

**Every Day Certainty:  
Mental Health Days are a Must!**

By Kristen Magnacca

The magazine looked as though it had been read and re-read over and over again, sporting a wide tear in the cover. It hadn't been read yet, just well worn. It was carried around with the best of intentions though.

Finally getting a moment to read the crinkly pages of the July 8th issue of *Woman's Day* magazine, the beautiful photo of a suitcase open with a hat, bikini (not that I would wear one), flip flops and sunglasses seemed to be screaming "read me."

The little quarter-page blurb about *Mental Health Matters* was titled "Take a Real Break" and went on to explain that women who take a vacation every two years instead of yearly have a greater chance of depression than those females who "run away" from their lives yearly. The study was conducted at the National Institute for Occupational Safety and Health.

According to Kathleen Hall, PhD, women are more likely to miss the benefits of a break, which include reducing anxiety, stress and anger while stimulating the production of calming brain chemicals. This caused me to wonder, "What are the

*Continued on page 5*

QUARTERLY NEWSLETTER

**FALL 2008**

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**EDUCATIONAL PROGRAMS  
FALL 2008**

- **Managing Your Health Insurance**
- **IVM: A New, "Old" Infertility Treatment Option**

**The RESOLVE Fertility  
Treatment, Donor Choices, and  
Adoption Conference**

*Offering 40 workshops on:*

- ◆ medical treatment ◆ emotional and legal issues
- ◆ adoption ◆ donor choices ◆ embryo donation
- ◆ and more

Featuring a keynote address  
by Alice D. Domar, PhD, "Tools and Techniques  
for Regaining Control and Enhancing Fertility"

**Saturday, October 25, 2008**  
8:30 a.m.–5:00 p.m.  
**Best Western Royal Plaza Hotel**  
**Marlborough, MA**

*See Pages 9–12 for complete details.*

## RESOLVE INFORMATION

**It's easy to become a member of RESOLVE. Simply fill out the form on page 17 and mail / fax it today.**

Household Membership: \$55/year

Professional Membership: \$150/year

### RESOLVE of the Bay State Member Benefits

RESOLVE of the Bay State provides compassionate and informed support and education to people experiencing infertility and seeking to build a family.

**Chapter HelpLine** — 781-890-2225, for information and support from a trained callback volunteer.

**Quarterly Newsletter** — co-published with RESOLVE of Greater Hartford

**Insurance Call-in Hours** — 781-890-2225, for assistance with your insurance problems. Check our website or this newsletter for scheduled hours.

**Educational Programs** — varied monthly presentations by experts in the fields of infertility, donor egg, or adoption. Also day-long seminars providing an in-depth look at one topic.

**Professionally-Led Support Groups** — a variety of time-limited groups that meet on a weekly basis, for women and couples, led by a licensed therapist. Many members state that their support group participation was the best thing they did for themselves during their infertility.

**Monthly Peer Discussion Groups** — open forums held at various locations providing information and support to people interested in learning more about their infertility and RESOLVE. Groups focusing on specific areas of interest are held in our Waltham office.

**Discounts** — members can attend all Peer Discussion Groups free of charge and receive substantial discounts on programs and literature.

**Annual Conference** — a day-long educational event with over 40 workshops focusing on infertility treatment, emotional issues, donor egg and adoption.

**Directory of Services** — a resource book of infertility, mental health, donor egg, and adoption services published annually.

**Advocacy** — for protection of the Massachusetts insurance mandate and continued legislative and insurance reform.

**Member-to-Member Connection** — members are matched with member volunteers who share similar experiences or who have a specific area of expertise.

**Chapter Library** — located in the Waltham office. Call for hours.

**Volunteer Opportunities** — we depend on volunteers for many of our services. Feel good helping others facing similar challenges.

### RESOLVE of Greater Hartford Member Benefits

RESOLVE of Greater Hartford is the Connecticut Chapter of RESOLVE, Inc. Join the Greater Hartford Chapter and you automatically become a member of National RESOLVE.

**In addition to the quarterly newsletter co-published with the Bay State chapter, and the Annual Conference held in Massachusetts, benefits include:**

**Chapter HelpLine** — 860-523-8337 for information and support from a trained callback volunteer.

**Educational Programs** — varied presentations by experts in the fields of infertility, insurance or adoption.

**Monthly Peer Support Groups** — groups are open to individuals or couples experiencing primary or secondary infertility. Meetings are free for members.

**Lending Library** — free of charge for all members. Please e-mail [info@resolveofgreaterhartford.org](mailto:info@resolveofgreaterhartford.org) for a list of current books.

**Advocacy** — for protection of the Connecticut insurance mandate and continued legislative and insurance reform. Please contact [resolvetadvocacy@yahoo.com](mailto:resolvetadvocacy@yahoo.com) or 860-523-8337 for any CT insurance or advocacy questions.

**Member-to-Member Contact/Friendships** — finding people who have traveled or are currently traveling this same journey, to share your emotions and situations with, can make you a stronger person/couple in dealing with your fertility.

**Volunteer Opportunities** — please contact 860-523-8337 or [info@resolveofgreaterhartford.org](mailto:info@resolveofgreaterhartford.org) if you are interested in becoming a volunteer.

### National Benefits

**Discounts on RESOLVE literature** — a variety of written materials on every aspect of infertility.

**Online Community** — Access 10 bulletin boards at [www.resolve.org](http://www.resolve.org), including Getting Started, Adoption, IVF and High-Tech Procedures, Third Party Reproduction, Pregnancy After Infertility, Parenting After Infertility, Male Perspective, Secondary Infertility, Pregnancy Loss, and High FSH.

**Also** — National RESOLVE's comprehensive website: [www.resolve.org](http://www.resolve.org)

## RESOLVE EDUCATIONAL PROGRAMS

RESOLVE of the Bay State is pleased to announce our FALL Programs, designed to provide information and support to people experiencing infertility. Meetings combine formal presentations with ample opportunities for discussion with presenters and members of the audience.

**FEES:** (unless indicated otherwise) RESOLVE members, \$10 per person; non-members, \$20 per person

**Register** in advance for these programs by calling 781-890-2225 or emailing the office at [admin@resolveofthebaystate.org](mailto:admin@resolveofthebaystate.org)

### **Managing Your Health Insurance: What You Should Know about Your Infertility Coverage and the Massachusetts Mandate**

With Marymichele Delaney, Benefits Manager, Harvard University; Principal, Delaney Consulting; and Insurance Advocate, RESOLVE of the Bay State, & Diane DeRosa, Financial Advisor, Boston IVF

Understand insurance products, accessing your benefits, managing an appeal, the Massachusetts mandate and advocating for yourself. There will be plenty of time for Q&A, so please bring your questions.

**When: Monday, November 17, 2008, 7:00–9:00 p.m.**

**Where: The Walker Center, in the Living Room, 171 Grove Street, Newton, MA 02466**

### **IVM: A New, "Old" Infertility Treatment Option**

With Jared Robins, MD, Reproductive Endocrinology and Infertility, Women and Infants Hospital of Rhode Island

IVM or In Vitro Maturation of oocytes, a technique pioneered decades ago, is emerging as an infertility treatment option within the arsenal of infertility treatment protocols. The advantages of IVM over traditional IVF are that IVM requires minimal, or no stimulation with expensive gonadotropins, and IVM avoids the side effects (both short term and potential long term) of these medications. IVM also requires less frequent monitoring. These advantages combined lead to lower cost and less time commitment for the patient. Some clinics report success rates of IVM close to those of traditional IVF.

Dr. Jared Robins will explain how this technique is done, the success rates, and who can benefit from this technique. Please bring your questions.

**When: Monday, December 8, 2008, 7:00 – 9:00 pm**

**Where: Lasell College, Rosen Auditorium, 80-A Maple St., Newton, MA 02466**

### **Massachusetts Insurance Call-In Hours**

Call **781-890-2225** on the dates indicated to get your questions answered live.

***Insurance Call-in on Tuesdays,  
Oct. 21 and Dec. 2***

Having difficulty getting insurance coverage for your doctor's recommended treatment plan? Need help framing an appeal letter to your insurance company? Want to know what the Massachusetts mandate covers? Call for consultation with our Insurance Advocate, Marymichele Delaney.

**Fees:** FREE to RESOLVE members, or join RESOLVE over the phone with your credit card.

### **Professionally-Led Support Groups**

- ◆ **Women's Primary Infertility Group**
- ◆ **Women's Secondary Infertility Group**
- ◆ **Donor Egg Group**

RESOLVE membership required. You can print out, complete, and mail or fax us the support group application on our website.

CT members interested in a future professionally led support group should call 860-523-8337 or email [info@resolveofgreaterhartford.org](mailto:info@resolveofgreaterhartford.org)

## BAY STATE – PEER DISCUSSION GROUPS – GENERAL INFERTILITY

<p style="text-align: center;"><b>Waltham</b></p> <p style="text-align: center;">RESOLVE office, 395 Totten Pond Road, Ste 403 Tuesdays, 7:00–9:00 p.m. Oct. 14, Nov. 11, and Dec. 9</p>	<p style="text-align: center;"><b>Stoughton</b></p> <p style="text-align: center;">Whole Person Health, 294 Pleasant St (Rte 139) Thursdays, 7:00–9:00 p.m. Oct. 16, Nov. 20, and Dec. 18</p>
<p style="text-align: center;"><b>Amherst</b></p> <p style="text-align: center;">The Arbors at Amherst, 100 University Drive Wednesdays, 7:00–9:00 p.m. Nov. 5 and Dec. 3</p>	<p style="text-align: center;"><b>Worcester</b></p> <p style="text-align: center;">Tatnuck Park at Worcester, 340 May St. Wednesdays, 7:00–8:30 p.m. Oct. 22, Nov. 19, and Dec. 17</p>
<p style="text-align: center;"><b>Warwick, RI</b></p> <p style="text-align: center;">Diversified Resources, 70 Jefferson Blvd., 2nd floor Wednesdays, 6:00–8:00 p.m. Oct. 29 and Nov. 19</p>	<p style="text-align: center;"><b>Boston</b></p> <p style="text-align: center;">Morville House, 100 Norway Street – near Symphony Hall Wednesdays, 6:00–8:00 p.m. Oct. 15, Nov. 19, and Dec. 17</p>
<p><b>NEW! North Shore (Beverly)</b> <b>North Shore Yoga, 180–186 Cabot Street</b> <b>Thursdays, 7:30–9:30 p.m.</b> Nov. 6 and Dec. 4</p>	

## MASSACHUSETTS – PEER DISCUSSION GROUPS – TOPIC-ORIENTED

**These meetings are held in our Waltham Chapter Office, 395 Totten Pond Rd., Suite 403, Waltham**

<p style="text-align: center;"><b>Pregnancy Loss Discussion Group</b></p> <p>This group will focus on support and acceptance for individuals who have experienced miscarriage/stillbirth/ectopic pregnancy/recurrent pregnancy loss. Come and talk with others about the impact of loss on all aspects of life, the emotional and psychological experiences of grief and loss, coping strategies, decision making, and how to move forward.</p> <p style="text-align: center;"><b>Wednesdays</b> <b>Oct. 15 and Dec. 3</b> <b>7:00–9:00 p.m.</b></p>	<p style="text-align: center;"><b>Donor Egg Discussion Group</b></p> <p>Are you considering donor egg as a way to build a family? Join us for an open discussion of the issues, decisions, and emotions surrounding this family building option. This group will be led by Cara Birrittieri, a mom through donor egg who has just authored a book that discusses donor egg.</p> <p style="text-align: center;"><b>Monday Nov. 3 and Tuesday, Dec. 16</b> <b>7:00–9:00 p.m.</b></p>
<p style="text-align: center;"><b>Adoption Discussion Group</b></p> <p>Join us for an open discussion led by an adoptive mom. Bring your questions, concerns, and ideas to be shared with others who are exploring adoption or are in the process of adopting. Find some answers and strategies and connect with others.</p> <p style="text-align: center;"><b>Thursdays</b> <b>Nov. 20</b> <b>7:00–9:00 p.m.</b></p>	<p style="text-align: center;"><b>Secondary Infertility Discussion Group</b></p> <p>Coping with infertility while parenting? The struggles and frustrations of secondary infertility are unique. Join others who understand the challenges.</p> <p style="text-align: center;"><b>Tuesdays</b> <b>Oct. 21 and Dec. 2</b> <b>7:00–9:00 p.m.</b></p>
<p style="text-align: center;"><b>Donor Egg Parents' Discussion Group</b></p> <p>Are you parenting a child(ren) through egg donation or are you pregnant through egg donation? Join a peer-led donor egg parenting group that will meet at the group leaders' homes. Meet other donor egg parents in a supportive environment for socializing and discussion of relevant issues. Please bring your children. Light snack provided.</p> <p style="text-align: center;"><b>Tuesday, Oct. 16, 2008</b> <b>7:00 p.m., Arlington, MA</b> <i>Please email or call our office if you plan to attend, and we will send you the meeting address.</i></p>	<p style="text-align: center;"><b>CONNECTICUT – PEER DISCUSSION GROUP – GENERAL INFERTILITY</b></p> <p style="text-align: center;"><b>Farmington Area</b> <b>held on the 3rd Thursday of every month</b> University of Connecticut Health Center / Dowling South Building, 2nd Floor 'Education' Room 263 Farmington Avenue, Farmington, CT <b>Thursdays, 7:00 p.m.</b> <b>Oct. 16, Nov. 20, and Dec. 18</b></p>

*Continued from page 1*

effects of not taking a break from not only life, but also from fertility treatments?”

In a recent coaching session with a client whose arm resembled a pincushion, we talked about the isolation, stress, sadness and pain of experiencing the physical, emotional and social pressures of trying to create a child, when every effort just doesn't seem to work.

One of the strategies that I advocate is “taking a mini vacation” from it all. Escapism is underrated when infertility becomes all encompassing and totally overwhelming.

It's not running away, but it's running to nurture yourself in the way that is best for you in the given circumstance.

*Escapism is mental diversion by means of entertainment or recreation, as an “escape” from the perceived unpleasant aspects of daily stress. It can also be used as a term to define the actions people take to try to help relieve feelings of depression or general sadness. (www.wikipedia.org)*

I remember “taking a break” from our infertility journey for months and each and every time my husband, Mark, began pushing me to begin again, it was like I was fully dressed in beach attire and gingerly testing the water as the waves crashed onto shore. It wasn't until I was pushed and truly felt I was strong enough to withstand the trials and tribulations of an IVF cycle that I did move forward and begin the process.

Taking a Break doesn't mean you're giving up, it means that you're already creating a balance and a habit of self nurturing which is so important during any transition in life, and allows for recharging of your fortitude muscle.

So, even if you say you can't get away soon, try to get away for a half-day like the little blurb suggested. Schedule something to look forward to or perhaps just unplug for a day. Leave your computer, cell phone and all other electronic leashes home and feel the benefits of releasing every day pressures.

This escapism coupled with the “Acting as if” strategy will give you an uplift. “Acting as if” you're not currently in the most trying time of your life, for even an hour, will help you connect with that fortitude you possess — the strength it takes when you're facing what only all of us who have been through this journey can completely understand.

**Set Your Intention**

There is a wonderful Buddhist proverb, “When the student is ready, the teacher will appear.”

If you set your intention or mini goal for your “escape day” to bring you exactly what you need at this given moment — to heal you from this trauma and move forward with ease — you'll be surprised what experience will come your way as you run away!

Well, if you need me, I'm running away to the beach for the day and I hope to see you there!

**About the author:** Kristen Magnacca is an author, speaker, and Every Day Certainty Life Coach. To learn more about her books visit her at [www.kristenmagnacca.com](http://www.kristenmagnacca.com). She is the author of *Girlfriend to Girlfriend: A Fertility Companion* and *Love and Infertility: Survival Strategies for Balancing Infertility, Marriage and Life*, which is coming out in paperback in Sept. 08. New release “Every Day Certainty: 21 Days to Live Your True Life” is coming soon.

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## Polycystic Ovary Syndrome

By Mahmood Niaraki, MD, Fertility & Reproductive Health, Harvard Vanguard Medical Associates

Polycystic Ovary Syndrome is the most common endocrine problem as well as the most common cause of infertility in women. PCOS overall affects 6.5 to 8 percent of women and the prevalence is 3 to 4 times higher in overweight and obese women. It is important to know that PCOS is a syndrome, not a disease, reflecting multiple potential causes and different clinical manifestations.

This condition has life-long implications with increased incidence of infertility, metabolic syndrome which may lead to Type 2 Diabetes, hypertension, and cardiovascular disease. Patients with PCOS most commonly are insulin resistant and obesity presents in approximately one half of adolescents and adults with this condition.

The two most common clinical presentations of PCOS are irregular menstruation and excessive male hormones. The irregular menstruation is characterized by infrequent or absent periods. Ovulation is also affected by excess male hormones. Pelvic ultrasound usually demonstrates multiple small follicles under 10mm in both ovaries. These follicles may grow and collect fluid, but none may become large enough for ovulation.

When ovulation doesn't occur, progesterone is not produced. Without progesterone, a women's cycle will be absent or irregular. In addition severe acne, excess facial hair (hirsutism), hair loss (pattern alopecia) is secondary to excessive male hormones. Some clinical features of PCOS have a familial pattern; several candidate genes have been described but not well proven.

Due to infrequent ovulation and menstrual periods, tissue build up may occur inside the uterine cavity (hyperplasia) which may lead to abnormal bleeding and rarely uterine malignancy.

Also associated with this condition is an increased rate of pregnancy loss as well as complications during pregnancy such as gestational diabetes, and or pregnancy-induced hypertension.

The risks associated with Type 2 Diabetes are mainly being overweight and positive family history and ethnicity. About 40–80 percent of children and adolescents with Type 2 Diabetes have at least one affected parent and 85 percent may have first or second degree relatives with this condition.

In general, a low carbohydrate diet and regular exercise can be very effective in improving the signs and symptoms of PCOS, mainly by reducing weight. More important, the medication Metformin may enhance weight loss when associated with a low calorie diet. Metformin may also normalize the menstrual cycles. About 20 percent of the time gastrointestinal side effects may occur with this medication, but the majority of the time it is well tolerated if the dosage is increased gradually or the extended release version of this drug is used. Kidney and liver function studies should be a part of baseline as well as follow up studies.

Depending on whether or not pregnancy is desired, different treatment modalities are utilized in PCOS patients. When pregnancy is desired, Clomid alone, or in combination with Metformin can be utilized. In recent multi-medical center studies it was noted that Clomid is superior to Metformin in achieving as well as maintaining the pregnancy compared with Metformin alone. However, there is an increased rate of twin gestation.

If the above treatment fails, gonadotropin medication can be used to induce ovulation, but the rate of multiple gestation is clearly increased with this type of treatment.

If pregnancy is not desired, oral contraceptives can be used to regulate the cycles. This will also reduce the excessive hair growth and acne by reducing the male hormones originating from the ovaries. The new generation of birth control pills, which contain special diuretics, appear to be more effective to achieve this goal.

In summary, Polycystic Ovary Syndrome has life-long implications with the risk of infertility, metabolic syndrome, Type 2 Diabetes and cardiovascular disease. Therefore, early diagnosis and treatment of this condition will significantly reduce the complications arising from this common medical condition.



## What to Look for in Choosing an Adoption or Assisted Reproductive Technology Attorney

By Herbert D. Friedman, Esq.

There are five important areas to consider when selecting your attorney for family building through adoption or assisted reproductive technology (ART).

### 1. Relevant Experience

Adoption law, both domestic and international and ART law, is complicated, and you want to be represented by someone with broad experience and understanding in these areas. An excellent adoption attorney should be familiar not only with Massachusetts adoption law, but also with how to handle situations when the child to be adopted is born outside your home state and needs to come to your home state, which requires knowledge of the Interstate Compact. Your attorney should also be familiar with international adoption law including the Hague Treaty on Adoption, which entered into force in the United States on April 1, 2008.

If you are involved in an ART situation, either as an intended parent, an egg donor, or a gestational carrier, you should seek an attorney who is familiar with drafting and negotiating agreements in this area and obtaining prebirth judgment and orders, step-parent adoption decrees, guardianships and other indicated court orders.

### 2. Legal Education and Non-Adoption/ART Legal Experience

You should inquire as to your prospective attorney's legal education as well as any litigation experience that your prospective attorney might have. Although the style of most adoption practice tends to be collegial and cooperative, your adoption attorney needs to be able to deal persuasively with state agencies, both in your home state and in other states, as well as with adoption agencies, federal agencies such as the Department of Homeland Security, and as may occur, attorneys for opposing parties such as an uncooperative, putative birth father. If your attorney does not have an excellent law school education and relevant legal experience, including litigation practice, your representation may be less effective.

### 3. An Attorney Who Listens and Is Available To You

While your particular situation and specific needs may vary depending on the nature of your adoption or ART matter, it is essential that you feel your attorney listens to your concerns and is experienced in representing prospective adoptive or ART parents of all life styles and backgrounds. Your attorney

should be responsive to your questions and requests, as measured, for example, by prompt attention to your telephone messages and emails.

### 4. Fees

Fees in the areas of adoption and ART law can be substantial because these areas may involve complicated factual and legal issues that often need to be responded to expeditiously. Your attorney should explain to you, at the beginning of your relationship, his or her fee structure. For example, is it hourly, a flat fee or some combination? The fee structure should be set forth in writing, preferably as a Fee Agreement, which both you and your attorney sign. It is also important that you receive itemized monthly invoices so you are kept informed as to the work your attorney is doing on your behalf.

### 5. Trust and Confidence

The bottom line, after you have considered the attorney's experience, legal education, personal qualities and fee structure, is that before you retain an attorney you should have a feeling of trust and confidence that your attorney is willing and able to represent you. If so, you can proceed to retain that attorney as the result of a knowledgeable decision on your part. Should issues arise during the course of your relationship with your attorney, you should raise and discuss them in a non-adversarial manner when you first become aware of them – so that any misunderstandings or shortcomings can be resolved and your attorney can continue to effectively assist you in building your family.

*About the Author:* Herbert D. Friedman, Esq., is an adoptive father who has practiced adoption law in Massachusetts for over 25 years and specializes in adoption and ART law. He is a founding fellow and board member of the American Academy of Adoption Attorneys, a board member of the Adoption Community of New England, and a 2008 Angel in Adoption award recipient from the Congressional Coalition Adoption Institute, Washington, D.C. His website is [www.massadopt.com](http://www.massadopt.com).

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## What Should We Do with Our Embryos? One Couple's Journey to an Answer

By a Member of RESOLVE of the Bay State

After 7 failed IUIs, I sat with my husband in the RE's office, feeling scared and hopeful to start our first IVF cycle. Our doctor asked us what we might consider doing if we had excess frozen embryos and we were done completing our family. We couldn't imagine having one child, let alone completing a family, with excess embryos to consider. It seemed too strange to think about. We thought, "Well, we could donate them to another couple or donate them to science." We decided we would figure it out when the time came and thought that the decision would be easy to make. We were wrong; it wasn't easy or clear.

Six IVFs and two miscarriages later, we were done with medical treatment. During treatment we had one IVF cycle resulting in excess frozen embryos. Even with the frozen embryos to try with, we were depleted, and needed to move forward with plans to adopt, which had 100% guarantee of success in creating our family. We had done the hard work of grieving and we were ready to move on.

We found out a month later that I was spontaneously pregnant. We were anxious, but decided to continue on a trip overseas that we had postponed for years because of treatment. We didn't rest easy, with signs of an imminent miscarriage throughout our trip. We managed to stay pregnant, and I gave birth at the age of 40 to a daughter. During childbirth I had a

rare, but dangerous, complication and my recovery was slow, but we were ecstatic to be parents.

As our daughter became a toddler, we decided to try conceiving with our frozen embryos. Before we even got to thaw our embryos, we were pregnant again. I had pre-term labor at 6 months gestation (a risk with advanced maternal age), but with excellent medical care and bed rest, I gave birth full term, at age 42, to a son.

### Considering the Options

We were thrilled, so busy, but exhausted with our two young children, and time flew by. At each bill payment for our frozen embryo storage, we discussed when we might be ready to try again, but parenting a toddler and preschooler at 45 and 47, while amazing, was also hard and we put off the decision.

We love our children with the gratefulness and passion that infertile parents have, and we spend lots of time with our kids, so I decided that working part time made the most sense. We began to doubt whether we could raise more children on a limited income, and whether I could endure any pregnancy medical issues, which I was at high risk for, given my age and pregnancy history. We so loved being parents, but at our age, we felt we were operating on a "reserve tank" and adding more to that seemed insurmountable.

We started researching the options for our frozen embryos, beyond parenting more children. No option was considered lightly, and all were examined in great detail by discussing, thinking, and reading about the issues of each choice. Here is how we thought about the options, knowing of course that other couples will think about their choices in a way that feels right to them.

**Donate the embryos to another couple.** In the past, this option had felt right, but now as parents it felt different and more complicated. I would feel comfortable donating gametes (eggs) because it would feel to me more like a "tissue donation." However, embryo donation seemed to me as if I would be donating one of our "potential children." It didn't feel right to have a full sibling of our children out there in the world that they didn't know.

While there is a choice between anonymous and known donation, which determines how much openness and contact one can have, most donations are fairly anonymous. We feel very strongly that children have a right know their origins, and there were no guarantees that the recipient parents would honor that by telling the child how she/he was created. We



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The RESOLVE Fertility Treatment, Donor Choices, and Adoption Conference  
Saturday, October 25, 2008  
8:30 AM–5:00 PM  
Best Western Royal Plaza Hotel, Marlborough, MA

*Join us for this daylong educational event for people experiencing infertility and their healthcare providers, covering medical treatment, emotional issues, donor options, adoption, and other family building choices.*

Keynote address:

**“Tools and Techniques for Regaining Control and Enhancing Fertility”**  
with Alice D. Domar, PhD

Alice D. Domar, PhD is a pioneer in the application of mind/body medicine to women's health issues. She not only established the first Mind/Body Center for Women's Health, but also conducts ongoing groundbreaking research in the field. Her research focuses on the relationship between stress and different women's health conditions, and creating innovative programs to help women decrease physical and psychological symptoms. She is currently the Executive Director of the Domar Center for Mind/Body Health. Her newest book is *Be Happy Without Being Perfect* (Crown, March, 2008) and she is currently working on a new book, co-authored with Dr. Susan Love, called *Pretty Healthy* (Crown, May, 2009).



Featuring presentations by the region's leading infertility, donor egg, and adoption specialists, on topics such as:

- Everything You Want to Know about IVF
- Making the Leap to Adoption
- Adoption Choices – Domestic and International
- Evaluation of Ovarian Reserve
- Medical, Emotional, Ethical Aspects of Donor Egg
- Embryo Donation for Recipients and Donors
- AND MORE

Also on site:

- 30+ Exhibitors — infertility clinics, pharmacies, adoption agencies, donor organizations, and more.
- Book sale — open all day.
- Book signings — by our presenter/authors.
- Lunch included in the registration fee.

## Why You Should Attend Our Annual Conference

By Rebecca Lubens

Executive Director, RESOLVE of the Bay State

We have often been told that attending our annual conference is a “life-changing event.” Sounds like an extreme claim, doesn't it? Yet our experience has shown that this is a common response from our conference attendees, and I'd like to suggest reasons why you are likely to feel the same way when you attend:

Many attendees have never before seen — in one place, at one time — so many people who also struggle with infertility. At 8:00 a.m. on Oct. 27th last year, attendees began to arrive at the conference center, at first in trickles and then in hordes. They all gathered in the ballroom to hear the keynote address — all 200+ strong. Dispersing to the various meeting rooms, they passed each other in the hall and met in smaller groups for each workshop. They gathered together again for lunch, chatting in the buffet line and at the lunch tables. In sessions on adoption, infertility treatment, donor egg, and more, attendees met others like themselves who were travelers on the same journey — searching for information, for hope, and for a satisfying resolution to infertility. Where else could you find such strength in numbers?

Many attendees are deeply touched, or usefully informed, by one (or more) of the presenters. With 40 workshops, and presenters including reproductive endocrinologists, embryologists, urologists, social workers, lawyers, nurses, attorneys, psychologists, complementary medicine practitioners, and of course, your peers — all expert in the variety of family building options — I can almost guarantee that one of them will make a lasting impression on you. Some presenters will offer factual information, with slides or overheads, which summarize years of practice in their field — compressed into a one-and-a-half hour session! Others will focus on the options for making new dreams of family and will touch your heart. Whatever the focus of the workshop, all the presenters share

*continued on page 12*

TREATMENT OPTIONS

**A-1 All About IVF: Today and On the Horizon**

Learn about the IVF process today, including treatment protocols, medications, and how to understand success rates, as well as new and upcoming protocols and how to assess whether to pursue these options. – *Grace Lee, MD, Fertility & Reproductive Health, Harvard Vanguard Medical Associates, and Elizabeth Ginsburg, MD, Medical Director, ART, Center for Reproductive Medicine, Brigham and Women's Hospital*

**A-2 My IVF Cycle Didn't Work: What's Next?**

After a failed IVF cycle, an examination of questions to ask your doctor, changes to make in your next cycle, reasons why cycles may not work, and ideal cycle parameters. – *Alison Zimon, MD, Boston IVF*

**A-3 Medical and Emotional Aspects of Donor Egg**

A medical overview of the donor egg process, cycle success rates, how to get started, and an overview of the emotional aspects and issues to consider when deciding to pursue donor egg. – *Rachel Ashby, MD, Center for Reproductive Medicine, Brigham and Women's Hospital, and Lynn Nichols, LICSW, Boston IVF*

**B-1 Low Ovarian Reserve and Treatment of Poor Responders**

This session covers ovarian reserve, the tests (FSH levels, etc.) that are available to evaluate it, and implications for treatment outcome. Also learn about treatment options and lab findings in the "poor responder." – *Carol Anania, MD, Reproductive Science Center*

**B-2 Choosing the Best Embryo**

What happens in the IVF lab, how embryologists and clinicians interact and make decisions to choose the best embryos for success, and the prevention of multiple births. – *Claudio Benadiva, MD, IVF Laboratory Director, Center for Advanced Reproductive Services, University of Connecticut, and Catherine Rackowsky, PhD, HCLD, Director, IVF Lab, Center for Reproductive Medicine, Brigham and Women's Hospital*

**B-3 Recurrent Pregnancy Loss: Medical and Emotional Issues**

A review of the clinical causes and treatments associated with miscarriage, followed by a discussion of the emotional issues and coping strategies. – *John C. Petrozza, MD, Chief, Massachusetts General Hospital Fertility Center, and Dinah Gilburd, MA, MSW, LICSW, Supervisor, MGH Charlestown HealthCare Center, and Private Practice*

**C-1 Why Infertility Shouldn't Be Unpleasant**

Learn the importance of an early and accurate diagnosis and treatment, and review options of proceeding with treatments that are successful when the cause of infertility is unknown. – *Carol Anania, MD, PhD, Medical Director, Fertility Center*

**C-2 My IVF Cycle Didn't Work: What's Next?**

After a failed IVF cycle, an examination of questions to ask your doctor, changes to make in your next cycle, reasons why cycles may not work, and ideal cycle parameters. – *Alison Zimon, MD, Reproductive Science Center*

**C-3 Medical and Emotional Aspects of Donor Egg**

A medical overview of the donor egg process, cycle success rates, and how to get started, and an overview of the emotional aspects and issues to consider when deciding to pursue donor egg. – *Vito R.S. Cardone, MD, Cardone Reproductive Medicine & Infertility, and Kathleen Docktor, RN CS, Fertility Centers of New England*

INSIGHTS AND INFORMATION

**A-4 The Truth About the Stress/Infertility Connection**

Learn about the normal emotional responses to infertility and why they happen, the most recent research on the impact of stress on fertility and treatment outcome, and the interventions that will effectively reduce the emotional impact of infertility. – *Alice D. Domar, PhD, Domar Center for Mind/Body Health*

**A-5 Donor Sperm Issues and Concerns**

For those considering or planning to use donor sperm to build a family, this session addresses issues and concerns including the loss of a biological connection, known vs. anonymous donors, ethical issues such as talking to children about their conception, how to remain hopeful, and more. – *Carol Frost, LICSW, Private Practice, and author of Helping the Stork: The Choices and Challenges of Donor Insemination*

**A-6 When Couples Disagree: How to Move Forward**

Gain insight into the dynamics and complexity of couple decision-making, learning how to weigh each other's preferences without becoming polarized and how to arrive at a mutually satisfying decision. – *Debra Olshever, LCSW, LMHC, MEd, Adoption Associates, and Damon Blank, LMFT, Private Practice*

**B-4 Practical and Legal Issues of Donor Egg**

For those considering or planning to use donor egg to build a family, this session addresses working with an agency, finding a donor, costs, the relevant laws, contracts and more. – *Susan L. Crockin, JD, Principal, Crockin Law & Policy Group, LLC, and Amy Demma, JD, Founder and Principal, Prospective Families*

**B-5 Egg Donation or Adoption: Which is Right for You?**

Discuss issues to consider when you are nearing the end of treatment and considering egg donation and/or adoption as next steps, including the social, emotional, and ethical issues involved in making either choice. – *Ellen Glazer, LICSW, Private Practice, and author of Having Your Baby Through Egg Donation, and panelists*

**B-6 Navigating a Cycle: What to Expect and How to Manage**

Walk through an IVF cycle from the nurse's and the patient's perspective, learning how to plan your life around a cycle, including both the typical process and how to manage the unexpected. – *Kristen MacCutcheon, RN, BSN, Assistant Nurse Manager, Boston IVF, and panel of patients*

**C-4 Practical and Legal Issues of Donor Egg**

For those considering or planning to use donor egg to build a family, this session addresses working with an agency, finding a donor, costs, the relevant laws, contracts and more. – *Susan L. Crockin, JD, Principal, Crockin Law & Policy Group, LLC, and Amy Demma, JD, Founder and Principal, Prospective Families*

**C-5 Intimacy and Sex During Infertility Treatment**

This session addresses how the different reproductive treatments women affect a couple's relationship, how to maintain and rebuild trust and connection, and how to maintain emotional and sexual intimacy. – *Anne Korpi, DSW, Private Practice*

**C-6 Improving Wellness During Infertility Treatment**

Learn about ways to improve your physical and mental health during infertility through the relaxation techniques and positive psychology. – *Leslee Kagan, PhD, Women's Health, and Laura Malloy, LICSW, Benson-Henry Institute for Mind-Body Medicine, Massachusetts General Hospital*

ADOPTION

**A-7 International or Domestic Adoption?**

This workshop focuses on the key factors in deciding between domestic and international adoption. – *Dale Eldridge, LICSV, BCD, Coordinator of Parent Services, Adoption Choices, and panel of adoptive parents*

**A-8 Will this Child Be Mine? Family Bonding and Attachment in Adoption**

Gain an understanding of how bonding and attachment happen in adoptive families, the similarities and differences in parenting by birth and parenting in adoption, and the common fears about loving a child not related by blood. – *Speaker to be determined and panel of adoptive parents*

**A-9 Moving From Infertility to Adoption**

This discussion will explore the stages of moving into adoption, from stopping medical treatment through facing the emotional obstacles to considering adoption. – *Ellen Glazer, LICSW, Private Practice, and author of Beyond Infertility: The New Paths to Parenthood and The Long Awaited Stork: A Guide to Parenting After Infertility*

**B-7 Domestic Adoption: An Overview**

Learn about the options for domestic adoption and the process involved with each. The discussion will specifically address issues of costs, risks, and openness. – *Pat Brady, LICSW, Director, Act of Love Adoptions/MSPCC, and Paula A. Wisniewski, LICSW, Director of Adoptions, The Home for Little Wanderers*

**B-8 Paths to Successful Adoption: Adoptive Parents Speak**

Adoptive parents share their stories about their domestic and international adoptions, including how they made decisions along the way and advice they feel is important to share with others. – *Moderator and panel of adoptive parents*

**B-9 Ask the Director: Your Top Adoption Questions Answered**

This session allows agency directors to share the top things they would like you to consider when pursuing the dream of adoption. You will also have an opportunity to ask questions of your own. – *Ann Rankowitz, LICSW, Regional Manager, Wide Horizons for Children, Rhode Island; Marla Allisan, LICSW, JD, Director, A Full Circle Adoptions, and Bonnie DeLongchamp, Director of Community Outreach, Alliance for Children, Inc.*

**C-7 International Adoption: An Overview**

Learn the tools for making the decision to adopt internationally, selecting both the country and the child, covers the home study, the new Hague rules, emotional and legal risks, costs, time frame, and more. – *Patricia Whyte, National Registry of International Adoption Consultants, Inc.; Pat Horowitz, Director of Clinical Services, Wide Horizons for Children; Kate Ingalls-Maloney, International Adoption Coordinator, Children's Home Society & Family Care, and panelist*

**C-8 International or Domestic Adoption: A Guide to Parenting After Adoption**

This workshop focuses on the key factors in deciding between domestic and international adoption. – *Joanna M. Glick, Director, Adoption Community of New England, and panel of adoptive parents*

**C-9 Legal Strategies in Domestic Adoption**

This session covers legal issues in domestic adoption, including reducing the risks to disrupting an adoption, a view on approaching open adoption agreements. – *Karim Kasarjian, Attorney at Law, Konowitz & Grossman*

EMBRYO DONATION

**A-10 Legal Issues in Embryo Donation**

This session explores the legal status of the embryo by presenting existing laws and prior cases, the legal considerations that potential donors and recipients should consider when evaluating embryo donation, and the elements in a contract between donors and recipients. – *Susan Crockin, JD, Principal, Crockin Law & Policy Group*

**B-10 Medical Issues in Embryo Donation**

The workshop explains medical screening for potential embryo donors, the recipient medical evaluation, medical considerations for donors and recipients, and the transfer procedure; as well as provides recent statistics about embryo donation success rates.

**C-10 Mental Health Issues in Embryo Donation**

Learn the differences between embryo donation and oocyte donation, the purpose of psychological evaluation for potential donors and recipients, informed consent, the psychological evaluation, and the role of donors and recipients. – *Jan Elman Stout, PhD, Psychologist, Chicago, IL*

# Control and Enhancing Fertility"

11:15 PM

SESSION D: 3:40-5:00 PM

## Explained

through evaluation to know the shortcomings are likely to be successful. - R. Ian Hardy, Director of New England

## What's Next?

questions to ask your doctor, reasons why cycles are irregular. - Ania Kowalik,

## Donor Egg

process, cycle success or failure, overview of the emotional aspects of deciding to pursue. - Medical Director, Fertility, LLC, and Nancy Swirida, New England

## Donor Egg

to build a family through an agency, finding a donor, and more. - Robert Swirida, Fertility & Egg Donation, DeLisle, P.C.

## Relationship

reactions of men and women to manage conflict and how to nurture emotional connection. - Nolan, LICSW, DCSW,

## Fertility

physical and emotional aspects, response, yoga, meditation, MS, NP, Director, Fertility, Director of Yoga and Body Medicine at

## Overview

to adopt internationally. This session covers requirements, health, finances, age restrictions, and more. - International Director, EuroAdoption, MSW, LICSW, Director for Children, Inc.; Adoption Partner Program and Family Services, and a

## Decision?

in deciding between options. - Clark, past Executive Director, New England, Inc., and

## Options

for infant adoptions, including the adoption process and agreements. - Arlene Greenberg

## Donation

of eggs and sperm or embryos, genetic consultations, informed consent agreements, and counseling issues for donors. - Psy.D., Clinical Psy-

## D-1 Infertility and Age: Medical and Emotional Issues

For the woman over age 40 who wants children, learn how the aging process affects fertility and which diagnostic and treatment options are appropriate, and gain understanding of the emotional issues and challenges of trying to conceive. - Jared Robins, MD, and Emily Spurrell, PhD, Division of Reproductive Endocrinology and Infertility, Women and Infants Hospital of Rhode Island

## D-2 Knowing When to Stop Treatment: A Medical and Psychological Perspective

A consideration of the medical and emotional factors that help in deciding when to end infertility treatment and move on to other family building options. - Selwyn Oskowitz, MD, Boston IVF, and Merle Bombardieri, LICSW, Wellspring Counseling Center

## D-3 Adding Complementary Therapies to Your Treatment

This session will cover complementary treatment approaches and modalities such as acupuncture, Chinese herbs, massage, nutrition, and lifestyle tips for the infertility patient in between and during a medical treatment cycle. - Lyn Swirida, LicAc, MAC, DiploAc, Center for Complementary Medicine, Inc.

## D-4 Donor Conception Discussion: Answering the Tough Questions

Explore the ethical and emotional challenges of donor conception (DE, DI) including who, what, and when to tell, and discuss the complex feelings and issues surrounding this family building option. - Nancy Docktor, RN CS, Fertility Centers of New England, and Susan Levin, LICSW, Reproductive Science Center

## D-5 How I Resolved my Infertility: Stories from the Other Side

Hear from those who have resolved their infertility through a variety of choices, including IVF, donor egg, adoption and secondary infertility. - Holly Simons, PhD, LICSW, Private Practice, and panelists

## D-6 Dealing with the Outside World: Family, Friends, and Work

Gain ideas, support, and resources for coping with the often-difficult, insensitive, or awkward interactions with friends, family, and co-workers during the struggle and isolation of infertility. - Linda Gelda, LICSW, Private Practice

## D-7 Domestic Adoption: An Overview

Learn about the options for domestic adoption and the process involved with each option. The discussion will specifically address issues of costs, risks, and openness. - Dale Eldridge, LICSW, BCD, Coordinator of Parent Services, Adoption Choices; Betsy Hochberg, LICSW, Director, Adoption Resources, and panel of adoptive parents

## D-8 Paths to Successful Adoption: Adoptive Parents Speak

Adoptive parents share their stories about their domestic and international adoptions, including how they made decisions along the way, and advice they feel is important to share with others. - Nancy Rosenhaus, LICSW, Associate Director, Adoptions With Love, and panel of adoptive parents

## D-9 Effects of Drug and Alcohol Exposure on Development

Learn about the health and developmental issues that could be a factor in adoption, including the impact of prenatal conditions (drug use, alcohol use, smoking), the quality and verification of information, and area resources to help you assess each situation before and after the adoption. - Barbara Morse, PhD, Developmental Psychologist and Director, The Fetal Alcohol Education Program

## D-10 Focus Group to Assess Embryo Donation Session Content

Participate in a focus group to evaluate the Embryo Donation modules so that they may be modified for future conferences. - Goodman Research Group, Cambridge, MA



## STEP 1: ATTENDEE INFORMATION

Name #1: \_\_\_\_\_

Name #2: \_\_\_\_\_

Additional Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

## STEP 2: MEMBERSHIP (see reverse for the benefits of membership)

If you are not yet a member, join now and save on registration fees.

\_\_\_ \$55 individual or household \_\_\_ \$150 professional

## STEP 3: REGISTRATION\* - (Lunch included with registration.)

Choose one of the following options:

### STANDARD REGISTRATION — received by 10/23/08

RESOLVE Members:  \$115 Individual  \$199 Couple  
Non-members:  \$185 Individual  \$350 Couple  
Family & Friends:  \$70 per person for 3rd person

### WALK-IN REGISTRATION — received after 10/23/08\*\*

RESOLVE Members:  \$135 Individual  \$239 Couple  
Non-members:  \$205 Individual  \$390 Couple  
Family & Friends:  \$90 per person for 3rd person

## STEP 4: CONTINUING EDUCATION CREDITS

(7.2 hours for nurses as established by the MA Board of Nursing; 6.5 hours for social workers as established by the National Association of Social Workers)

Nursing  Social Work, License # \_\_\_\_\_ \$35 processing fee

## STEP 5: PAYMENT

Total Fee \$ \_\_\_\_\_

Check Enclosed, payable to RESOLVE of the Bay State, Inc.

Credit Card:  VISA  M/C  Amex  Discover

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Signature: \_\_\_\_\_

## STEP 6: WORKSHOP SELECTION

Select only ONE workshop per person in each session.

HINT: Make the most of your registration fee. Attend with a partner or friend and register for eight different workshops total!

	Session A	Session B	Session C	Session D
Person 1				
Person 2				
Person 3				

STEP 7: Mail or fax this form with your payment to be received at our office by October 23, 2008.

TO: RESOLVE of the Bay State, Inc.  
395 Totten Pond Road, Suite 403  
Waltham, MA 02451

OR Fax this form with credit card information to: 781-890-2249

\*Registration fees can be refunded with a written cancellation request received by October 17, 2008. No refunds will be given after that date. Financial assistance is available. Call 781-890-2225 or email admin@resolveofthebaystate.org for more details.

\*\* Lunch is not guaranteed with walk-in registration.

11:15-3:40 PM

Continued from page 9

a compassionate approach and deep commitment to helping individuals and couples create a family. Be prepared to take lots of notes and ask all your questions, and at least one “gem” will certainly come your way.

Many attendees are moved by conversations with, or hearing from, other attendees or parent panelists. At last year’s conference, I sat down for lunch at a table where two couples were deeply engaged in conversation. They were discussing IVF cycles and the ups and downs of the process. The connection they made was meaningful, as they were talking with intense focus, smiling, and even laughing at times! This organization is a big believer in the importance of peer-to-peer support — especially the kind you receive in person. Who else but a peer can truly know, and share, the pains and struggles of your experience? We affirm that sharing with peers can bring deep relief and a sense of being truly understood, at last.

Whatever brings you to our conference, I believe you will come away from the experience and say of at least one of these observations — yes, that happened to me! That is our hope, and our aim, in putting on this conference for you. We want you to leave with new ideas, new insight, and new confidence about options and choices. We believe you will not be alone in finding our conference a “life-changing experience.”

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\*Paulus and colleagues, Fertility and Sterility, 2002 \*\*Domar and colleagues, Fertility and Sterility, 2000

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*Continued from page 8*

also had no control over how this information would be given to the child. If it were imparted in a secretive manner, the child could perceive his or her origins as shameful and negative.

Even if imparted in a positive light, we had strong concerns about how the potential child might feel about having been donated as an embryo, with the knowledge that we had chosen not to give birth to them. How would it feel to the child born through embryo donation – knowing that we opted not to parent them, yet opted to parent their siblings? (It felt different to us from adoption, as adoption often results from an unplanned pregnancy, because we had planned and desperately wanted to be parents.)

**Thaw our embryos, or do a transfer with them to a location that is not possible for conception.** We didn't feel comfortable with this option. It seemed to us that it would be a sad way to end this process, and that nobody would benefit from our embryos' creation. We felt there was a more positive road to take.

**Donate our embryos to medical research.** These embryos could be used either to further research into better infertility treatments, or be used to create embryonic stem cells. Since

we both have science backgrounds, we know the importance and potential of stem cell research to improve or save the lives of people with debilitating or lethal diseases. This felt like a powerful, positive choice for us. We checked with our clinic and found out that in Boston, one of the leaders in this field was receiving donated embryos from IVF clinics. This was the best choice for us as a couple, and as a family.

### **Our Conclusion**

A few weeks ago, more than a decade after we began our infertility odyssey, we signed the forms to donate our embryos to research. There were tears in our eyes remembering where we were, and feelings of loss, but also feelings of gratitude for where we are now. Our sadness was buoyed by a discussion of the latest stem cell research advances made possible through donations such as ours.

I think of all the thousands of frozen embryos (estimates are as high as 400,000), and the couples everywhere wondering what to do, which is a testament to how difficult this decision can be. We urge everyone to think about this issue early on, and research your options. Consider professional counseling if the burden of making the decision becomes too great. The answer that you will arrive at through research, thoughtful soul-searching, and dialogue, will be the answer that is right for you.

Questions about your fertility?  
We have answers.



## Advocacy Update

### Massachusetts Infertility Mandate

During this past year, RESOLVE of the Bay State has been involved in an effort to improve the definition of “infertility” in the Massachusetts mandate so that women who conceive but have a miscarriage aren’t deemed to be “fertile” and ineligible for insurance coverage. A bill to achieve this goal was introduced in the Massachusetts Senate by Senator Thomas McGee, and we supported the bill and worked for its passage. In November, Lee Collins and volunteer A. Moncreff testified before the state Financial Services Committee, and RESOLVE of the Bay State members sent hundreds of emails, letters, and voice messages to their legislators urging them to support the bill. It passed in the initial committee, but lapsed when the legislative year came to an end.

We are currently working with Senator McGee’s staff to re-introduce the bill in the next legislative session in January 2009. Please stay tuned, as we may need your help!



*Dr. Mark Hornstein receives Hope Award for Advocacy*

### Area RE Receives Advocacy Award

At the Night of Hope gala, held in New York City on June 3rd to benefit RESOLVE, Inc., Mark D. Hornstein, MD, Director of the Center for Reproductive Medicine at Brigham and Women’s Hospital, received the national organization’s Hope Award for Advocacy.

Dr. Hornstein was honored that evening for his advocacy efforts around insurance coverage for infertility treatment. RESOLVE of the Bay State offered him congratulations for “taking his commitment to resolving infertility from the clinical setting to the halls of the Massachusetts State House,” as he has worked in tandem with the Bay State’s Advocacy Committee on a variety of legislative issues, providing leadership and making invaluable connections on Beacon Hill.

Dr. Hornstein is also President of the Society of Assisted Reproductive Technology (SART) and is an Associate Professor of Obstetrics, Gynecology, and Reproductive Biology at Harvard Medical School.

## Building Families Through Adoption

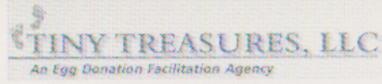


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*We Journey With You*

*Hope is the thing with feathers*

*That perches in the soul*

*And sings the tune without  
the words*

*And never stops — at all  
Emily Dickinson*

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\$ 55 – Basic Membership

\$150 – Professional Membership

\$ 20 – Donor Egg Information Packet

\$ 10 – Adoption Information Packet

\$ 5 – Insurance Information Packet

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*Contributions over the Basic membership fee are tax deductible to the extent of the law.*

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**\*Please Note: RESOLVE of Greater Hartford does not accept credit card payments.**

## IS A SUPPORT GROUP RIGHT FOR YOU?

### Is a Support Group Right for You?

By Diane Clapp, BSN, RN, © RESOLVE, Inc.

If any of the following statements apply to you, you may want to consider joining a RESOLVE professionally led support group.

- I'm feeling lonely and isolated.
- I have very few people to talk with about my infertility. No one understands!
- Everyone I know is pregnant or has children.
- My husband/wife is the only one I have for emotional support.
- Infertility is affecting my work and career.
- I feel that my life plan is out of control.
- I'm having trouble navigating through my medical treatment options.
- I can't decide when "enough is enough."
- Holidays and coping with family and friends are becoming more and more difficult.

You may be hesitant to join a support group because of some assumptions about what happens in a group.

- Being in a RESOLVE support group is like going to therapy.

No, a support group is not designed to offer professional counseling or psychological therapy. It is, however, therapeutic to talk with others about an intense experience like infertility.

- I'll have to bare my soul and talk about the most private areas of my life.

It is up to you to decide how much information and emotion to share with the group. You remain in control.

- A support group will go on for months. A RESOLVE support group is limited to 8 to 10 sessions.
- Joining a support group of infertile women or couples will just make me feel worse.

You will receive support for your pain and disappointment and will also learn new methods of coping that can help you move forward.

### More about Support Groups

RESOLVE Support Groups provide a wonderful opportunity for people to meet others who are sharing the experience of infertility. They are designed to help individuals and couples express feelings and concerns in a safe place, develop a support network, and face difficult decisions with renewed resolve and increased awareness of resources available for help. For many, these groups provide a way to deal with their pain and explore new options.

These Support Groups are led by an experienced mental health professional and meet for 8–10 weeks. There are usually 4–8 people in a group. This longer format allows for fuller exploration of a variety of infertility-related topics and the development of personal connections between group members.

Groups form as soon as there are enough interested participants. Some groups form quickly (2–3 months) while others take longer to form. You should apply as soon as you think you are interested to ensure your involvement in a group when you really need it. An application form is available on our website: [www.resolveofthebaystate.org](http://www.resolveofthebaystate.org).



## Trying to Get Pregnant?

*Enhance your opportunity to conceive at home.*

The FDA-cleared Conception Kit® allows you to go *beyond* ovulation timing by concentrating all available sperm where they need to be at the best time for conception.

This is possible by using the primary component of the kit: the soft, flexible Conception Cap®.



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**Visit [www.conceptionkit.com](http://www.conceptionkit.com) to learn more.**

Orders may be placed through our website, or by calling **1-888-306-6366**. Use coupon code RESOLVE during checkout and enjoy \$25 off. With each coupon code used, **ConceiveX, Inc. will make a donation to RESOLVE.**

 **Conception Kit®**  
at-home conception system

# Why are so many couples so happy with us? *It must be the little things.*

Fertility specialists who are leaders in their field. Care that's personalized to meet your specific needs. The latest research, techniques and technologies. Our goal is to provide you with the greatest chance of success, while giving you the emotional support you need.

Visit us at **www.uconnfertility.com** or call us at one of the numbers listed below for more details and to register for one of our IVF information sessions.

## The Center for Advanced Reproductive Services



*Farmington office:*  
Dowling South Building  
263 Farmington Avenue  
Farmington, CT 06030-6224  
(860) 679-4580

*Hartford office:*  
100 Retreat Avenue  
Suite 900  
Hartford, CT 06106  
(860) 525-8283

John Nulsen, MD  
Donald Maier, MD  
Claudio Benadiva, MD, HCLD  
David Schmidt, MD  
August Olivar, MD  
Lawrence Engmann, MD, MRCOG

*Hamden office:*  
2080 Whitney Avenue  
Suite 250  
Hamden, CT 06518  
(203) 230-4400



Affiliated with The Warren Alpert Medical School of Brown University and Tufts-New England Medical Center

## Women & Infants' Reproductive Technologies

**IVF • Recurrent Pregnancy Loss • ICSI  
Donor • IVM • Egg Freezing • PGD**

Offering a full range of testing and treatment services for infertility, hormone problems, endometriosis, fallopian tube damage, menstrual pain and irregularity, and more

Evening appointments available

Appointments are also available in East Greenwich, South Kingstown, and Woonsocket, RI, in Fall River and Swansea, MA, at Tufts-New England Medical Center in Boston, MA, and at Day Kimball Hospital in Putnam, CT.



Dr. Sandra A. Carson, Director    Dr. Bala Bhagavath    Dr. Andrew Blazar    Dr. John E. Buster  
Dr. Gary Frishman    Dr. Sasmira Lalwani    Dr. Kelly Pagidas    Dr. Jared Robins    Dr. Carol Wheeler

One Blackstone Street | Providence, Rhode Island | 401-453-7500 | [www.womenandinfants.org](http://www.womenandinfants.org)

## NON-RESOLVE PROGRAMS

The following programs may be of interest to RESOLVE members. A listing does not constitute an endorsement by RESOLVE. See page 19 for advertising and editorial policies. DEADLINE for Winter 2009: November 25, 2008.

### **ADOPTION COMMUNITY OF NEW ENGLAND, INC.**

If you think adoption might be in your future, learn all you can about it from the experts. ACONE has been providing information and support about adoption since 1967. It is one of the oldest non-profit adoption support organizations in the country. ACONE sponsors the Annual New England Adoption Conference, recognized nationally for its comprehensive coverage of all adoption issues. ACONE offers half-day seminars throughout the year, which give the complete overview of all the adoption options. There are also baby-care classes for soon-to-be adoptive parents, with life-like dolls for hands-on practice.

**To learn details of program offerings, as well as dates and registration information, contact ACONE at 1-508-366-6812 or [www.adoptioncommunityofne.org](http://www.adoptioncommunityofne.org)**

### **ADOPTIONS WITH LOVE, INC.**

**188 NEEDHAM STREET, NEWTON, MA**

Adoptions With Love, Inc. is a non-profit, independent, **FULL SERVICE** domestic adoption agency placing newborn infants for over 20 years into loving homes. With our extensive experience, we are committed to helping inquiring couples become successful adoptive parents in 6–18 months.

**We offer FREE consultations with a staff social worker. Please call 617-964-4357 to learn more about Adoptions With Love's program or visit [www.adoptionswithlove.org](http://www.adoptionswithlove.org).**

### **FREE ADOPTION CONSULTATION**

Adoption Choices offers individual adoption consultations free of charge to people who are exploring adoption as a way to build their family.

#### **Topics:**

- ◆ Current adoption options
- ◆ Specific steps toward a successful placement
- ◆ Emotional, legal, and financial issues inherent in adoption

Appointments are scheduled at your convenience at our Framingham office.

**Please call or send e-mail to:  
Dale Eldridge, Coordinator of  
Adoptive Parent Services  
508-875-3100 or 1-800-872-5232  
[deldridge@jfsmw.org](mailto:deldridge@jfsmw.org)**

### **ADOPTION RESOURCES INFORMATION MEETING**

Adoption Resources, a non-profit agency for more than 130 years, invites prospective adoptive parents to our Informational meetings. We offer a range of placement programs, including parent identified, and international. Meetings are free and held in our office at 1430 Main Street, Waltham.

**For more information or to register, please call 617-332-2218 or 800-533-4346**

### **MIND/BODY PROGRAMS FOR INFERTILITY**

**CREATED BY DR. ALICE DOMAR**

(Bestselling Author and International  
Authority in Mind/Body Medicine)

**ENHANCE YOUR CHANCE!** Did you know that decreasing stress levels has shown to increase pregnancy rates? **Studies show that participants in mind/body programs more than double their chance of having a baby!** Let us give you hope, healing, support and resolution.

#### **Three New Programs to Choose From**

- Ten Week Evening Program starting October 22, 2008
- Ten Week Evening Program starting November 11, 2008
- Weekend Retreat – April 18 – 19, 2009

**To register, contact (781) 434-6578 or [domarinfo@domarcenter.com](mailto:domarinfo@domarcenter.com), or online at [www.domarcenter.com](http://www.domarcenter.com)**

# NEWSLETTER POLICIES AND CHAPTER LEADERS

## CONTACT INFORMATION

This Newsletter is published quarterly with a circulation of approximately 1,400.

**Send all Correspondence to:**

RESOLVE of the Bay State  
395 Totten Pond Rd, Ste 403  
Waltham, MA 02451

**E-mail:** Admin@resolveofthebaystate.org  
**Phone:** 781-890-2225  
**Fax:** 781-890-2249  
**Website:** www.resolveofthebaystate.org

## ADVERTISING POLICY

This Newsletter accepts paid advertisements. Advertisements submitted must be emailed as PDFs and must be approved by the Editor. Please call 781-890-2225 for rate and size information. We limit our paid advertisements and will accept them on a first-come, first-served basis. We also accept announcements of upcoming events for inclusion in the Non-RESOLVE Programs section, and Requests for Contact ads from those conducting research studies.

The service providers advertising in this newsletter have not been screened or required to meet any specific criteria and have paid a fee to be included. Therefore advertisements for services/persons/providers should not in any way be considered endorsements or recommendations, either express or implied, by RESOLVE of the Bay State or RESOLVE of Greater Hartford.

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## NEWSLETTER SUBMISSION DEADLINES

Winter 2009	November 25, 2008
Spring 2009	February 26, 2009

## RESOLVE OF THE BAY STATE BOARD & STAFF

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## RESOLVE OF GREATER HARTFORD VOLUNTEERS

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**E-mail Coordinator:**

open

**Helpline Coordinator:**

Jaime Rotatori

**Membership/Mailing:**

open

**Newsletter Coordinator:**

Sheri Barry

### Outreach:

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Jennifer Natoli

**Peer Group Support:**

Janice Falk, Kim Griswold, Sheri Barry, Gwen Hamil & Jennifer Kanios

**Additional Volunteers:**

Monica Grabowy & June Cassidy

**Education Chair:** OPEN

*Please contact your local chapter if you are interested in becoming a volunteer.*

## EDITORIAL POLICY

This newsletter is primarily a vehicle for local news, events, and articles of interest. Members are encouraged to submit comments and articles. The editor reserves the right to edit all submissions.



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Waltham, MA 02451

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[www.resolveofthebaystate.org](http://www.resolveofthebaystate.org)

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