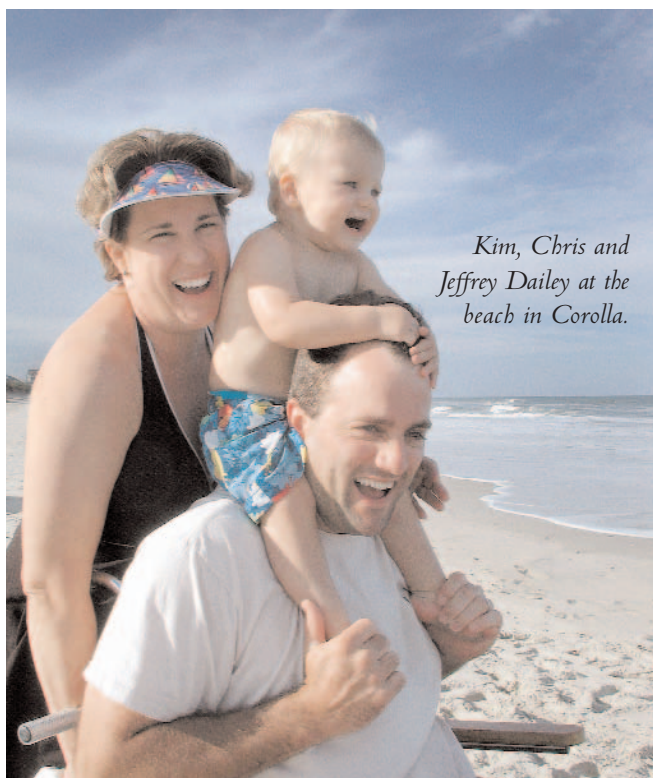


Hope for Couples Facing Infertility *by Kathleen Tobin*



Kim, Chris and Jeffrey Dailey at the beach in Corolla.

Kim Dailey had always planned on having children. Yet, life rarely goes as planned. Just as she began to think it might never happen, the vivacious physical therapist found someone special who shared her hopes of having a family. Kim had just turned 40 when she and Chris, a successful medical supplies rep, were engaged. They had lots of talks about the challenges ahead. Besides Kim's advanced age, there was the issue of Chris' disability, (he's a paraplegic).

"We definitely knew we were going to need help, and we knew we couldn't afford to wait," said Kim. "Let's put it this way, we were married on November 21st and we had an appointment with Dr. Robin on December 5th!"

Fortunately for couples fighting the odds like Kim and Chris, the range of treatment options is widening. However, for their best chances at an optimum outcome, it's important that couples don't delay therapy.

nologist and director of The New Hope Center for Reproductive Medicine in Virginia Beach. "Once a woman reaches her late thirties or early forties, her chances of becoming pregnant decline dramatically."

In Dr. Robin's experience, many infertility problems can be treated successfully with conventional therapies like medications, surgical repair of reproductive organs or intrauterine insemination (IUI).

Couples faced with more complex infertility issues, such as blocked or absent fallopian tubes or a low sperm count, may need advanced assisted reproductive technologies, or ART. Featuring some of the most sophisticated options available, ART is a special class of techniques including in vitro fertilization (IVF), intracytoplasmic sperm injection (ICSI), assisted zona hatching (AZH), embryo cryopreservation, egg donation and gestational carriers (surrogacy). "With these advanced reproductive techniques, we can offer patients

Fertility specialist Robin L. Poe-Zeigler, M.D. urges women age 35 or older to seek medical help if they are unable to achieve pregnancy after six months of unprotected intercourse.

For that matter, even those with no known fertility problems shouldn't wait too long to start a family. "Many people don't realize the toll time takes on a woman's eggs," said Dr. Robin, reproductive endocri-

more hope than ever," says Dr. Robin. In fact, 1 in 100 children in America today is conceived through ART treatments.

In vitro fertilization, perhaps the best known of the ART techniques, is a sequential process by which oocytes (eggs) are retrieved from the ovary based on cycle monitoring, fertilized by sperm in the lab and cultured into early embryos which are then transferred into the uterus for initiation of pregnancy. This protocol is individually tailored for couples challenged by advanced female age, elevations in FSH (follicle-stimulating hormone) and estradiol (the main type of estrogen), and male factor infertility.

Since up to 40% of infertility is attributed to a male factor, couples may require assistance with fertilization. Intracytoplasmic sperm injection (ICSI) is a procedure in which the embryologist injects a single



sperm into the cytoplasm of the oocyte. The resulting embryo is monitored for normal cell division, then transferred to the woman's uterus. While ICSI has revolutionized treatment of male factor cases, it can also be used in some cases of unexplained infertility and in older women who have fewer oocytes.

For women whose eggs exhibit a thick zona pellucida (outer wall), as is seen often in polycystic ovarian syndrome (PCOS), in patients who are over 35, and for patients who have had multiple IVF failures, assisted

(continued on page two)

(Hope for Couples Facing Infertility—continued from page one)

zona hatching (AZH) may be performed on the embryo to enhance implantation rates. A tiny opening is made in the outer layer of the embryo just before transfer, facilitating the normal hatching process that occurs before an embryo is capable of implantation.

Embryo cryopreservation—freezing and storing fertilized eggs—is an option for IVF patients as well as women nearing the age of 35 who aren't ready to start a family. When the woman

wants to get pregnant, her embryos, which have been created via IVF are thawed and placed in her uterus. "I've had patients who have not yet found 'Mr. Right' choose a sperm donor from a catalog," Dr. Robin reports. "I'll fertilize their eggs and then cryopreserve the embryos. If they never do marry, they haven't foregone the opportunity to have their own genetic child." For patients involved in an IVF cycle, embryo cryopreservation offers the advantage of limiting the number of embryos transferred to reduce the incidence of multiple pregnancy. In addition, it provides patients a chance of achieving a pregnancy in the future, without the time and expense necessary to undergo a completely new egg retrieval attempt.

Patients who have problems with egg production or quality can consider egg donation. Donor egg is the retrieval of eggs from a qualified donor after controlled stimulation of the donor's ovaries. Eggs are fertilized through IVF using the patient's spouse's sperm (or donor sperm) and the resulting embryos are transferred into the birthing parent's uterus. Donor egg also provides an option to women who have had premature ovarian failure or premature menopause, or those who have had

their ovaries surgically removed.

Another technique that is becoming increasingly widespread is surrogacy, Dr. Robin noted. "If a woman is unable to carry her own child, I can create an embryo using

delight as their son discovered sand, surf and seagulls. "The experience has made us both more appreciative," said Kim. "I'm sure other people feel the same way, but it just makes us feel like Jeffrey is all the more special."

Jeffrey Dailey, discovering the delights of sand, surf and seagulls.



the husband's sperm and either the patient's egg or a donor egg. I will then place it in the uterus of another woman, who will hopefully carry it to term. I've used a surrogate uterus for a variety of medical reasons—for example, with women who have had repeated miscarriages or who have undergone hysterectomies or even after breast cancer treatment."

For Kim and Chris, it took three IVF attempts and several other ART techniques before blonde, blue-eyed Jeffrey came along. "My age turned out to be the main problem," Kim explained. Because they tested positive for two out of three infertility factors, Dr. Robin treated the couple with a strategic combination of ICSI, AZH, and hormone medications. "For me, the difficult part really wasn't all the shots and the pain, it was the emotional part of it," recalled Kim. "The second time we tried, everything seemed like it was going so right. Getting that call only to find out that it didn't work—that was really hard to handle."

The emotional and financial stress experienced by infertile couples is very real. But then, so are the rewards. This summer, the Daileys experienced their first vacation as a family. Kim and Chris watched with

If they had it to do all over again, would they? "We still have embryos left," Kim said thoughtfully. "So, we may just be paying Dr. Robin another visit."



Known for her comforting care as well as her expert results, Dr. Robin Poe-Zeigler is one of the area's most experienced and respected reproductive endocrinologists. She is also a board-certified obstetrician and gynecologist.

Dr. Robin completed her fellowship in 1995 at the renowned Jones Institute in Norfolk, Virginia. Then, she moved to Minnesota to assist in developing the egg donor program at the Midwest Center for Reproductive Health. After returning to Hampton Roads with husband Mark and son Derek, she opted to open her own practice, and in 1997, The New Hope Center was born. Since then, she has offered new hope to a "family" of thousands.