

# IVF: What Every Couple Needs to Know

A look inside the cutthroat business of fertility clinics

Barbara Fitzgerald

The billboards often show young, good-looking doctors in scrubs with stethoscopes around their neck, projecting the very image of hip, modern technology along with this coaxing message: “Having trouble getting pregnant? We can help.”

What these seemingly cozy “just between friends” billboards don’t tell you is that *in vitro* fertilization (IVF) fertility centers are a largely unregulated big businesses, driven by profits and greed, according to one California lawsuit. They are places where sperm donors are not always fully tested for a host of diseases, according to Food and Drug Administration records. And they are places where errors occur.

Devastated women find themselves with the wrong embryo implanted in their womb and men have discovered their sperm was injected erroneously into the egg of a stranger who then aborted the child. Still others have found their embryos mislabeled, gone missing,

or destroyed, according to lawsuits filed against the clinics in recent years.

“The people who purchase fertility services don’t see themselves participating in a commercial relationship,” writes Debora L. Spar in her secular-based book, *The Baby Business*. “They switch providers only reluctantly; they don’t argue about price; and they generally don’t blame the doctors when treatment fails.”

She adds, “The view from the clinics, by contrast, is more commercial. Although nearly all fertility centers tout their medical expertise and their patient focused environments, they also reveal a distinctly financial bent.”

Dr. Joel Batzofin, an IVF doctor involved with his former partners in a lawsuit told the Los Angeles Times last year, “It’s a cutthroat business. There’s a lot of greed.”

As centers compete with one another for business, doctors eager to boast success rates have resorted to implanting numerous embryos inside a woman’s womb hoping for a good

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outcome, resulting in the “Octomom” scenario that received wide news coverage last year.

In the process, human life becomes increasing less valued. Most tragically, these centers, which tout the wonders of science and innovation to infertile couples whose fragile emotional state often causes them to open the checkbook without asking a lot of questions, are places where human life is casually treated and life discarded. The unique, irreplaceable, miraculous makeup of an embryo is flushed down the drain as cavalierly as pushing a reject lever at a widget production plant.

Catholic teaching has always decried the “making of babies” in a laboratory for numerous reasons. Yet there are Catholic women who remain unaware of the teaching, who ignore it or are confused about the particulars. The secular media portrays the Catholic position with the same old bias it has employed about church teachings on human sexuality for years — the old men in Rome have no business in the bedroom and/or the Church is the bad guy for not allowing grieving couples to take advantage of cutting edge technology.

The Church in her wisdom, however, is the compassionate one. It offers the spiritual guidance couples need during a difficult time of infertility as well as protecting the rights of the child. Catholic medical doctors for decades have studied the woman’s reproductive system in ways that traditional medicine has chosen to ignore. Beginning with the Pope Paul VI Institute in Omaha, Nebraska and spreading out across the country, these



Catholic clinics have had great success rates with infertile couples, using natural methods that are holistic, noninvasive and in the words of Fertility Care Practitioner Barbara Rose, “just better medicine” for mom and baby.

Research in Europe and America suggests that children conceived through IVF have a greater risk of premature birth, require more surgery and experience more birth defects than children conceived naturally. A *New York Times* article in Feb. 2009 cites a paper issued by the Centers for Disease Control suggesting that there may be a possible increase in rare genetic disorders in IVF babies.

Women may also be at risk during the IVF procedure largely due to the drugs taken to stimulate the ovaries in order to harvest eggs. Researchers writing in the *American Journal of*



*Epidemiology* in 2008 report an increased risk of uterine and breast cancer for women treated for ovulation induction. Experience has shown that hyper stimulation of the ovaries, through drugs, can also lead to reproductive problems, kidney failure and death.

The success rates for IVF for women 35 and under is only about 30 percent. That rate drops to 15 percent for women age 40 and decreases exponentially with age.

According to a 2005 report by researchers at the Yale School of Medicine, 85 percent of embryos transferred to a womb in IVF are never born alive.

Couples come to Rose and other Catholic practitioners who explain and chart a women's fertility cycle using the Creighton Model Fertility Care system because as she said, "they don't want to make a baby; they want to have a

baby." The Creighton system looks at the underlying causes of infertility, instead of just manufacturing a baby in a glass dish.

Catholic health care centers for women are beginning to sprout up around the country as couples who are dismayed by the unnatural and invasive procedures required by IVF seek better options. Just last December, on the feast of the Immaculate Conception, the Gianna Healthcare Center for Women opened its doors at St. Vincent's Hospital in Manhattan, a place advertised as "consistent with their values and affirms their dignity as women."

The difference is in the treatment of both mother and child.

Consider the argument this way: The IVF fertility centers will tell couples they can create a baby but that child will likely come at the expense of two, three or four of its siblings, who

will either be destroyed or remain perpetually frozen in a laboratory freezer.

Can anyone imagine a couple saying, “I want a child so badly, that I don’t care what happens to its brothers or sisters.”

Imagine the psychological impact that has on the surviving child, said Dr. Marie Hilliard, director of Bioethics and Public Policy at the National Catholic Bioethics Center in Philadelphia, saying it would be difficult to know they have fellow siblings “frozen in time and rejected by my parents.”

She adds, “Children have a right to be engendered by a natural act of love.”

The problem is that children are seen as a right, not as a gift springing from the marital act of unitive and procreative love. Yet our society has built a consumer market for children on demand, especially when the time is right for the couple.

“The children themselves may come to be seen as products of our technology, even as consumer goods that parents have paid for and have a ‘right’ to expect – not as fellow persons, equal in dignity to their parents and destined to eternal happiness with God,” says the *Life-Giving Love in an Age of Technology* statement drafted by the United States Conference of Catholic Bishops last fall. (The bishops have gathered an impressive amount of information on this issue, readily available on the USCCB website.)

As the technology continues to create more embryos in freezers, several states have introduced legislation that would recognize embryos as distinct persons with rights under law. Alabama,

California, Colorado, Florida, Georgia, Maryland, Michigan, Missouri, Mississippi, Montana, Nevada, South Carolina and Virginia are all working on Human Life or Personhood Amendments. Such bills would limit by law the number of embryos doctors could implant in a womb and offer legal rights against destruction for those embryos that are perpetually frozen in time.

The church is sensitive to the fact that it has to meet couples suffering from infertility with compassion, counseling and information, not just a long list of “nos.”

“At the clinic, infertile couples will hear a scientist or doctor offering them hope for a child, and at church they must receive much more than a priest telling them no,” writes, Fr. J. Daniel Mindling, academic dean at Mount Saint Mary’s Seminary and a consultant to the USCCB Committee on Pro-life Activities.

He wrote a brochure, *Addressing Infertility with Compassion and Clarity*. He points out that in *Dignitas Personae* the Church recognizes that “there are those who say the moral teachings of the church contain too many prohibitions” but it also reminds us that “behind every ‘no’ in the difficult task of discerning between good and evil, there shines a great ‘yes’ to the recognition of the dignity and inalienable value of every single and unique human being called into existence.”

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