eat organic foods whenever possible, especially when it comes to milk, fruits and vegetables.

More specifically, Quinn urges women to eat what she calls "fertility-friendly foods," such as salmon, olive oil and almonds, which contain omega-3 fatty acids for healthy brain function.

She also recommends that women eat yams, which are high in folate and beta carotene. Other good foods include cruciferous vegetables like broccoli, cauliflower and brussel sprouts, which contain indole-3 carbinol to help with healthy estrogen metabolism. Berries, which are rich in antioxidants, are important to help buffer cells from damage caused by aging. Both men and women, she says, should eat oysters -- known as an aphrodisiac -- which are rich in zinc, which may help prevent a deficiency in sperm.

Exercising regularly is also important, says Jasmine Jafferli, owner of Healthy Moms, a new business in Chicago and a master instructor with Healthy Moms Fitness. Before getting pregnant, women should get in the habit. "It doesn't have to be boot camp, but you should try and get 20 to 60 minutes of exercise most days of the week," she says. Women trying to get pregnant who are dealing with infertility should focus on less strenuous workouts such as yoga, Pilates, swimming and light walking. Even gentle strength

training is doable, she says.

But for women who are already fit, it's okay to continue a more rigorous regimen. "I tell them to do the talk test," Jafferli says. "If you can say, 'Hi, how are ya?' it means you're working out hard enough."



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How to Find a Fertility Clinic

Overcoming infertility takes more than determination, time and patience – you also need the right fertility practice. Here's what to consider when choosing one:

* **Services.** Find a facility with a range of options. "To give yourself the absolute best chance at conception, make sure that the program offers all of the latest techniques, such as preimplantation genetic diagnosis and third-party reproduction," says Dr. John Rapisarda from the Fertility Centers of Illinois.

* **Experience.** Look for a facility with board-certified doctors who keep up with their credentials, says Susan Davies, M.D., a reproductive endocrinologist and co-owner of North Shore Fertility in Skokie and Schaumburg, IL. Check if the doctor(s) is board certified in reproductive endocrinology/infertility by logging in to the American Board of Medical Specialties at www.abms.org. It's best to find a center that's been in business at least five years.

* **Convenience and hours.** "It's important to choose a clinic that's no more than half an hour from your home or work," says Anne Borkowski, M.D., co-owner of North Shore Fertility. "You're going to be there often, sometimes, three to four times a week." And make sure the hours fit your schedule.

At North Shore Fertility for instance, the office opens as early as 6 a.m.

* **Success rates.** A clinic's ability to produce a successful pregnancy is cited in a report from the Centers for Disease Control and Prevention (CDC) and the Society for Assisted Reproductive Technology (SART), at www.cdc.gov/ART/. A good clinic should at least be competitive.

But consider the results carefully. "Some clinics do not offer IVF to individuals with unfavorable prognoses, or they have liberal cancellation criteria," Dr. Rapisarda says. "If a program has a policy to preselect women most likely to get pregnant, then their rates will appear better than a program that takes 'all comers.'" Beware too, of clinics with many multiple births, which may suggest the program is transferring more embryos to boost success rates. And keep in mind that not all clinics are cited in the report. Dr. Borkowski adds.

* **Cryo-embryo transfers.** A high rate of success means there's an excellent embryology lab that can culture and store embryos and improve the overall cycle efficiency from a single retrieval, Dr. Rapisarda says.

* **Egg donor success.** Look for a program where most patients who need egg donors have successfully

gotten pregnant. "The donor egg rates eliminate variables related to different patient selection criteria since donors are almost always under 35 and the preparation of the recipient is uniform so cycles rarely get cancelled," Dr. Rapisarda says. "Therefore pregnancy rates with egg donors more closely reflect the quality of the laboratory and the transfer technique."

* **Hospital affiliation.** Make sure the clinic is affiliated with a hospital in the event of a medical emergency, Dr. Borkowski. "You'll have the ability to go to the hospital without going through a lot of paperwork."

* **Staff and reputation.** Ask friends for advice on where to go. "A lot of times, you find the right place through word-of-mouth," Dr. Davies says. Choose a clinic with a warm and friendly staff, who are willing to listen and allow you to ask questions.



About EMD Serono, Inc...

EMD Serono, Inc., an affiliate of Merck KGaA, Darmstadt, Germany, is a leader in the US biopharmaceutical arena, integrating cutting-edge science with unparalleled patient support systems to improve people's lives. The company has strong market positions in neurodegenerative diseases, with Rebif® (interferon beta-1a), as well as in endocrinology, with Saizen® (somatropin (rDNA origin) for injection), Serostim® (somatropin (rDNA origin) for injection) and Zorbtive™ (somatropin (rDNA origin) for injection). EMD Serono is a leader in fertility treatments, with Gonal-f® (follitropin alpha for injection), Luveris® (lutropin alfa for injection) and Ovidrel® Prefilled Syringe (choriogonadotropin alpha injection). With a clear focus on the patient and a leadership presence in the biopharmaceutical industry, EMD Serono's US footprint continues to grow, with more than 1000 employees around the country and fully integrated commercial, clinical and research operations in the company's home state of Massachusetts.

For more information, please visit www.emdserono.com



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DAVID STERN
EXECUTIVE VICE PRESIDENT
ENDOCRINOLOGY AT EMD SERONO

Q. In these difficult economic times, what is EMD Serono doing to help couples who are struggling to conceive and considering infertility treatments?

A. We are offering two ways to help couples dealing with infertility. FertilityAssist 2 is a patient assistance program that will provide up to \$500 in savings to eligible cash-paying patient during their second cycle on Gonal-f® (follitropin alfa for injection), the company's recombinant human follicle stimulating hormone (rFSH). The program is designed to help couples experiencing infertility by easing the financial burden and providing a discount to patients, which will help them stay in treatment longer.

EMD Serono, Inc. launched FertilityAssist 2 last year to address the reality that approximately 60-65% of patients who are under the care of a Fertility Specialist discontinue their recommended treatment before completion, many due to cost. In this economic climate, this percentage may rise, and EMD Serono is committed to helping patients who are trying to build their families. Last year, we saved patients \$4 million in drug costs.

The second cost-savings program we are offering is in honor of National Infertility Awareness Week, which is being held April 25 to May and sponsored by RESOLVE: The National Infertility Association. EMD Serono is donating \$1.5 million worth of medication to patients nationwide. Patients at 400 fertility centers across the country will receive a complimentary cycle of Gonal-f®. These centers will each provide one patient a cycle of four-900 IU Gonal-f® RFF pens at no cost.



MELISSA BRISMAN, ESQ, LLC
SPECIALIZING IN REPRODUCTIVE LAW

Q. How do you choose a reproductive lawyer?

A. The number of attorneys working in reproductive law is small, but certain criteria are always important. First, experience is essential. Find out how long they've been practicing this type of law and whether it's the only thing they do. Make sure the attorney has some experience and that this is the basis of their firm and not another specialty such as adoption law.

Second, ask where the lawyer is licensed. Depending on the transaction, you will usually need a lawyer licensed in the state where your gestational carrier gives birth. Ideally, the lawyer should be licensed in at least one (if not more) of the states in which the intended parents and gestational surrogate resides and/or the state where medical procedures are being performed. Hiring an attorney licensed in several states helps ensure the advice you are receiving applies to the states you're working in since laws vary considerably.

It's also important to know the costs involved. Ask the attorney for an estimate, or if possible, a flat fee. You should steer clear of any attorney who offers to work on a contingency basis since that arrangement is inappropriate in reproductive law.

And finally, consider choosing a lawyer that provides services beyond legal matters. Some firms provide help with locating the gestational surrogate as well as an egg donor or sperm donor. They may even help with insurance and managing the money needed to pay all the parties involved. By choosing a full-service firm, you can cut your to-do list considerably and actually save money instead of paying for these services separately.



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Q. How does acupuncture benefit couples who are struggling with infertility?

A. Acupuncture can increase natural fertility powers and increase IVF & IUI success rates. We offer such benefits through reducing stress, balancing hormones, reducing FSH levels, improving uterus lining, stimulating ovulation, warming cold uterus, tonifying kidneys etc. We help women ovulate better eggs, and help males to produce better sperm as well. Individualized acupuncture plans will make the uterus a soothing environment for fertilized eggs to grow and accomplish a healthy pregnancy.



ROBIN VON HALLE
PRESIDENT OF ALTERNATIVE REPRODUCTIVE RESOURCES OF CHICAGO

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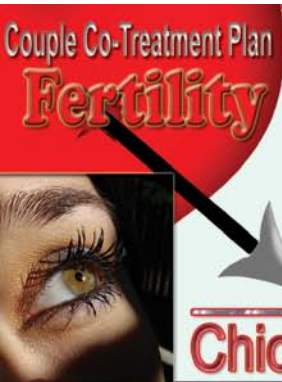
NANCY BLOCK
PRESIDENT OF THE CENTER FOR EGG OPTIONS

Q. Why is it advantageous to have a single source of information about egg donor candidates these days?

A. Robin von Halle: "DNA is needed as the fertility field grows in size and complexity. This has resulted in a proliferation of agencies that recruit egg donors, which makes weighing agency and donor choices more costly, confusing and time consuming for intended parents."

Nazca Fontes: "It's all about putting the intended parents in control of the egg donor search process. This helps them avoid excessive research of multiple agencies, tracking multiple user names and passwords, and paying multiple usage fees. It's a need improvement of the customer experience."

Nancy Block: "DNA helps to level the playing field, giving participating agencies exposure to far more prospective parents through a shared site than they'd see individually."



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