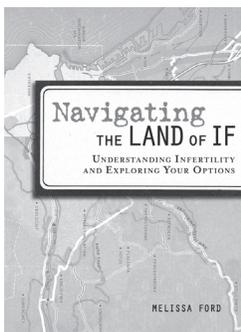




Navigating the Emotional Hardships of Infertility

By Melissa Ford

Editor's Note: Melissa Ford is the author of the award winning website, Stirrup Queens, and the author of the book, *Navigating the Land of IF*, from which this following excerpt is taken. She will be the keynote speaker at our Nov. 6th annual conference and her talk will be: "Just Relax: Combating Unhelpful Advice with Support."



As you might already suspect, paying a visit to the Land of IF is not for the faint of heart. The Land of IF got its name not only because IF is the abbreviation for "infertility" in the online world but also because there are so many ifs inherent in being here. In addition to navigating the various, confusing neighborhoods of this land, it is smack-

dab in the center of a Bermuda Triangle, a vortex where physical, financial, and emotional hardship converge.

The emotional part of this vortex may be the trickiest waters to navigate. First off, not everyone feels the same way about their own infertility. There are those who navigate easily in this area, never succumbing to the strong waves that break on the shore. But there are those of us (myself included) who go in with great intentions, determined not to be bowled over, but get sucked under the surf, regardless. It's understandable. After all, we are talking about a problem that not only affects your life today but also changes your future. And with far-reaching effects comes sweeping emotion.

It's easy to see how unique each person's emotional landscape is when it comes to infertility. Sadness, frustration, jealousy, anxiety, guilt, hope, excitement, anger, and despair all mix together. That's a pretty wide variety. And at the same time, you need to factor in additional variables: the development of your coping mechanisms, the perceived amount of support (or pressure) from your family and friends, and the perceived amount of time left before it's "too late."

In addition to sampling the full spectrum of emotions, you may feel more than one of them at the same time. For instance, you may be full of hope and yet weighted by despair at the start of a new cycle. You may be happy for your friend but jealous as well when he or she announces impending parenthood. You may wish you could leave trying behind, but also feel this overwhelming frustration to keep going, no matter what, until you beat infertility into submission.

And then there are the sudden swings from one end of the emotional spectrum to the other. You may wake up one

Continued on page 6

REGISTER TODAY!

**RESOLVE of New England's
Fertility Treatment, Donor Choices,
and Adoption Conference**

Saturday, November 6, 2010

Best Western Royal Plaza Hotel
Marlborough, MA

8:30 a.m. - 5:00 p.m.

(See pages 7-9 for complete details.)

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EDUCATIONAL PROGRAMS FALL 2010

PCOS: Fertility Treatment Options and Lifestyle Management
Teleseminar: You Can Be a Parent!

RESOLVE INFORMATION

It's easy to become a member of RESOLVE. Go to our website and click on "Membership."

Household Membership: \$55/year

Professional Membership: \$150/year

RESOLVE OF NEW ENGLAND Household Member Benefits

RESOLVE OF NEW ENGLAND provides compassionate and informed support, education, and advocacy to people in New England who are experiencing infertility and seeking to build a family. Join those who know what it's like to wish for a baby. You are not alone.

Chapter HelpLine — leave a message at 781-890-2225, for information and support from our Member Services Coordinator.

Quarterly Newsletter — includes information about our programs and services, as well as articles of interest.

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

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

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

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

Annual Conference — discounted fee for this day-long educational event with over 40 workshops focusing on infertility treatment, emotional issues, donor conception, and adoption.

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

Advocacy — for protection of the Massachusetts insurance mandate, implementation of mandates in New England states without a mandate, and for 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.

RESOLVE OF NEW ENGLAND Professional Member Benefits

We welcome professionals working in infertility, adoption, donor conception, and related fields to become professional members of RESOLVE OF NEW ENGLAND, the only organization providing direct services to people experiencing infertility in New England. RESOLVE OF NEW ENGLAND offers its professional members a number of benefits in addition to those available to our household, consumer members, including:

AS ALWAYS:

- By purchasing your new or renewed membership through us, **all proceeds stay local** and help us provide services to those experiencing infertility in the New England area.
- Option to advertise/list in our annual printed directory.
- Option to exhibit/advertise at our annual conference.
- Option to write articles for and advertise in our quarterly newsletters.
- Discounted pricing to events.
- Leadership/volunteer/presentation opportunities.
- Indirect benefits: advocacy for preservation of infertility insurance mandates and introduction of new mandates; media efforts on infertility issues.

IN THE WORKS:

- Basic 2-line (Name, Phone) alphabetical listing on our website.
- Name listed in quarterly newsletter as a professional member of RESOLVE.
- A badge for you to place on your website, indicating your RESOLVE Professional Membership.
- Discount on conference and program CEU processing fees – 50%.
- Professional Membership certificate.
- Membership card.
- Access to an online "Resource Center" with a searchable archive of past newsletters/articles.
- Access to a "Members Only" forum, with special designation as a Professional.

We are always looking for new ways to provide benefits and services to our members, both household and professional. If you have any suggestions on how we can better provide for our members, or if there is a feature or benefit you'd like to see, please let us know. And as always, thank you for your support of RESOLVE OF NEW ENGLAND!

RESOLVE OF NEW ENGLAND 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 attendees. **FEES** (unless indicated otherwise): \$20 per person for non-members; \$10 per person for RESOLVE members. Register in advance for these programs by emailing our office at admin@resolveofthebaystate.org, or by calling our HelpLine and leaving a message at 781-890-2225. Then simply pay at the door when you check in.

PCOS: Fertility Treatment Options and Lifestyle Management

With Dr. Alison Zimon, Boston IVF and Hillary Wright, MEd., RD, LDN, Director of Nutritional Counseling, Boston IVF/Domar Center for Mind/Body Health

Polycystic Ovary Syndrome (PCOS) is a metabolic disorder and is the most common cause of infertility, affecting 5-8% of women in the US. This syndrome causes various hormonal problems that interfere with ovulation, as well as other health issues.

Dr. Alison Zimon, who specializes in treating infertility patients with PCOS, will explain how this diagnosis affects the body and your fertility, and what medical treatment options are available.

Hillary Wright, registered dietitian with over 18 years experience counseling patients, and author of *The PCOS Diet Plan: A Natural Approach to Health for Women with Polycystic Ovary Syndrome* (available on Amazon.com), will discuss how diet, nutrition and exercise can be as successful as medications in controlling PCOS symptoms and also lead to an overall healthier body.

When: Monday, October 18, 2010, 7:00 – 9:00 p.m.
Where: The Walker Center, 171 Grove Street
Newton, MA 02466, in the Living Room

TELESEMINAR: You Can Be a Parent!

With Ellen Glazer, LICSW, therapist with many years of professional counseling experience in infertility and family building issues, and author of several books on these topics.

For many, infertility treatment is a long, arduous journey. Along the way, people may come to feel so defeated that they believe nothing will ever bring a child into their life. It is, however, possible for anybody to become a parent—whether heterosexual, gay or lesbian, or single—if one is open to all of the various possibilities for building a family. Those who persevere unanimously report being overjoyed at their outcomes, regardless of how their family is formed.

Ellen Glazer will offer some perspective on how people's feelings shift as they make their way through the infertility journey, and the importance of "the people they meet along the way."

**Limited to 20 participants.*

When: Wednesday, December 8, 2010, 7:30 – 8:25 p.m.

Fees: Free for RESOLVE members
\$10 per person for non-members

Register: Email admin@resolveofthebaystate.org
by 3:00 p.m., Wednesday, December 8th.

Members will receive call-in info immediately.

Non-members must pay \$10 first by visiting www.resolveofnewengland.org and clicking Donate on the homepage.

Massachusetts Insurance Call-In Hours

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

Tuesday, October 12, 2010 7:30-8:30 p.m.

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? Consult with our Insurance Advocate.

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

www.resolveofnewengland.org

*If you have questions,
we have answers.*



Answers
NEXT EXIT →

Providing infertility education, support and advocacy since 1974.
www.resolveofnewengland.org

PEER AND TOPIC DISCUSSION GROUPS

Peer discussion groups meet monthly on an ongoing basis and are led by a “peer” who is currently or has experienced infertility. These groups are a great way to share feelings, stories, and coping strategies in a safe place, with others who are facing similar challenges.

GENERAL INFERTILITY DISCUSSION GROUPS: General infertility discussion groups are open to those – women and men, couples and individuals – who have primary infertility (those with no children).

Waltham, MA: RESOLVE of the Bay State Office, 395 Totten Pond Rd., Suite 403
Times: Wednesdays, 7:00-9:00 p.m. Dates: October 6, November 10 and December 1, 2010

Worcester, MA: Tatnuck Park at Worcester, 340 May St.
Times: Wednesdays, 7:00-8:30 p.m. Dates: October 20, November 17 and December 15, 2010

Boston, MA: Morville House, 100 Norway St. (near Symphony Hall)
Times: Wednesdays, 6:00-8:00 p.m. Dates: October 20, November 17 and December 15, 2010

Amherst, MA: The Arbors at Amherst, 130 University Drive
Times: 7:00-9:00 p.m. Dates: Please see website for future dates.

Plymouth, MA: The Plymouth Professional Center Bldg., 116 Court St., 3rd floor offices of Plymouth Village
Times: Wednesdays, 6:30 p.m. Dates: November 3 and December 1, 2010

Warwick, RI: Panera Bread, 1000 Bald Hill Road, Ste. 11*
**Looking for a group leader. Please email if interested in hosting this group.*

Farmington, CT: UConn Health Center/Dowling South Bldg., 2nd floor Education Rm., 263 Farmington Ave
Times: Thursdays, 7:00 p.m. Dates: October 21, November 18 and December 16, 2010

Portland, ME: Mercy Hospital, Fore River Campus, 3rd Floor Conference Room, 175 Fore River Parkway
Times: Tuesdays, 6:30 – 8:00 p.m. Dates: October 12, November 9 and December 14, 2010

TOPIC DISCUSSION GROUPS: These are informal discussion groups that focus on a particular topic and are led by a volunteer with experience in that subject. Groups meet in our Waltham, MA office, 395 Totten Pond Rd., Suite 403, unless otherwise noted.

Pregnancy Loss Discussion Group: For those who have experienced a miscarriage/stillbirth/ectopic pregnancy, or recurrent pregnancy loss. Discuss the impact of loss and find support for the emotional experience of grief.
Times: Wednesdays, 7:00-9:00 p.m. Dates: October 27 and December 1, 2010 and January 19, 2011

Secondary Infertility Discussion Group: For those who are experiencing infertility while parenting. The struggles and frustrations of secondary infertility are unique. Join others who understand the challenges.
Times: Mondays / Tuesdays, 7:30-9:00 p.m. Dates: October 12 (Tues.), November 15 (Mon.) and December 6 (Mon.), 2010

Adoption Discussion Group: For those exploring adoption, informal discussion about the issues and concerns surrounding this family building option, led by an adoptive mother. Gain answers and strategies, connect with others.
Times: Thursday, 7:00-9:00 p.m. Date: October 14, November 18 and December 16, 2010

Donor Egg Discussion Group: For those considering donor egg as a way to build a family, a discussion of the issues, decisions, and emotions surrounding this family building option. This group is led by a donor egg mother and author.
Times: Mondays, 7:00-9:00 p.m. Dates: October 4, November 15 and December 13, 2010

Pregnancy After Infertility: For those currently pregnant, an informal discussion about issues and concerns.
Times: Mondays, 7:00-8:30 p.m. Dates: October 25, November 22 and December 20, 2010

Donor Egg Parents Group: For parents of children through egg donation. Children are welcome. Contact us with number attending and we will send you the address, as these groups meet on a rotating basis in the homes of parent volunteers.
Times: Sunday, 3:00-5:00 p.m. Dates: October 24, 2010 in Lexington, MA

Fees: Free to RESOLVE members. Nonmembers \$5 per person. **Registration:** Pre-registration is requested by email to admin@resolveofthebaystate.org or by phone to 781-890-2225. Walk-ins are also welcome to attend.

Predicting Ovarian Reserve and IVF Outcome

By Grace Lee, MD, Harvard Vanguard Medical Associates, Center for Fertility and Reproductive Health

Age-related decline in IVF pregnancy rates is a generalization attributed to egg quality and quantity, which decline over the reproductive years. For the individual woman, there have been several tests used both to deduce specific IVF response to stimulation and ultimately as a prognosticator of success. Traditionally early follicular phase (cycle day 2 or cycle day 3) values of estradiol and FSH (follicle stimulating hormone) have been used to predict IVF cycle response.

The clomiphene challenge test (CCCT) including day 3 and day 10 values of FSH is typically used in patients with normal day 3 values, but suspected decreased reserve due to age or prior history. In the CCCT, the response to clomid taken from day 5-9 of the menstrual cycle may yield an abnormally high FSH on day 10, indicating lack of ovarian reserve irrespective of normal baseline testing on day 3.

In Massachusetts, ovarian reserve testing is routinely performed for all IVF cycles due to insurer requirements. Women 40+ are required to have a CCCT. FSH levels are ideally less than 10, but insurance cutoffs for attempting IVF cycling may be much higher, from 12-15mIU/ml. Estradiols in early follicular phase should be low. The accurate interpretation of an FSH level requires concurrent estradiol being checked, as a higher estrogen level will artificially suppress the FSH level down to the normal range and therefore not reflect true FSH levels.

FSH and CCCT are indirect indicators of egg reserve—the idea being that a high level for FSH implies a smaller overall store of eggs from which to recruit ovulatory eggs, so that the effort for pituitary signaling has to be greater. There is also a less commonly used test of stimulation with low-dose FSH injections. A poor test response would be similar to the history of a patient who previously underwent stimulation with low-dose injectable gonadotropin drugs and did not have the expected average response.

More recently, direct markers of ovarian reserve such as inhibin B and anti-mullerian hormone (AMH) are being used to predict IVF response. Both biomarkers are produced by ovarian granulosa cells. Inhibin B is less discriminatory than AMH. Aging ovaries have low AMH levels with little variation, lower inhibin B, and shorter cycle lengths. AMH assays differ between those offered commercially here and in Europe. Any medical assessment must include background knowledge of the clinical cutoffs for the assay being used. A younger women's pat-

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tern includes higher AMH with significant variation days 2 to 7, so for women with AMH >1 ng/ml, the interpretation does depend on menstrual date, although in general it is relatively invariant across the menstrual cycle.

Ultrasound of the ovaries can be used to determine the number of pre-antral follicles on day 3 and can give an idea of ovarian reserve. There are concerns that there is less accuracy with this technique in younger patients, and some variability in ultrasound technique and therefore results. In very low and very high response, AMH is helpful in predicting ovarian stimulation along with a pre-antral follicle count. A recent meta-analysis published in *Human Reproduction Update* suggests that AMH is a better marker in predicting ovarian response to stimulation than age, FSH, estradiol, and inhibin B. Similar responses have been reported for both AMH and pre-antral follicle counts.

Ultimately, pregnancy outcome is not predictable by ovarian response alone. The decision to undergo IVF should be made in the context of a number of factors: live birth rates for age, consideration of all fertility factors, and prior response to stimulation if there is already a history of cycle attempt. For instance, a young woman (<35) with elevated FSH should be permitted an IVF cycle attempt, since a single good quality embryo would still have a high rate of implantation.

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morning feeling at peace with the state of things. Then, on the elevator ride up to your office, your colleague pulls out pictures of his one-month-old, and all of a sudden, your emotions are ricocheting off the walls.)

You should remain vigilant to the emotional demands of infertility and can utilize common outlets, such as therapy, journaling, and support groups. But those outlets don't serve all types of people; not everyone has the ability or desire to discuss feelings. ... If this is you, remember: Gaining emotional support should not be a source of even more struggle, so do whatever you know you need to do, not what you think you're supposed to do. Other outlets may be to distract yourself with another activity, to go out dancing, to get some acupuncture, or to volunteer.

Do whatever helps. But remember: "Help" does not mean "complete relief." In our culture, we are accustomed to having things work well. If we take a pain reliever,

we expect that the headache will disappear entirely. Emotions, of course, are different. They cannot be put to rest entirely—even by getting a full-body massage, or by dancing the Macarena until sunrise, or by chopping enough wood to get you through a Siberian winter. It's important to keep this in mind, because the impulse, when things don't work entirely, is to say, "It's not worth the effort." But it is. You may never find a solution that removes all the pain from your heart, but keeping up with these helpful activities will bring you a modicum of much-needed relief.

From the book "Navigating the Land of IF" by Melissa Ford. Excerpted by arrangement with Seal Press, a member of the Perseus Books Group. Copyright ©2009.

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Why You Should Attend Our Annual Conference

By Rebecca Lubens

Executive Director, RESOLVE of New England

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:

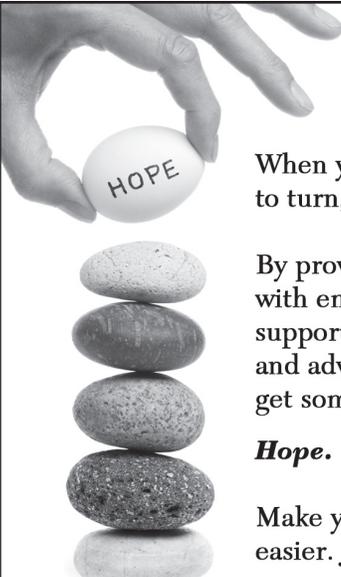
Many attendees have never before seen—in one place, at one time—so many people who also struggle with infertility. At 8:00 a.m. on Saturday Nov. 7th last year, attendees began to arrive at the conference center, at first in trickles and then in hordes. They all gathered in the ballroom to hear the keynote 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 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 hope about options and choices. We believe you will not be alone in finding our conference a “life-changing experience.”



When you don't know where to turn, we're here to help.

By providing our members with emotional and practical support, as well as education and advocacy, our members get something else:

Hope.

Make your journey a little easier. **Join RESOLVE today.**

ABOUT THE KEYNOTE SPEAKER



Melissa Ford is the author of the award-winning website, Stirrup Queens, and the book, *Navigating the Land of IF*, an insider’s guide to the emotional landscape of infertility. Ford is a founder of an infertility blogger revolution that is changing the way infertility patients interact with each other and their treatment providers. She is also a contributing editor at BlogHer, the premier women’s blog platform, and provides inspiration and leadership as she facilitates connections through social media. Ford completed her MFA at the University of Massachusetts-Amherst. She lives outside Washington, D.C. with her writer husband and their twins. Her new novel, *Life from Scratch*, will be released this year.

SESSION A: 9:15–10:30 AM

SESSION B: 11:00 AM–12:15 PM

SESSION C: 1:30–2:00 PM

TREATMENT OPTIONS

A-1 Infertility 101 ♦ 9:15 AM–10:45 AM (Note this is 15 minutes longer than other workshops.)
Learn about the infertility workup and how to interpret results, also about medications, success rates, when to move on to IVF and new treatments on the horizon, plus how to assess whether to pursue these options. – Richard Reindollar, MD, New Hampshire Fertility Center, Dartmouth Hitchcock Medical Center, and Christine C. Skiadis, MD, Fertility and Reproductive Health, Harvard Vanguard Medical Associates

A-2 Low Ovarian Reserve and Treatment of Poor Responders
This session covers ovarian reserve, the tests (FSH levels, etc.) available to evaluate it, and implications for treatment outcome. Also learn about treatment options and lab findings in the "poor responder." – Samuel Pang, MD, Medical Director, Reproductive Science Center

A-3 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, Executive Director, Domar Center for Mind/Body Health

B-1 Why Infertility Shouldn't Be Unexplained
Learn the importance of an early and thorough evaluation to enable diagnosis and treatment, and review the shortcomings of proceeding with treatments that are unlikely to be successful when the cause of infertility is unknown. – R. Ian Hardy, MD, PhD, Medical Director, Fertility Centers of New England

B-2 Journey Through the IVF Lab
Embryologists explain how they make critical decisions during the care and development of your embryos, explaining techniques critical to the success of a cycle including development and selection of embryos, assisted hatching, ICSI, day 2, 3, 5 transfers, and more. – Katherine Go, PhD, Scientific and Laboratory Director, Reproductive Science Center, and Catherine Racowsky, PhD, HLCD, Director, ART Lab, Center for Infertility and Reproductive Surgery, Brigham and Women's Hospital

B-3 Male Infertility
Learn about causes, testing, and treatment options — medical and surgical — for male infertility. – Steven Lazarou, MD, Boston IVF

C-1 Environmental Factors & Infertility
Learn about new research that shows how chemical exposures and lifestyle choices can affect fertility and what changes you can make that may improve your outcomes. – Mary Elizabeth Sabatini, General Hospital Fertility Center, and Susan M. Schacter, Harvard School of Public Health

C-2 My IVF Cycle Didn't Work: What Next?
After a failed IVF cycle, an examination of your cycle, changes to make in your next cycle may not work, and ideal cycle parameters. – Mary Elizabeth Sabatini, MD, Medical Director, Cardone Reproductive Services, and David Schmidt, MD, Cardone Reproductive Services, UConn

C-3 In Vitro Maturation (IVM)
Learn about the technique of In Vitro Maturation, which requires minimal, or no, stimulation with gonadotropins, the side effects of these medications, and monitoring and time commitment - as well as who is a good candidate. – Jared Roberson, MD, Reproductive Endocrinology and Infertility, Hospital of Rhode Island

INSIGHTS AND INFORMATION

A-4 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 of either choice. – Ellen Glazer, LICSW, Private Practice, and author of *Having Your Baby Through Egg Donation*, and panel of parents through adoption and egg donation

A-5 Strategies for Survival: Balancing Infertility, Marriage, and Life
Learn proven strategies to help you overcome the emotional challenges of infertility, communicate effectively with your spouse or partner, and maintain a sense of control over your life. – Kristen Magnacca, coach, motivational speaker, and author of *Love & Infertility*, RESOLVE's Best Book 2009

B-4 Embryo Donation: Is This an Option for Me?
The discussion will speak to both donors and recipients about the many issues, including legal considerations, involved in embryo donation. – Susan L. Crockin, JD, Principal, Crockin Law & Policy Group, and Amy Demma, JD, Founder and Principal, Prospective Families

B-5 Navigating a Cycle: What to Expect and How to Manage
Walk through an IVF cycle from the nurse's and the patient's perspectives, learning how to plan your life around a cycle, including both the typical process and how to manage the unexpected. – Carol Lesser, NP, Boston IVF, and panel of patients

C-4 Intimacy and Sex During Infertility Treatment
This session addresses how the different treatments and women to infertility affect a couple's relationship, manage conflict and rebuild trust and confidence, nurture emotional and sexual intimacy. – Susan M. Schacter, LICSW, DCSW, Private Practice

C-5 Improving Wellness During Infertility Treatment
Individuals and couples will learn, practice, and implement better and in control, both physically and emotionally, research-based techniques such as the use of positive psychology, and cognitive restructuring. – Frank, CNS, President, Mind Body Medical

DONOR EGG SEMINAR*

A-6 Preparing the Way for Egg Donation
This session covers the medical overview of the egg donor process, as well as information about donor screening, coordinating the donor with the recipient, and known and anonymous donors. – Rachel Ashby, MD, and Holly Hughes, RN, Center for Infertility and Reproductive Surgery, Brigham and Women's Hospital

B-6 Finding a Donor and the Legal Issues
Finding a donor using an egg donation agency, how the process works, and the costs involved. Legal issues and contracts will be covered. – Robert Nichols, Esq., President, Center for Surrogacy & Egg Donation, Inc., and Kathleen DeLisle, Esq., Nichols & DeLisle, P.C.

DONOR EGG SEMINAR*

C-6 Psychosocial Issues in Donor Egg Donation
Therapists will discuss the emotional and psychological issues for donors and women, secrecy vs. privacy, and also how to talk with your child and others about the process. – Robert Nichols, RNCS, Private Practice, and Laurie A. Demma, MD, Center for Infertility and Reproductive Surgery, Brigham and Women's Hospital

ADOPTION

A-7 Adoption: Getting Started
This session provides an overview and comparison of all types of adoption: domestic, international, and foster care adoption, including strategies for starting the adoption process as well as an overview of resources. – Joan Lefler Clark, MEd, *Adoptions Explained, LLC*

A-8 Will This Child Be Mine? Family Bonding and Attachment in Adoption
Gain an understanding of how bonding happens 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. – Carol Sheingold, LICSW, *Adoption Simplified*, and Deborah Silverstein, LICSW, *Focus Counseling*, and panel of adoptive parents

B-7 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. – Amy Cohen, LICSW, Executive Director, *Adoptions With Love, Inc.*, and panel of adoptive parents

B-8 Legal Strategies in Domestic Adoption
Covers the legal issues in domestic infant adoptions, including reducing the risks to disrupting the adoption and a view on approaching open adoption agreements. – Arlene Kasarjian, Attorney at Law, Konowitz & Greenberg

C-7 Financing Adoption and Egg Donation
Compare adoption and egg donation from a financial perspective and learn about the costs and how to plan a family building option. – Jennifer Adams, Certified Financial Planner Practitioner of Financial Planning Services, and Amy Demma, JD, Founder, Prospective Families

C-8 Working with Birthparents
This session covers issues related to working with birthparents from initial contact and during wait time, after the adoption is finalized, including a view on realities related to openness. – Raquel M. Lichtenstein, LICSW, BCD, *Adoption Choices*, and Marla Allisan, Director, A Full Circle Adoptions, and a panel of adoptive parents

ADOPTION SEMINAR*

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. – Anne Coleman, PhD, *Adoption & Beyond Counseling Services*

*These workshop tracks are identical to our stand-alone, in-depth Adoption and Donor Egg Decision Making Seminars.

B-9 Domestic Adoption: A "How-To" 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. – Marla Allisan, LICSW, JD, Director, A Full Circle Adoptions, and Betsy Hochberg, LICSW, Director, Adoption Resources

ADOPTION SEMINAR*

C-9 International Adoption: A "How-To" Overview
Learn the tools for making the decision to adopt internationally, selecting both the country and the agency, and the home study, the new Hague requirements, emotional, and legal risks, costs, time frame, and more. – Ava Sarafan, LICSW, *Clinical Social Work*, and Amy Cataudella, MSW, LICSW, *Wide Horizons*

BREAK & VISIT EXHIBITS 10:30–11:00 AM

LUNCH & VISIT EXHIBITS 12:15–1:30 PM

BREAK & VISIT EXHIBITS 2:00–2:30 PM

ASK THE EXPERTS

4:20–5:00 PM

Ask the Experts Q&A Sessions – Attend an informal, open format question-and-answer session to gather advice after a long day, participate in the yoga or mind/body workshops and learn basic relaxation/stress reduction techniques. *Registration is not needed for these sessions only.*

Ask the Reproductive Endocrinologist
Dr. Selwyn Oskowitz, Boston IVF, and Dr. Jared Robins, Women and Infants Hospital, RI – Your infertility medical questions answered.

Ask the Acupuncturist
Jose Ruiz, Lic. Ac., MAOM, Dipl. O.M., *Family Acupuncture & Herbs of Reading* – Questions on herbs and acupuncture, and a chance to experience acupuncture.

Ask the Nutrition Expert
Jorge Chavarro, MD, ScD, Harvard School of Public Health – Lifestyle and diet tips to boost fertility.

The Mother-Daughter Connection
Merle Bombardieri, LICSW, *Wellspring Counseling Center* – Talking to your mother for comfort and support during the struggle with infertility.

Ask the Therapist: For Men Only
R. Tracy MacNab, PhD, CGP, *Marino Center for Integrative Health* – Informal opportunity to ask questions in a male-only environment.

Ask the Donor Egg Agency Expert
Robert Nichols, Esq., *Center for Surrogacy and Egg Donation, Inc.*, and Julie Richardson, *Tiny Treasures* – Questions on working with an agency, finding a donor, costs, and more.

Ask the Adoption Agency
Adoption agency questions on all topics.

Fertility
 chemical/environmental factors affect fertility, and find ways to affect treatment options. – *Kelly Lynch, MD, Massachusetts General Hospital, and Shelley Ehrlich, PhD, Harvard Medical School*

What's Next?
 types of questions to ask your doctor, reasons why you may not get pregnant. – *Vito R. Spina, MD, Division of Reproductive Medicine, Brigham and Women's Hospital*

Maturation - which hormones to use, and how to use them. – *Josephine M. Spina, MD, Division of Reproductive Medicine, Brigham and Women's Hospital*

Reactions
 emotional reactions of men and women to infertility, how to cope, and how to communicate. – *Anne Korpi Dolan, Harvard Medical School*

Relaxation
 and discuss feeling relaxed, through relaxation techniques, and how to structure your day. – *Janet Associates*

Ethical Issues
 ethical issues for men and women when deciding how/when to use a donor egg. – *Nancy Lubetsky, LICSW, and Nancy Bringham, MD*

Financial
 from a financial and insurance perspective. – *Financial Advisor, Ameriprise Financial Services, Inc.*

Birth and Adoption
 with birthparents, and ongoing contact with birthparents. – *Woodward, MSW, and Allisan, LICSW, JD, panel of birth and adoption*

Adoption
 "How-To" Overview of international adoption. This session covers requirements, health, and age restrictions. – *Supervisor, MAPS, Horizons for Children*

Additional information on a topic of interest. Or if you want to unwind and relax. Room schedules provided at the conference. **Pre-registration**

Expert
 professionals will answer your questions about adoption.

D-1 Infertility and Age: Medical and Emotional Issues
 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. – *Kelly Lynch, MD, IVF Medical Director, Baystate Reproductive Medicine, and Emily Spurrell, PhD, Division of Reproductive Endocrinology and Infertility, Women & 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 options. – *Selwyn Oskowitz, MD, Boston IVF, and Merle Bombardieri, LICSW, WellSpring Counseling Center*

D-3 Adding Complementary Therapies to Your Treatment
 This session covers the use of complementary treatment modalities such as acupuncture, Chinese herbs, and the latest research on how diet and nutrition can play a role in fertility. – *Jose Ruiz Lic. Ac., MAOM, Dipl. O.M., Family Acupuncture & Herbs of Reading, LLC, and Jorge Chavarro, MD, ScD, Harvard School Public Health and co-author of "The Fertility Diet"*

D-4 Dealing with the Outside World: Family, Friends, and Work
 Gain ideas, support, and resources for coping with the insensitive or awkward interactions with friends, family, and co-workers during the struggle and isolation of infertility. – *Deborah Issokson, PsyD, Counseling for Reproductive Health and Healing*

D-5 Donor Sperm and Donor Egg: Answering the Tough Questions
 Explore the ethical and emotional challenges of using a donor to conceive, including who, what, and when to tell, and discuss the complex feelings and issues surrounding donor conception. – *Nancy Docktor, RNCS, Private Practice, and Lynn Nichols, LICSW, Boston IVF*

DONOR EGG SEMINAR*

D-6 Donor Egg Parents Speak
 A panel of parents through donor egg will talk about their experiences and answer questions. Included will be a discussion of how parents talk with children about their origins. – *Adele Kauffman, PhD, Reproductive Science Center, and panel of donor egg parents*

D-7 Domestic Adoption: A "How-To" 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. – *Dawn Smith-Pliner, Founder and Director of Post-Adoption Services, Friends in Adoption, and Bonnie DeLongchamp, Alliance for Children, Inc.*

D-8 Effects of Drug and Alcohol Exposure on Development
 Learn about health and developmental issues that could be a factor in adoption, including the newest data on the impact of prenatal conditions (drug use, alcohol use, smoking), and the quality and verification of information, and area resources to help you assess each situation before and after the adoption. – *Laurie Miller, MD, Director, International Adoption Clinic, Tufts Medical Center*

ADOPTION SEMINAR*

D-9 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*

Participatory Yoga Workshop
Natalie Engler, Director of Restorative Yoga Services, Domar Center for Mind/Body Health – Relax at the end of a long day and learn some yoga techniques.

Participatory Mind/Body Exercises
Joanne Verkuilen, Founder, Co-CEO, Circle + Bloom – Learn some self-relaxation techniques for stress reduction.



Complete this form OR register online at www.resolveofnewengland.org.

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 11/4/10

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

WALK-IN REGISTRATION — received after 11/4/10**

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

Financial assistance is available. Call 781-890-2225 or email admin@resolveofthebaystate.org for details.

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: 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 6: PAYMENT

Total Fee \$ _____

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

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*Registration fees can be refunded less processing fees with a written cancellation request received by Oct. 29, 2010. No refunds will be given after that date.

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

The Adoption Home Study: A Step on the Road to Adoption

By Susan Greenwood, MAPS Worldwide

The adoption home study can feel like one more hurdle on a long road to parenthood. But the truth is that prospective parents have little to fear and much to gain from all that can be learned during the process.

Every state requires a home study by a licensed agency or professional in order to adopt. The home study will probably take a few months and involve several meetings with an adoption professional along with a lot of information gathering and fact finding. The final document will be several pages long and will include background information about each parent, the couple's history (if married), finances, employment, health, living environment, and other biographical facts. It will also verify that the family has had guidance from an experienced professional as they move forward with their adoption.

The whole process can feel tedious, but it's rarely as daunting as families fear. So what can you expect? Here are a few reassuring points to consider:

Despite the imposing name, the home study is not about housekeeping or about having a beautiful home. Agencies and their professionals (usually social workers with experience in adoption) know that there is no such thing as the "perfect" home or family. Although the social worker will verify that your home is safe, that you don't have a criminal background or unresolved medical/mental health issues, and that you can afford to raise a child, the home study should be a collaborative process, a two-way street between you and your agency.

You aren't expected to be an adoption or parenting expert or to have all the "right" answers. In addition to background information, the home study provides a framework to explore what it means to add a child to your family and the additional factors that are introduced with adoption. A good caseworker will help you anticipate the needs of the child and what may lie ahead as he or she matures. Particularly if you are a first-time parent, it's a valuable opportunity to learn from an expert and start building knowledge and resources about parenting in general and adoptive parenting in particular. Try not to become too consumed about having all the answers and "passing" the home study, but use the home study to prepare as best as possible to become adoptive parents.

You don't have to know in advance what adoption program you want. Your caseworker will help you define what

type of adoption is right for you and your family. Are you interested in domestic or international? An older child or a newborn? What about race or ethnic background? Are you more comfortable with an open adoption or one where birthparent information is limited? Is the sex of the child important to you? What health issues are you are comfortable with? If you are open to special needs, the caseworker can help you understand what the short- and long-term ramifications may be.

He or she can also help you decide not only which programs meet your needs and desires, but which you are eligible for based on age, health, and marital status. You may already know which program you want, but some families need this exploration time and are surprised to learn new information that leads to a different option than they had originally considered.

Most important, adoption agencies want to find families for children. Their goal is not to screen you out, but to help you find the adoption program that will help you become parents at last. Longstanding adoption agencies have worked with thousands of families, so it's unlikely that there is anything in your background that they haven't seen before. Being upfront about your family history and circumstances will speed the process along and help your agency steer you in the right direction.

Finally, adoption professionals are sensitive to the fact that the process can be intrusive, and a good caseworker will work hard to make you feel comfortable and to help you get the most out of your time together. Remember, the home study is just one part of the journey, and at the end of this road lies a new chapter for you and your family.

About the author: Susan Greenwood is the Communications Manager for MAPS Worldwide, www.maps-worldwide.org, a New England agency that offers both international and domestic adoption programs along with home study and post-adoption services. She is the mother of a daughter adopted from China.

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The New Fertility “Relaxacise”

By Joanne Verkuilen

I would wager significant sums of money that sometime in the near future, scientists will make a bold statement: that we all should add a new element to our routine and begin the mirror-image of physical exercise, working to lower our heart rates and enter deep relaxation for 10 – 20 minutes per day. Just like we exercise our bodies and increase our heart-rate to improve circulation, reduce stress, and lose weight, we need to exercise our minds and use relaxation to lower our heart-rate to also improve circulation, reduce stress, and lose weight. I’ll even name it now: “Relaxacise!”

For those of us trying to conceive, there is no time to wait for that prediction to come true. We know that stress is one of those all-pervasive elements that affect our reproductive health. And when we find ourselves with the unfortunate negative result month after month, we feel less and less in control of our bodies, our lives, and our future. Stress increases and compounds the problem. For many, stress causes our bodies to be more prone to becoming out-of-balance from a hormonal perspective and therefore, our cycles are either difficult to predict, or we are having trouble ovulating – or any other numerous problems that could plague our fertility.

What are we to do? How do we actually “Relaxacise”? We actually have a great deal to learn from monks who practice Buddhism. They are masters at relaxation and meditation and can literally regulate their own body temperature, among other amazing physical feats. Monks have been well-known to be in freezing temperatures with only their robes on their bodies and yet have steam rising from their skin. They also are masters in their use of their brains. A recent study of monks provides evidence of their significantly greater brain activity, called gamma wave activity, in areas associated with learning and happiness. Gamma waves involve mental processes including attention, memory, learning, and conscious perception.

We don’t need to become a monk, however, to begin this wonderful restorative and healing process. I am also not suggesting that becoming a couch potato or shirking your responsibilities does the trick either. What I am suggesting is that you need to exercise your brain, dedicating time, energy, and focus to calm the body – which in turn can positively impact our endocrine system that handles our hormones and reproductive capability.

Those who don’t like to break a sweat with exercise will love integrating this healthy process into their daily routine. It’s about peace. It’s about deep relaxation. It’s about using the www.resolveofnewengland.org

most powerful organ in your body to help your body find balance and make its way back to health: your brain.

Here are six suggestions to get you started with Relaxacise:

- 1. Just like with exercise, schedule your Relaxacise into your daily routine.** Commit between 10-20 minutes per day without fail. If you need to, start with only 5 minutes and then work up to 10 or more as you desire.
- 2. Find a quiet place.** This should be your time, when you will not be disturbed. Either sit with your back straight, recline, or lie down. But make sure to position your body the same way each time. You will find that you will enter into deep relaxation more quickly if you condition your body and its response by using the same posture each time.
- 3. Start your session with deep breathing exercises.** While you deep breathe, make sure to expand your abdominal cavity as far as it will go, and try to hold it there, and then take just as long to slowly exhale. Try to concentrate on your breathing during this time to quiet your thoughts as much as possible.
- 4. Progressively move through your body parts with relaxation in mind.** Using your mind’s eye—with your eyes closed—go through each body part, starting with either your feet or head, and work your way throughout your entire body saying the words “relax” or “heal” or “become quiet and heavy”—or whatever words that make sense to you.
- 5. Use music or recordings designed to help you relax.** Listen to music or other audio programs designed to help you relax and in doing so, help your body to find its natural rhythms again.
- 6. Journal your experience.** What images or unique thought patterns do you experience while in this deep, relaxed state? By asking questions of yourself during and after, you can begin to open a whole new frame or lens from which to build your experience. This process will increase your feelings of control, which is the opposite of stress.

Above all, make sure that this time is enjoyable for you. It might feel like a chore at first, but speaking from experience, this time for yourself can open up a whole new world inside.

Then sit back and reap the positive benefits within your physical body as well as in your feelings of control, overall well-being, and your life.

About the Author: Joanne Verkuilen is the creator of Circle+Bloom, a mind body daily visualization program to enhance fertility, www.circlebloom.com.

Advocacy Update

By Davina Fankhauser, Advocacy Director

Have you noticed that RESOLVE of New England is successful in everything it sets out to achieve? This includes our advocacy efforts.

BACKGROUND

In January of 2009, RESOLVE of New England worked with Dr. Samuel Pang of Reproductive Science Center to devise the language of a new definition of infertility that would update the Massachusetts Infertility Insurance Mandate. Senator McGee sponsored the language in a bill, and we began to fight to keep S 485 alive as it passed from one committee to another. We worked with doctors, RESOLVE of New England board members, and volunteers who testified at legislative hearings and attended meetings with key legislative officials. We teamed up with legislators such as Representative Peter Koutoujian, Representative Carl Sciortino, and Senators Cynthia Creem and Susan Tucker. Their assistance and guidance provided us insight to make important decisions during our 19-month journey.

HOW IT HAPPENED

After hours of meetings, and a dozen advocacy alerts, it came down to action that occurred within the last week of the legislative session. One RESOLVE of New England member was able to get a meeting with a key legislator, Representative Charles Murphy. Representative Murphy agreed to attach the language of our Senate bill 485 to a bill currently moving in the House of Representatives. Representative Ronald Mariano, the author of that bill, agreed to add the infertility language to his bill through an amendment. The bill passed the House and then went to a Conference Committee, comprised of members of the House of Representatives and Senate. We worked daily to communicate our message to these legislators that it was critical to pass the bill now and that infertility treatment produces cost savings.

The language we wanted was kept in the bill and was passed by the House and Senate unanimously on July 31, 2010, the last day of the legislative session. Governor Patrick had until August 10, 2010 to sign the health care cost containment bill, which included language to update the medical definition of infertility. We called in support from Governor Michael Dukakis, who reached out to Governor Patrick on our behalf. On August 10th, RESOLVE of New England was present to watch the Governor sign this legislation into law. The law will take effect 90 days from the day it was signed (in November 2010).

THE NEW LAW

- Follows the timeline set by the American Society of Reproductive Medicine. The definition of infertility in the mandate is now: one year of trying to get pregnant if the woman is age 35 or younger; 6 months of trying if the woman is over age 35.
- Stops insurers from denying coverage to patients who conceive a baby but miscarry. So if a couple conceives but has a miscarriage, the one-year (or 6-month) waiting period does not start all over again; the time spent trying to conceive before pregnancy will still count toward the waiting period.

REFLECTIONS

As I watched the Governor sign the bill, I imagined Governor Dukakis signing the first definition of infertility mandate in 1987. I thought of the volunteers of RESOLVE of the Bay State who put forth time and effort decades ago to ensure that the people of the Commonwealth had insurance coverage for infertility. I am deeply grateful to them for having the dedication to make a mandate a reality. I am thrilled to be part of a team who worked hard to not only update the 23-year-old medical definition, but also educate individuals on the cost savings associated with appropriate and timely medical care for those facing infertility. We pledge to keep working toward infertility treatment coverage throughout New England.

THANK YOU

For those of you who have been a part of our team, you have a great deal to feel proud of. Your participation made a huge difference in this process. We know your emails and phone calls were influential. We know the appointments you made were critical to our success. We know those who donate to RESOLVE of New England help fund our efforts in Massachusetts and throughout New England. We thank you and celebrate with you.

RESOLVE OF NEW ENGLAND

Advocacy Partners

Boston IVF
Mass. General Hospital Fertility Center
Dr. Samuel Pang
Reproductive Science Center

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With our thanks for their generous support of our advocacy efforts.



Governor Deval Patrick signing Senate Bill S 2585, the health care cost containment bill, which included language to update the medical definition of infertility.

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Restorative Yoga
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*Paulus and colleagues, Fertility and Sterility, 2002 **Domar and colleagues, Fertility and Sterility, 2000

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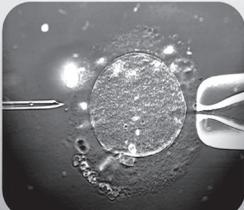
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Locations

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 617-726-8668

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 104 Endicott Street, Suite 304
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 978-882-6767.

NON-RESOLVE PROGRAMS

The following programs may be of interest to RESOLVE members. A listing does not constitute an endorsement by RESOLVE. See page 15 for advertising and editorial policies. Deadline for Winter 2010: November 22, 2010.

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NEXT EVENING PROGRAMS:

Tuesdays, November 17, 2010 – January 12, 2011
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For more information or to register, call **(781) 434-6578**, email domarinfo@domarcenter.com, or visit us online at www.domarcenter.com.

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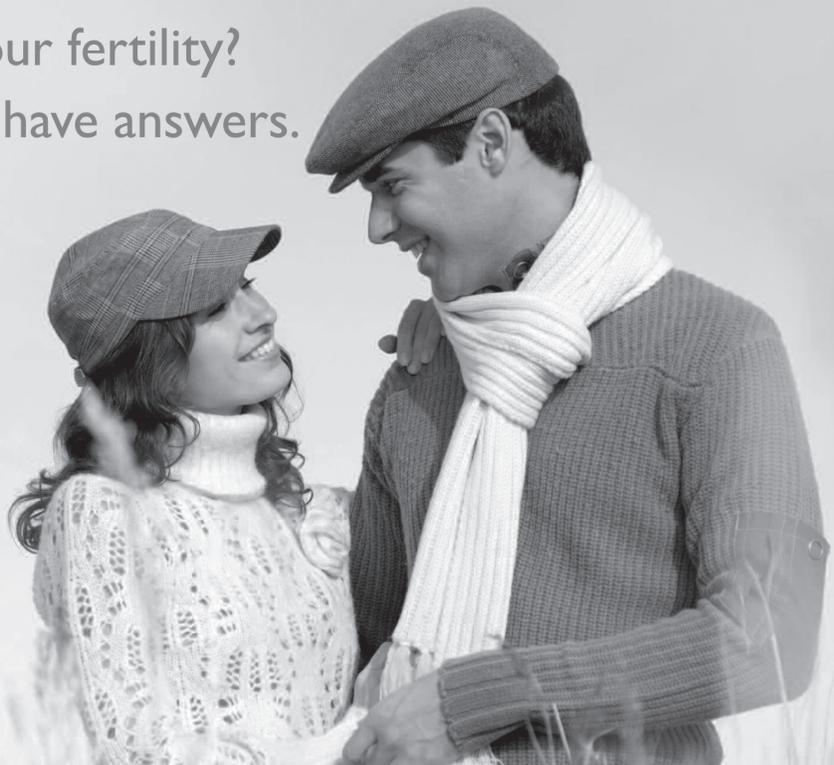


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We reserve the right to resize ads to fit our specifications.

**Please do not include borders on business card ads.*

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.

SUBMISSION DEADLINES

Winter 2010

November 22, 2010

Spring 2011

February 23, 2011

BOARD AND STAFF

Executive Committee of the Board

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Past President: Pam Odeen LoDato

Vice Presidents: Amy Demma, Barb Luciano,
Sandy O'Keefe, Ramani Varanasi

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Lynn Yogel, Member Services Coordinator

Tamar Wallace, Marketing/Office Coordinator

Davina Fankhauser, Advocacy Director

Janice Mercadante, Bookkeeper

*We welcome and value volunteers.
Please contact us by email or phone if you are
interested in becoming a volunteer.
Many opportunities are available.*

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TIME SENSITIVE MATERIAL



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