

Grade ~~A~~ Baby Eggs

An Infertility Memoir



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Chapter One

Delusions of Eggdeur

Inside Information—November 2002

The two-inch-long needle gleamed in the lamplight. It was suspended in midair. Beneath the needle lay my exposed buttocks. I was sprawled across the bed.

I clenched the mattress as I awaited impact. I pictured the syringe soaring through the sky. Then it began to lose altitude. It went into a tailspin. The pilot, my husband, lost control, and the plane crashed into my rear. I felt immediate pain.

“Victoria, that wasn’t so bad. It was just a little bee sting. Buzz, buzz,” said my husband, Gabriel.

“What are you talking about? It was a 747 that landed.”

My husband reached for the first-aid kit. He swabbed alcohol over my wound, applied hot compresses, and massaged my butt cheek. Next I rolled over to start again. This time the needle would stab my stomach.

After six months of marriage, my husband and I had not resorted to S&M foreplay. This was not a sexual fantasy where he was a jet pilot and my bare butt was the landing strip, nor was he dressed as a bumblebee. Rather we just were following doctor’s orders. We were trying to create a baby.

Our doctor was a renowned baby maker. My husband and I were informed consumers, and we had chosen a premier research physician from a topnotch New York hospital.

At the first appointment, the doctor lightly shook two of my

fingers, looked up at the ceiling without making eye contact, and told me to sit down. I did not care that his patient skills were minimal. I just wanted him to get me pregnant. Gabriel could not take time off from work, so it was just me.

I felt privileged to be sitting in the doctor's office. I had needed to qualify for the hospital "fertility club" before I was even granted this meeting.

When I first called the hospital, the receptionist was skeptical.

"At forty-four you probably don't have the numbers. You can't make your own baby without those lower numbers."

"What do you mean? What numbers?" I asked.

"You need a blood test first. Your FSH—follicle-stimulating hormone—must be under 12. Of course we prefer lower than 9. Your estrogen level has to be under 70. At your age you could easily be perimenopausal. Then all your numbers would be too high."

"Well, can I at least find out?"

"You need to come in after your period. Then we'll know."

My levels were phenomenal. My FSH was 6 and my estrogen was 28. The results made me the Ponce de León of the fertility fountain of youth. I might not have the flawless, wrinkle-free skin to put me on an Oil of Olay commercial. Hormonally, however, I was as young as they come.

Now I proudly cited my numbers to the doctor.

"My levels are so great, I'm sure they'll be no problem in my getting pregnant."

"Actually your chances of pregnancy are in the single digits."

"What are you talking about?"

"The problem's your age. The chances of getting pregnant in your forties are very slim."

"But surely there are plenty of pregnant forty-year-olds."

"Not really. Biology takes over. A good example is the study of women in a religious sect in the Midwest. They did not believe in utilizing birth control. In their twenties and thirties they produced large families. However, even without contraception, they stopped having babies in their forties. This illustrates my point that women become incapable of getting pregnant as they become older."

"But certainly IVF will help me."

“You can’t change biology. You are born with all of your eggs. No new eggs are created. By the time you’re in your forties your eggs are no longer of the same quality. Indeed the odds are higher that the eggs will become genetically defective. Sperm, on the other hand, are produced on a regular basis. Therefore, the man can father children even when much older.”

I was cornered. This wasn’t even a mutual problem. It was *my* age and *my* elderly eggs that were at fault.

The doctor smiled for the first time. “You should consider egg donation. Your best chance is to use the eggs of someone in her twenties or early thirties.”

He went on pleasantly about the hospital’s excellent egg donor program, saying that he could get me material about it and that I could utilize the egg of a student from a local college or affiliated medical school.

My response was immediate. “I want to use my own egg. I have a great FSH level, and my husband and I want to try IVF with my egg and his sperm!”

The doctor backed off. “Fine,” he said. However, he had to caution me that the odds would be much higher with a donor egg. I said that I would take my chances.

How could the doctor suggest that I use another woman’s egg? The whole point was to have my own baby. Why would I want someone else’s? I felt as though I was being expelled from the fertility sorority right after I joined. The receptionist had been wrong about my likely perimenopausal hormone level. I would prove the doctor wrong too.

I had practice beating the odds. I was lucky enough to marry Gabriel.

When I became a divorcée at age thirty-nine with four- and six-year-old daughters, the chance of remarriage was poor. Yet I overcame the probability statistics and found a husband five years later. But I was proactive. I engaged in singles activities rather than just waiting for a husband to arrive.

The most unusual one was Date Bait: sixty seconds to sell yourself at Manhattan’s 92nd Street Y, a Jewish community and cultural center. In sixty seconds you had to stand up and provide a commercial with yourself as the product. As a Date Bait regular, I had perfected the

right way to talk. It was important not to start sweating profusely, begin stammering, or collapse into the chair after stating your name. At the end of the event there were “matches” based on men and women mutually picking each other. Two different times I was told by the organizer that I was the lucky highest-scoring match person! I must still look young if I was chosen a lot—plus some of the matches were with younger men. This gave me confidence that I must be physically fit for baby production.

Gabriel was not one of my Date Bait catches. We met twice at different singles gatherings. The initial event, at a restaurant, started with hors d'oeuvres and talk with prospective singles. Then, in case that part wasn't going well, there was a diversion: we could watch a comedian perform.

My future husband came over and started talking with me during the first five minutes of hors d'oeuvres. The conversation never stopped. We compared the merits of different singles organizations. I was relatively new to the singles world, but Gabriel was much more knowledgeable. He'd had years of firsthand experience with dating options. He had even taken singles trips to exotic places like Costa Rica. He also knew the best charity events for meeting people, such as the Multiple Sclerosis annual gala.

Next we discussed Charleston, South Carolina. Gabriel went to school there and knew the interesting places to visit. I had always wanted to visit Charleston.

Meanwhile the “comedy phase” had begun. The female comedian was standing in a corner of the room making jokes over a microphone. We continued talking and became the butt of her jokes: she wondered how our “first date” was progressing and if we'd be a successful statistic. Gabriel and I didn't care. We were happy to have met.

At the end of the night came the moment of truth. I confided that I was not only divorced but that I had two children. Most men heard “children” and immediately stated that they couldn't see me. Gabriel still scribbled my phone number. I was hopeful. However, he never called.

Not being one to sit by the phone waiting, I dated other people and forgot about Gabriel. There still was no one special. Three years later I was at a huge singles party at a bar. There were no comforting

activities: it was just a “thrown into the lions’ den” type of event, with a thousand people who all belonged to a computer dating service aggressively hunting.

One hour later I was heading for the door. My tolerance was over. As I was about to step through the exit, a man began talking to me. He said that we had met before. The line did not impress me. When he reminisced about the comedian joking about us, I realized that it was Gabriel. Once again we conversed for a long time, and once again he asked for my phone number. I would have wagered six months’ pay that he wouldn’t contact me. The next day he called.

Gabriel told me that he had really liked me at our first meeting but was not willing to date someone with children. Three desperate years later, he broke his rule. We dated every weekend for six months. We went to restaurants, movies, plays, street fairs, and tennis matches.

At first I wasn’t sure if Gabriel would be around for the long term. I kept waiting to find out what was the matter with him. He was a forty-five-year-old bachelor. Only one prior relationship had lasted for more than a year. I thought maybe that his training to become a physician had hampered his social life. Gabriel explained that he just never met the “right one.”

Gabriel was bright, funny, handsome, and a good guy. He was also grateful he had met me. Each night, for over twenty years, he had prayed to God for a wife and future offspring. Then he was presented with me and instant children.

My prior husband was a romantic French Canadian named Pierre. However, subsequently he began romancing other women. Instead of providing us with a third child, he impregnated one of his paramours—a married woman he first contacted on the internet. Now it was a pleasure to have a man who prayed for only one wife and one family.

Following our six months of dating, Gabriel invited me to fly with him to Curaçao over Christmas vacation. My daughters, Elizabeth and Lisette, were with their father for the holidays. When we arrived at the hotel, Gabriel immediately placed a small box in the safe. I thought: engagement ring! Each evening I wore a fancy dress to dinner and waited for Gabriel to “pop the question.” Every night I retired to bed without any questions asked.

Our last day in Curaçao, I wore shorts and a T-shirt. We visited the oldest synagogue in the Americas. It was an imposing Sephardic sanctuary. There was a pulpit in the center of the room, high ceilings, and a sand-covered floor. Gabriel went down on his knees in front of the ark where the Torah scrolls are kept, pulled out the little box, and asked me to marry him. I agreed to become his wife, and my answer echoed throughout the temple. Gabriel's timing was perfect. Five minutes later the first camera-wielding mob arrived right off the cruise ship.

Gabriel wanted a "real" wedding with all of the trappings. Since it was his first marriage, it wouldn't have been fair of me to insist on a justice of the peace, two-piece suit, and quiet luncheon second-marriage type of affair. I decided to have the dream wedding that I didn't have the first time. I located a turn-of-the-century wedding gown of handmade Irish lace with a pattern of birds and flowers. We had an outdoor ceremony on the back lawn of an early 1900s mansion. Elizabeth and Lisette marched down first in Elizabethan-style dresses and gracefully tossed roses out of wicker baskets. I felt like a character out of an Edith Wharton novel.

The weather was a ninety-nine-degree heat wave. The rabbi spoke about our having "sunny days" ahead, the "heat" of our love, and the "warmth" of our support. As soon as the ceremony ended, everyone ran inside to the air-conditioning of the mansion turned catering hall.

Later, Gabriel's two best men held up their glasses and congratulated a member of their longstanding singles group for finally getting married. My daughters returned from the mansion's bowling alley just in time to hear the end of the toast. Elizabeth, my oldest daughter, announced that she wanted to make a toast too. She held up a glass of Coke and said, "I want to say that I know we will become a happy family. Ever since five years ago when I 'lost' my father I was wishing for a new one. Now he's here. I know he'll be a great dad. My life is just beginning." All of the women were drying their eyes with their cocktail napkins.

A few days after the wedding, Elizabeth and Lisette left for a month of sleep-away camp. Gabriel and I departed on a two-week honeymoon. We went to a romantic town called Eze in the south of France. Our hotel was a medieval structure built into the side of a cliff;

the outdoor restaurant posted a warning not to drop anything, because it could not be retrieved from the bottom of the precipice. Fortunately neither of us had a fear of heights.

Gabriel and I spent the last two weeks moving into our new home. We enjoyed our month of marriage with just the two of us, and then we became a “readymade” family when the children returned from camp.

I was lucky to marry Gabriel. Now I also would be successful with creating a baby. The doctor was definitely wrong. No amount of scientific advances could obliterate the magical element of procreation. Even in ancient times the women knew that the spark of life must be stoked to ignite in their wombs. The Egyptians and Romans left offerings for their fertility goddesses. Modern-day technology might not guarantee my baby. But luck would.

The next step was my hospital orientation. I expected a freshman orientation like one at college. The women would have a chance to bond. We would embark on our baby journey together. At graduation, instead of a diploma, we would all be handed a baby.

The orientation office looked like a lawyer’s conference room. There was a long, rectangular mahogany table with matching wood chairs, paneled wood walls, and a smiling nurse standing at the end of the table. The participants were all couples except me. Once again, my husband couldn’t leave work. We all sat down and waited to get oriented.

This was not an introduction to freshman fertility life at the hospital. We were not introduced to each other. Our nurse lecturer wore a lab coat and nametag. We rapidly were immersed in IVF 101.

“We will see who makes it into the upcoming IVF trial. You won’t all make it. It depends on the start of your next period. Plus naturally we have shut-down times like Christmas and part of the summer.”

Now that I had made it to this meeting because of my acceptable hormone levels, I did not want to be excluded from the trial. I wanted to start right away. Hopefully my period would comply.

The nurse proceeded to educate us about the protocol.

“When you get your natural period you must test for ovulation. Eight to ten days after the home ovulation test registers positive, you start your Lupron shots. That will give you a Lupron period. The

Lupron period is very special. It's a controlled period that suppresses your hormones."

I felt as if I was back in ninth-grade health class, learning about menstruation and childbirth all over again. In that class, after watching a film of a woman screaming in agony as she pushed out her infant, I had vowed never to have a baby. In this one I was trying my hardest to become pregnant.

The nurse joyously continued.

"Three days after your Lupron period, you start hormones. But we have a busy hospital schedule. We must coordinate many women. Don't be impatient. A day-three period might be day seven. It all depends when you fit in. When you do come in for your day three start, be sure to sign in on the pink sheet. If you sign in on the white sheet we might forget to call you."

This was becoming confusing: now I had to remember the color of the paper and the correct start date. Then the nurse began talking about injections.

"All of you have a shot assignment in your packet. It lists your prescribed hormones. These will be administered either in the abdomen, which we call subcutaneous, or in your buttocks—intramuscular."

I searched through my packet to find my hormones. I was assigned Gonal F for my stomach and Pergonal for my rear. In addition I still would be getting Lupron in the stomach.

I hated shots. I was even afraid of the fingerprick to test my blood sugar levels. When I was little, I had prepared myself for my pediatric injections by pretending that I was a soldier in a war. Soon every day I would have to conjure up battlefield acts of heroics as Gabriel stabbed me with the needle. I did not yet know that I would be imagining airplane runways or that Gabriel would try to comfort me with his buzzing bees.

The nurse went on with her lecture.

"Once you start your additional hormones, you'll be in regularly for hospital visits. You must arrive no later than eight-forty-five in the morning. Your blood will be monitored to determine if your medication doses must be changed. Your follicle size and production level will be followed by sonograms. Every afternoon we'll call you with the level of hormones to take that evening."

I kept focusing on the part about getting to the hospital by 8:45. Now that was going to be a problem! It meant getting up before dawn each morning to catch a train, having blood drawn, and rushing to work on no sleep. When I was sleep-deprived, I couldn't think straight. As a psychologist with a private practice, it was imperative for me to concentrate on what my patients were saying. I hoped I wouldn't become so disoriented that I'd mix up my patients.

"I don't want to alarm all of you, but we must discuss the pitfalls," continued our nurse.

"You can go into hyperstimulation. That's when you make too many follicles and your hormone levels skyrocket too quickly. This can result in a twisted ovary, blood clots, and even death. Some of you might not even respond to the medication. You also could have a dominant follicle, which would grow before all the others and cause the others to stop developing. Then you would have only one good egg left for IVF. One is not enough. Unfortunately, you then would be eliminated from the trial."

Just as I was beginning to feel like a first-year medical student who "caught" every disease that was studied, the nurse proclaimed enthusiastically, "Now it's time to learn all the new terminology. First of all, when your eggs are ready to come out they will be *harvested*." The nurse put a lot of emphasis on our new word. "This will be the day of your egg *retrieval*. The egg will be retrieved from the follicle that contains it. Each egg will need to be fertilized by the sperm. You might need the procedure called ICSI—intracytoplasmic sperm injections. ICSI is when the sperm is directly injected into the egg. Any questions yet?"

I did not ask any questions, even though I found the information confusing. No one else asked any questions either. They were probably just as quietly lost as I was. The nurse proceeded, "The fertilized eggs will be placed back into the uterus on either day three or day five. A day-five transfer is at the blastocyst stage. There's more embryonic development at that point and therefore an increased rate of a successful pregnancy—in fact there could be a much higher rate of implantation than with a day-three transfer. However, not everyone can wait until day five because the embryo might stop developing since it's still outside of the womb. Then there would be nothing at all to transfer."

Another booby trap. If they waited until the fifth day my baby might die in the test tube, but if they transferred the baby into my womb at day three it had less chance of sticking. I didn't want to hear about possible complications. Better the Scarlett O'Hara approach of "Tomorrow is another day" without worrying whether I reached three or five tomorrows.

The nurse continued. "The embryologist may elect to utilize *assisted hatching*. Assisted hatching is when the shell of the egg is scraped in one corner in order to help with attachment to the wall of the uterus. How many eggs are placed will depend on the age of the patient. Younger women have a greater chance of multiple births and we want to reduce the chances of multiple births. Therefore, we will place fewer eggs. In contrast, the egg quality of older women is not as good so they are unlikely to have multiple births. We can comfortably transfer five or six eggs without worrying about a lot of resulting children."

Finally there was a question: a heavyset man began to wave his arm wildly.

"I need your help. I want to make sure my wife has at least two babies. Four or five would be preferable. I want her to have them all at once. Then she can go back to work, and I'll stay home with the babies," explained the man.

"We don't want multiple births. Your wife would be placed on bed rest and the babies could have complications."

"I never said I wanted all of those babies," chimed in his wife, a tiny, slender woman who was about a foot shorter than her husband and two hundred pounds lighter.

The nurse said, "I can talk with you both about all of this later."

Soon afterward someone else's husband, with slicked-back hair and an expensive suit, began questioning the nurse. He argued about the hospital's probability statistics and thought the success rates were inflated. I was positive he was a lawyer.

Finally the nurse shook him off by stating, "It's time for our slide show." Now I watched photos of an egg being injected with a sperm via ICSI, an egg being hatched, and a day-three and a day-five embryo that were each ready for transfer.

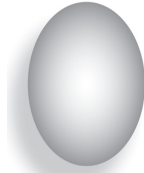
The lights went back on. It was time for our lesson on preparing the vials of hormones. We were each provided with a vial filled with

liquid, a hypodermic needle, and bottles of powder. First we learned how to twist the glass vial so it would break. Mine wasn't opening, and I was tempted to tap it open like an egg. However, with a little help it worked. Next we took our needles and practiced drawing liquid into them. We had to measure the correct cubic centimeters of liquid and place the liquid into the jars with powder that represented our hormone medication. The experience reminded me of eighth-grade chemistry class.

"Now, this will be fun!" exclaimed the nurse. She was holding the torso of a mannequin. "For the finale of our class you get to practice giving injections into the butt of the mannequin." The first husband to practice jammed the needle right into the center of one of the mannequin's butt cheeks. "Your wife would be in a lot of pain if you administered the injection that way," the nurse said. Patiently, she told us to first push some liquid out of the needle to avoid air bubbles, to place the needle in an outer quadrant of the buttocks to avoid nerve endings, to enter via a muscle, and then to smoothly and gracefully place the needle. "Afterward, to reduce pain, the area should be massaged and hot compresses placed on the buttocks," advised the nurse. We all got a few turns wielding our needles.

Last came the financial section. The cost of each trial was about ten thousand dollars, not including the hormones (which could be more than five thousand dollars), or any additional recommended procedures such as ICSI or hatching. Payment in full would be due at the start of the trial. If you were one of the ones dropped from the trial for whatever reason, you would receive a refund minus whatever procedures had already been implemented. All payments must be made in full unless you participated with the one insurance company the hospital accepted.

By the completion of the orientation, I felt overwhelmed and dazed rather than enlightened. The clearest communication was how much money I would owe the hospital. Yet I still wanted to embark on my IVF journey, despite the obstacles, because my baby beckoned at the end.



The Pink Sheet

The requisite three days from the start of my Lupron period, I was back in the hospital to begin my trial and to undergo my first blood test. I remembered to sign my name on the pink sheet. Now I was official. The receptionist sat behind a big mahogany counter covered with sign-in sheets. I turned around to look for a chair, but there were no seats! Over a hundred people were in the waiting room.

Finally someone was called, and I found a seat. I was surprised at the number of women with infertility problems. Some women in the waiting room were my contemporaries. They wore impeccable business suits, the perfect amount of make-up, and becoming hairstyles. I was sure that they had important corporate careers and had delayed motherhood too long. Since I'd successfully conceived and delivered two children I thought that I was in a separate category, that I had a leg up on these "virgin pregnancy" women. Then there were the very young women in their twenties. A number were Orthodox Jews wearing wigs and accompanied by husbands with beards, long sideburns, and yarmulkes. The twenty-year-olds must have severe fertility problems to be here at their age. I was positive that I was different from everyone else and destined to succeed.

Determined to relax, I pulled out my book about King Henry VIII and his wives. I was reading about Anne Boleyn. She was waiting to provide Henry VIII with a son. Henry had cast off his devoted wife of more than twenty years and changed the religion of the land

in order to marry her, even though Anne was already in her thirties and not that nubile either. Anne's older sister Mary Boleyn had been one of Henry's prior lovers. Anne not only had to compete with her sister, but she also had to justify the extreme actions taken by Henry to wed her. Henry and Anne were confidently printing all the announcements ahead of time with the word "prince." The "prince" announcements had to be changed when Anne gave birth to the future Elizabeth I. Her fertility attempt was a success, but she still failed the more stringent royal requirement of a male heir. Only centuries later would genetics vindicate her and reveal that it was the "Y" chromosome of the male that determined the sex and that it was the "fault" of Henry that she bore him a son.

Josephine Bonaparte also was in my thoughts. I'd just finished reading a biography of her for my book club. She too tried to create a baby to continue an empire. Although she had two children from a previous marriage, she was unable to provide Napoleon a child. Like me, her two children were already older when she tried for a third. Josephine was in her thirties, but she entered into early menopause. The cause was thought to be from the trauma of being locked in the Bastille waiting to be guillotined. Josephine endured numerous invasive and painful "treatments" in the hopes of regaining her menstrual flow. Her treatments included leeches, laxatives, and dousings in spring water. Napoleon ultimately discarded Josephine in order to conceive a son with Princess Marie-Louise of Austria.

I did not feel in danger of being beheaded like Anne Boleyn or being cast off like Josephine Bonaparte for a younger, more fertile wife. My husband felt lucky to be married. But I knew that he too wanted a male.

My husband also had a famous bloodline to uphold. Gabriel was the eighth-generation descendant in an unbroken male line. The line went back to Lithuania. The bearded man who began the lineage was a renowned sage, a brilliant philosopher who led his people. His name was Elijah ben Solomon, and he was known as the Vilna Gaon (the genius of Vilna). He was one of the most important religious scholars of the time, and Gabriel grew up with this family legend. The man also was a child prodigy who at age ten outstripped and fired his tutors. He could be looked up in the *Encyclopedia Britannica*. There was

even a museum exhibit about him. The exhibit included a family tree. My husband and his father were on the tree. Also on the tree was Mr. Spock, the Vulcan from the original *Star Trek* series. Apparently Leonard Nimoy was a descendant as well.

The sage was so learned that he could not take time away from his studying of the Talmud. He decided to stop talking to his wife and children. In contrast to his ancestor, Gabriel was putting family first. He would need to focus on me and on our fertility in order to continue the unbroken lineage.

Gabriel also had parents who hoped to be expectant grandparents. They had been patiently waiting almost thirty years. Gabriel's father was now ninety-four and his mother was ninety. They were exuberant when their only child married at age forty-six. In fact, Gabriel was just following in their footsteps. His parents had married at ages forty-three and thirty-nine. His mother conceived Gabriel at age forty-two after numerous miscarriages from a previously undiagnosed polyp.

Gabriel joked that his parents were a "two-walker household." His father went to dialysis three times a week and belted "Hava Nagila" as he pushed his walker to and from the dialysis machine. His father also yelled at his mother, but that was because she could not hear a thing. A bigger hearing aid might have done the trick, but she didn't want to wear the larger, more prominent one.

At our wedding Gabriel's father looked dapper in a tuxedo, and his mother wore a pretty, pink dress. During the outdoor ceremony, they both sported Mexican sombreros to keep the sun off their faces. They also each carried a portable, battery-operated fan in one hand and a water bottle in the other. They already were looking forward to buying new outfits for their grandchild's baby naming ceremony.

Like Gabriel, I also grew up with a family legend, but mine was the story of the orphanage where my father lived as a boy. His parents had been high school sweethearts who ran off to be married against their parents' wishes. My grandfather was a handsome, charismatic ladies' man and my grandmother Lola a sexy, dark-haired beauty who wore low-cut blouses to display her ample cleavage. In later years, my father discovered naked photos that my grandfather had taken of my grandmother with discreetly placed fig leaves.

Shortly after my father turned six, my grandmother decided that

she could no longer put up with my grandfather's stream of lovers and delivered my father to an orphanage. Week after week my father sat at a long dining table and ate with his fellow orphans in an *Oliver Twist*-style setting. Every Sunday he sat on the front steps expectantly waiting for someone to visit. Mostly no one ever did. Once in a while my great-grandmother, a proud German woman who grew up wealthy in a Fifth Avenue townhouse, stopped by to see her grandson. However, she never took him home with her. My father vowed to himself that one day he would show them all and make something of himself.

Eventually, after my grandmother married her second husband, a chicken plucker called "Chickie," she arrived on the scene to reclaim her son. Unfortunately, she had never told her new husband about the existence of her son. Chickie was very unhappy to become a father and never got along with his stepson.

In the end, my father loved his mother for taking him back. In later years, he supported her financially. My father fulfilled his orphanage vow and became a doctor who made life-saving discoveries. My grandmother Lola never changed. When she first welcomed my mother into her house, she greeted her in a black negligée. My grandmother generously supplied me with her choice books, beginning with *Valley of the Dolls*.

The part of the legend that most affected me was my father sitting by himself on the front step of the orphanage waiting for parents who never came. I imagined what it was like to feel abandoned and alone. I myself was a sensitive child who reacted strongly to perceived rejection. As a child, I vowed to have a close-knit family when I grew up and always to be there for my children and for my spouse. Being betrayed by my first husband made it all the more important for everything to go right the second time. I was convinced that a baby of our own would really cement my marriage. This time I would have a family that lasted, where everyone was valued.

I also really wanted this baby. Originally I had wanted to duplicate my family of origin and have only two children. However, like Gabriel with his initial decision not to date a woman with children, I too could change my game plan. Having two girls in diapers did not discourage me from future babies. Elizabeth was great fun as she threw the pillows onto the living room floor and shouted one of her first

words. Lisette was an agile monkey who climbed the built-in shelves in the living room as if she were scaling a palm tree and threw down china plates as if discarding banana peels. I relished the uniqueness of each daughter and surprised myself by wanting another child. Now I could enjoy raising another baby. Plus I would be sharing it this time with Gabriel, who was very loving and committed. I was as positive as Anne Boleyn that I would fulfill my own as well as my husband's expectations for a baby.

The woman next to me in the waiting room made eye contact and smiled. "I'm crocheting something. In fact I'm crocheting constantly in order to avoid having a breakdown," she explained frantically.

I told her, "I'm glad that you like crocheting and that it's soothing for you." I returned to reading about the upcoming decapitation of Anne Boleyn.

"Victoria Hopewell!" called the nurse. I followed her into the next room. She walked with the purposeful strut of a model on a runway. There were two rows of cubicles with women lined up in chairs getting their blood drawn. I sat down in my chair to wait for my first IVF trial bloodletting. The woman tied a piece of material across my right arm, told me to grasp a rubber ball, and prepared to draw my blood.

She stuck the needle into my vein. "I don't understand it. The vein looks good but not much blood is coming out. I'll just move the needle around. That's not working, I'll try to press harder and see if we can get that blood coming. Oh, here we go!" I started to feel very lightheaded and my eyes started to close. When I opened my eyes, I saw a group of white lab coats fluttering above me. One of the lab coats came closer and a face appeared. "You just fainted. Why don't you lie down in the back room until you feel better." I hoped that this wasn't indicative of the rest of my blood-drawing sessions!

The next needles were administered at home by my husband. My shots increased. "Bend over, lean forward, put your hands on the bed to steady yourself. Now here comes the buzzing bee. Get ready for the next little sting, just a tiny prick, *now!*" warned my husband. I yelped again. The new position of leaning forward was only a slight improvement over the prior position of lying prone across the bed. The Pergonal subcutaneous, in-the-butt shots were much worse than the

Lupron and Gonal F into the stomach. Every night my children had story time, and I had shot time.

My next trip to the hospital was for blood drawing and for an internal exam. This time I was lucky and found a waiting room seat right away.

“Hi! I’m Brittany,” said the woman next to me.

“And I’m Dakota,” chimed in the woman to her right.

They proceeded to explain their IVF story to me. Brittany and Dakota were sisters. They were tall, willowy women who resembled Nicole Kidman. Indeed Dakota was an actress in soap operas. Dakota had flown in from Australia to donate her eggs to Brittany, who’d flown in from London. Although she was only thirty-one, Brittany’s eggs were not of good quality. Dakota got all the injections, monitoring of her blood levels, and examinations of her follicle production. Brittany accompanied her to all appointments and eventually would receive the eggs harvested from her sister. Dakota told me that she loved her sister and if necessary would fly in again for her egg donation. It was a real testament to sibling love that one sister would fly all those miles to share her eggs with the other; I hoped that Elizabeth and Lisette would be that supportive of each other one day. It also made me feel more confident in the hospital, since Brittany and Dakota had chosen it out of all the fertility programs around the world.

I was glad that the sisters made contact with me. Most people in the waiting room were quiet and uncommunicative. They respected each other’s privacy and did not confide in each other. The atmosphere was of oppressive, individual suffering. But once a conversation started with someone, bonding was quick. There was a built-in connection and the possibility of future waiting room meetings.

“Victoria Hopewell!” I went to the cubicle for my blood drawing. It was the same nurse who couldn’t get my blood to come out! I had visions of landing on the floor this time. “Don’t worry. I’m sure you won’t faint,” the nurse reassured me. This time she jabbed the needle with one big movement, the blood came out right away, and I didn’t faint, but I had a big purple bruise on my arm. “Now go back out and wait to be called for your ultrasound,” she instructed.

When I went back out, I looked for the sisters, but they had already been called in. There was a seat in the back, where a group of people, in

contrast to the rest of the silent gang, usually sat together talking and laughing loudly. The most outspoken woman from the group, a brunette with a chubby face, introduced herself and the others. She explained that they all met online in an IVF chat room. Her name was Lauren, and she appeared to be the group leader by virtue of her holding the IVF veteran record. This was her eighth attempt. Lauren knew the story of every other group member, information about every IVF doctor at the hospital, questions that we should ask the doctors, and detailed information about each procedure.

When a woman ran out from the room crying, Lauren explained to the rest of us that it was because one of her follicles had become dominant—one of the elimination pitfalls described by the orientation nurse. The doctor had just informed the weeping woman that her trial was aborted, Lauren said—one viable egg was not enough for implantation.

I felt conflicted during these ad hoc connections because I did not tell my newfound friends that I already had two children. I was afraid that if I did tell them, I would be excluded from the camaraderie of the mutual baby quest.

My name was called again, and I went in for my sonogram appointment. The nurse had me put my feet in the stirrups and wait for the doctor. He said hello, remained nameless, and got right to business. The sonogram displayed the contents of my right ovary and then my left. The exact measurements of each follicle were diligently recorded. Unfortunately, the sonogram also displayed a large cyst. The doctor explained that cyst development was normal at ovulation. However, for IVF to be successful it was imperative that there be no cyst. If it didn't disappear over the next four or five days, from my hormone medication, then I would be scheduled for immediate cyst aspiration.

A few days later, I knew that I would have to undergo this “spring cleaning,” because the cyst did not disappear. Since I required surgery, I decided that it was time to inform my daughters about IVF and our baby quest. Already I was disappearing each morning, returning with bandages from the blood drawings. Elizabeth and Lisette needed to know something. I was not sure how they would react to a new sibling. We were not the Brady Bunch but the children had adjusted well and

even called their stepfather “Dad.” Now our new family would have to survive the shake-up of a baby.

Gabriel and I sat the girls down in the dining room. We began our baby discussion.

“We have something to tell you girls. Your father and I are planning to have a baby.”

“I never got to experience a baby because I met your mother when you were already older,” added Gabriel.

“I am going to get some help becoming pregnant from a hospital because I’m older now. The hospital has a program to help people. They will take my eggs out and put the best ones back,” I explained.

“That’s not all they do! I know all about it already,” said Elizabeth.

I asked, “From health class?”

She said, “No, from religious school from my ethics class.”

“I want you girls to know that we’ll always love you. We just want to have one child together,” I said.

“I don’t want a baby!” exclaimed Lisette.

“Mom has no chance anyway at her age,” said Elizabeth. “What about our puppy? You promised us if we ever moved out of our apartment and back into a house we’d get a puppy.”

“I want a puppy too!” added Lisette.

“Well, we can have a puppy and a baby,” I said.

I was positive that the children would ensure that we got the puppy. It would be up to the hospital to enable Gabriel and me to get the baby.

“If you do get a baby I only want a girl. Then I’ll be the one to pick out its clothes. We’ll wear the same jeans and shirts,” said Lisette.

“You can be the baby’s personal shopper,” I said.

I would have preferred if the girls were excited about a new baby. Once I became pregnant they’d have more time to adjust to the idea. Then maybe they’d become more accepting of their new sibling.

As soon as our conversation ended, Elizabeth was on the phone telling her friends that her mother’s eggs were being removed and returned to make a baby. I was sure all of her friends’ brothers, sisters, mothers, and fathers also heard about my eggs as well.

I also decided to share with my parents that we would be having a baby. I expected them to be proud, happy grandparents. I

wouldn't get too detailed about IVF. My mother was a product of the 1950s, and we had never even discussed the "normal" means of procreation. She often repeated the story of how she had met my father on a cruise for college students. My mother explained that it was a wild boat, that she encountered my father the first day, but that he had disappeared until the last day of the trip, presumably to be with "the other type of girls." Then when the cruise was over, he asked for my mother's number. They began dating and my mother married him during spring break of her senior year at Wellesley. She was able to remain in the dormitory, while my father finished his last year of medical school in New York, because she signed an agreement not to reveal the dark secrets of married life to the still pure Wellesley virgins. The only sexual thing that my mother ever said to me was imparted right before I left for college, when she told me, "Once it's broken, it's broken."

I waited for my father's History Channel program on ancient Rome to finish before I broke the news. "Mom and Dad, you're going to be grandparents again. Soon there'll be a new baby. Gabriel and I haven't been able to get pregnant on our own so we're going to a doctor for help. I'll be taking hormones."

"Hormones? Hormones! That'll give you cancer. My mother died of a melanoma. Why would you take hormones?" my mother cried.

"So that I can get pregnant."

"Victoria, you're too old for that. Just think of the damage you'll cause your body by carrying a baby to term and then giving birth. Afterward you'll need a wheelchair, possibly for life."

"I'll be okay."

"Plus at your age the baby will probably have Downs Syndrome."

"Mom, it should be fine."

"Victoria, I think this is a very bad idea."

"Don't you want a grandchild?"

"I already have four—your two and your brother's two, and I'm only concerned about your health."

"Well, I'm going to do it anyway."

My father chimed in. "Victoria, don't you think you're too old to be a parent again?"

"No. I want to have a baby with Gabriel."

“You have to really think about what it means to start all over again with an infant. You’ll be changing diapers, losing sleep, and spending the next eighteen years raising a child again. You’ll be stuck.”

“I don’t mind.”

“Well, it’s your life.”

My parents weren’t the proud grandparents that I had hoped. I knew that my father would be more matter-of-fact than my mother. In the end he had always told me to make my own decisions. Still I would have liked it if he could see some joy for Gabriel and me in starting a family of our own. I wouldn’t tell them about my cyst operation in a week; that would really put them over the edge—especially my mother.

When I arrived a week later for my cyst aspiration, the receptionist immediately announced, “Boy, you’re brave!” Her large, rhinestone barrette sparkled under the bright ceiling lights.

“What do you mean?”

“It’s great that you don’t want any anesthesia for your procedure. There are some people who make that choice.”

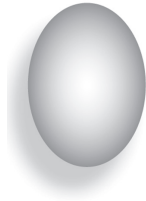
“I didn’t request ‘no anesthesia.’ I don’t want to have any pain. I’m all for killing the pain. You’d better tell someone right away that I definitely did not request to have nothing.”

“Don’t worry, just tell the doctor,” soothed the receptionist.

As soon as the doctor arrived, I told him that I didn’t want to feel anything, that I wanted anesthesia or a “local.” He flashed me a big smile. “It’s not necessary,” he said. “I’ll be real quick. I’ll just insert the needle into the vagina, look at the ultrasound for guidance, and aspirate the cyst.” I started shaking at the thought of a big needle entering me. The doctor said, “I’m doing it right now.” I felt the needle stab me, and the pain was immediate. Still, the terror beforehand was worse than the actual impact of the needle. The doctor was pleased because the procedure was a success, and I would not have to recover from anesthesia.

I waited for my husband to pick me up from the cyst aspiration. Everyone else had left except for the receptionist. I told her that I’d be back soon for the egg retrieval. The receptionist confided that when she began this job, she thought that it would be a happy scenario. She envisioned numerous new mothers coming back to visit her with their

newborn babies. In fact she saw most people again when they returned as “repeaters.” I told her, “Well, hopefully you won’t see me again after the trial unless it’s with my baby!” Her words did not discourage me. I still felt that my luck would hold and that I’d be one of the few destined to return with an infant in my arms.



Halfway Road to Pregnancy

My eggs were finally ready to be harvested and retrieved. The hCG (human chorionic gonadotropin) shot had to be given at exactly midnight so that my follicles would release my eggs thirty-four to thirty-six hours later. The doctors wanted everything coordinated for my assigned morning egg retrieval time.

The night of the shot, I was invited to my friend's anniversary party. It was a holiday weekend. There was a chance that I wouldn't be back by twelve if there was traffic. Therefore, I had to be prepared. The hCG, syringe, alcohol swabs, and disposal waste case were all packed. If necessary we'd pull to the side of the highway, I'd lift my cocktail dress, and expose my backside to the people driving by while I waited for the buzzing bee to land. Luckily we made it back before midnight.

I arrived early in the morning for my egg harvesting. I was handed a brown paper shopping bag and told to go change. The changing room was similar to one at our community pool, with a wooden bench and a clothing hook on the door. My new outfit consisted of slippers, drawstring cloth pants, a wraparound sleeveless shirt with ties, a robe, and a blue cloth shower cap.

The husbands were being called one by one for their sperm deposits. My husband was called next. Gabriel went into a room with a comfortable reclining chair. There was a large supply of magazines with naked women, a few magazines of naked men, and a television hooked up to a VCR with an X-rated video lying next to it: a hospital

version of a Times Square peep show—with private room so husbands could participate fully in the excitement of the spectacle. Earlier, the receptionist had announced that if any man experienced difficulty, his wife could be called in to assist. My husband did not experience any difficulty. He placed the filled cup into a hole in the wall, closed the little sliding door, and rang the bell to announce that his deposit was ready for pickup. At least one of us was having fun.

When Gabriel returned, we were prepared to wait a while but it turned out that I was in the first group called. The women were divided into groups of three. Lauren was in my group, as well as a younger woman in her twenties named Courtney. Courtney had angled brown hair with the shortest pieces falling into her eyes.

The three of us followed the nurse to a tiny waiting area. Lauren started to tell me what to expect. I would receive anesthesia via intravenous and would be “out” for about twenty-five minutes. When I woke up I would find out how many eggs were removed.

Lauren went first. Courtney and I started talking. Courtney was only twenty-six, but she and her husband weren’t able to get pregnant on their own. This was her first IVF attempt, but she had gone through multiple trials of artificial insemination. All of a sudden I saw Lauren being wheeled by. She was lying unconscious on the gurney wearing the operating outfit with the matching blue cap. Courtney was called next. I tried to read the celebrity magazine on the table and get absorbed in who was seeing whom. My concentration was broken when I saw Courtney being wheeled back from the operating room. Next it was my turn. I wondered if the following group of three would see my unconscious body being wheeled by—not a relaxing preparation for surgery.

Soon I was back in the same room where my cyst had been aspirated. There were bright lights shining on me as I lay across the operating table. At least this time anesthesia was a definite. I was hooked up intravenously, just as Lauren told me. A trail of tubes protruded from my hand. I did not go under right away, however, but watched while the doctor and nurse prepared their utensils. I’d better go under real soon, I thought, because I did not want to be awake for the birth of my eggs.

When I woke up I was on the bed with curtains pulled all around

me in the communal post-operation room. The nurse brought in my husband. She shared the good news that I was the producer of seventeen eggs. My husband and I were still in the running!

The side curtain started to move. Lauren's husband was pulling the curtain, and there was Lauren lying on the adjacent recovery bed.

"I just wanted to see how you did," she said.

"I had seventeen eggs."

"That's great!" she exclaimed. "I set my record with twenty-five eggs!"

We exchanged phone numbers.

The next afternoon we would find out how many eggs had been successfully fertilized. The nurse would tell me. Since a sperm was inserted into each egg, I was sure all seventeen would be fertilized. However, when the nurse called me she said about half of my eggs were fertilized—nine. Well, nine was still great. I should even have eggs left over to freeze for the future!

The next day the nurse would call to say whether my eggs would be returned at day three or day five. I feared the worst, and sure enough my eggs were a day-three transfer. The nurse tried to comfort me by saying that most people were a day-three transfer because it was too risky to wait for day five and possibly lose all the eggs.

When I returned for my egg transfer, Lauren was in the waiting area again. She told me every one of her eggs had been fertilized. In order to increase her chances, she had instructed the doctor to place the eggs back using a sonogram and to "hatch" every one so that they would adhere better. She wanted as many eggs placed back as possible. Lauren's doctor had already called her a number of times and told her the egg quality was good. I hadn't heard from my doctor since our initial meeting. Lauren asked me to pray for her because this was her last chance: every one of her credit cards was "maxed out."

The same order was observed for us three women. Lauren's eggs were put back first. Courtney was there again, and we started to talk. She had produced thirty-one eggs! I guess being in your twenties did make a big difference. She went in next, and I wished her good luck.

Finally it was my turn. I had to sign a paper stating that I was who I claimed to be. I suppose they didn't want the wrong person getting my eggs. The embryologist arrived and with an air of great importance

hand-delivered my set of fertilized eggs from the lab. Above me, a screen displayed a picture of each of my viable fertilized eggs. At this point there were only five. The other four had “demonstrated abnormal fertilization.” No more frozen eggs. It was these five. Three embryos had divided eight times and two had divided six times. The doctor said eight and six were good numbers. It was like a Las Vegas craps table.

Thanks to Lauren’s information, I asked the doctor whether he would guide my eggs back into place with the use of a sonogram. “No,” he said. He was of the old school and could slide my eggs back into the uterus without it. He was like an experienced safe cracker; he said he had a natural feel for the combination. Then I asked if my eggs were “hatched.” He said neither the embryologist or my doctor had recommended it. The doctor put my eggs back successfully, then double-checked that they were in the right location without spilling any on the floor.

My souvenir was a color picture of the five eggs. I could differentiate those with six divisions from the eight-division ones. There also was a score card. It delineated the history of all seventeen. From the eight eggs that didn’t fertilize, three were “immature,” two “appeared degenerative,” two had “morphology unsuitable for transfer,” and one “appeared healthy and did not become fertilized.” Each non-viable egg was a personal failure. About 50 percent of my total production was deformed. I was so identified with my eggs that it was as if something was the matter with me too. I wondered if I was going to have a baby or if I just was going to have a picture of five fertilized eggs and a score card to put in my baby album.

Next I was wheeled back into the recovery room with its large collection of beds with curtains around them. There was no anesthesia, so I was totally awake. The nurse told me to rest for a half hour before going home.

Lauren screamed out, “Victoria! How did it go?”

It turned out that she was next to me again.

“I had five eggs put back,” I answered.

Lauren told me that she had eight eggs returned. Her eggs all had divided to stage ten or twelve. She said she’d call the next day.

Lauren called the next morning. She told me that she was staying in bed with her legs up to enhance egg implantation. Her mother was

coming for a week to help so that she could remain in bed and increase her chances.

I confided that I had accidentally moved a box. There was no heavy lifting allowed, and I was worried that maybe I knocked out an egg from the womb. Lauren told me that the eggs probably didn't implant yet. She said wait to feel a marked cramp—that would tell me an egg had implanted. She explained that every time that she had become pregnant from a trial (although no baby of hers had ever gone to term), she always felt this sharp pain. I told her I'd wait for the pain. I was going back to work the next day, but for today I was in bed—but without my legs in the air.

Later that evening I actually did feel a sharp pain! I was ecstatic that I might be pregnant. I began to watch for signs of nausea because I had strong morning sickness while pregnant with my daughters.

Brittany, the sister who received the eggs from Dakota, called me. We had met one more time while getting blood drawn and exchanged numbers. She was upset because Dakota had made only three eggs and only one fertilized. However, it was of good quality and the egg had been transferred back. Her doctor informed her that the chances were about 20 percent now that only one egg was transferred.

The phone rang. It was Lauren. She was very “bummed out.” This time she hadn't felt “the cramp,” and she didn't feel the same as the other times when she was pregnant. I said that doesn't mean anything and that this pregnancy could be different. Lauren told me how to determine ahead of time if I was pregnant. It all depended on the estradiol and progesterone hormone levels. The hospital had taken them for research purposes only, but Lauren informed me that a high estradiol level probably meant pregnant and that if two days later it was even higher I was most definitely pregnant. Otherwise I probably was not. I told her I'd call the hospital and compare results with her.

Lauren called, ecstatic. Her first estradiol level was 500! She might be pregnant. One person from her IVF chat room group had an estradiol of 300, and she was pregnant. The one with an estradiol of 60 was not pregnant. I told her that my estradiol was less than 32—it didn't sound promising.

After speaking with Lauren, I called the IVF nurse and asked about my estradiol.

She said, "Estradiol is not always a good predictor."

"Can you tell anything from the estradiol level?" I asked.

"All I can say is that the estradiol levels should be increasing over time."

I hoped mine would be higher next time.

But my estradiol went down to less than 20. I was definitely not pregnant. Plus I did the "three days in advance of your missed period" home pregnancy test, and it did not show the necessary second pink line. I'd even looked under a magnifying glass, but there was only one pink line to be seen.

Lauren called again. Her estradiol had gone from 500 to 1,000! Lauren was sure she was pregnant and in fact carrying more than one child. Now I was the one who was not at all encouraged.

Brittany called me too. I told her the estradiol trick. She called the nurse to find out her two levels. Hers were also abysmally low.

It was very difficult waiting. As much as I wished that my family could be united before the birth of a baby, the four of us were still adjusting to living together as a family. Tensions remained, mostly between Gabriel and Lisette. This was consistent with my younger daughter's first reactions to Gabriel.

I had waited four months before introducing him to the children. They had never been introduced to any other men I dated. However, Gabriel seemed promising. I carefully orchestrated the initial encounter to take place at an amusement park. That way, I figured, the girls would be on their best behavior. They would be so excited to go on the rides that there would be no blowout fights between them.

Elizabeth, almost age eleven, was charming. She greeted Gabriel with a big smile and chatted as adeptly as any high-society hostess. She squealed with delight when Gabriel shot basketballs into hoops and won her a plush chimpanzee. Elizabeth already knew that Gabriel was her ticket out.

Elizabeth had been affected the most by the divorce. While I was still with her father, she overheard our fights and reprimanded her dad by saying, "Daddy, you shouldn't have a girlfriend." When Pierre and I had the family divorce discussion in front of the fireplace in the living

room, we told Elizabeth and Lisette that Pierre wanted to live alone (we left out the part about his going on an out-of-state sabbatical to be with his married lover). Elizabeth shrieked, “No, Daddy, please don’t go, don’t go, don’t do this!”

Then we had to sell our home. The new owners insisted on immediate occupancy. Elizabeth, Lisette, and I moved into one room at our kind elderly neighbor’s home so that Elizabeth could finish first grade. We could look out the window of our room and view our former yard with the children’s swing set. Elizabeth began running into the woods crying. Our eighty-year-old landlady and I would go looking for her.

When we moved that fall to the town where I grew up, Elizabeth started second grade at her new school. Her classmates thought that she was mute. When she finally began to speak, she only talked about her old school. For back-to-school night, Elizabeth hung up a composition about how her father left the family. Once Elizabeth got a best friend, everything changed. She blossomed socially and academically and was placed in the gifted program at school.

We had moved into an apartment a few blocks from the other side of the railroad tracks. The rest of the community resided in fancy houses. When I was shown our apartment, I kept looking for the second bedroom. The realtor explained that it was a “Junior Four.” I could sleep in the dining room with the closing glass doors, and the girls could sleep in the bedroom. The place was already at the top end of my budget so I leased it anyway.

Later the living conditions became even more crowded. I started with one psychology job connected to a school. The school gave me the same hours and vacations as Elizabeth and Lisette’s. However, in order to afford our Junior Four, I needed to see private patients at night. There was a babysitter to put the children on the school bus, another to take them off the bus, and a third nighttime sitter. If one sitter canceled it had a domino effect and my whole day of work collapsed. Therefore, I went “live in” and hired a nanny. Now there was my bed in the dining room, the girls in the bedroom, and the nanny in the living room. We took turns dining in our two-person eat-in kitchen. Elizabeth was very nice to Gabriel the entire five hours at the amusement park. She saw visions of a house, her own room, and a built-in father.

Lisette, however, who was eight, clutched my hand. After Gabriel accompanied her on one ride at the amusement park, she insisted that the same ride at camp was much better. When Gabriel took my hand, Lisette immediately squeezed between us and grabbed both my hands. Lisette had nothing personal against Gabriel. She just wanted her mother to herself. Also, Lisette had not been as affected by the divorce. She was four at the time and did not understand much. She thought that her father was on an extended business trip. She did not feel hurt and wasn't searching for a replacement father.

Once we were married eight months later, Elizabeth was grateful to Gabriel for the house and the chance to start again with an intact family. Lisette liked Gabriel but still did not want to share her mommy.

Gabriel also needed to adjust. Gabriel had lived alone since high school except for one college roommate in his freshman year. During more than twenty-five years of bachelorhood, he had developed his own way of doing things. He was very neat and organized and knew the correct place for each of his belongings. The children and I were slob. The children used his towel and toothbrush. They removed the scissors and tape from his drawer and did not return them.

These events were catastrophic for Gabriel, and his mode of survival was to take over the room in the basement. It had white concrete walls and floors, a tiny aboveground window and a real door that closed. His bed, desk, and bookshelf from his previous apartment were all arranged as if he'd never left. Whenever we drove him crazy, Gabriel escaped to his "bachelor pad."

Gabriel was relieved not to attend any more singles events. He had been part of a group of single men and women who had known each other since their twenties and who now were all approaching or in their fifties. They spent many summers together enjoying time-shares in the Hamptons. During the year, they met in New York on Friday nights to attend the plays of the Roundabout Theater group. For winter vacations, the men frequented Club Med. Once we were married, I asked Gabriel to renew his Roundabout subscription so that we could spend time with his friends and enjoy the performances. We were the only couple. In almost thirty years, Gabriel was the sole member of the group who managed to get married.

Gabriel frequently told me how lucky he was to find me. Gabriel maintained faith that he would find his bride, but after so many years there had been doubts. I let him know how happy I was to have married him. Sometimes at night, in bed, I'd ask him if he would have liked me if we'd met in college or when he was in medical school. He assured me that he would have. I wanted to know that Gabriel and I were meant to be together and that he would have wanted me even when he was younger and less desperate.

Gabriel was eager to become the girls' stepfather. He bought a book and audiobook on becoming a parent. Gabriel hoped to impart some of his own values and his love of Judaism. He knew that Pierre still saw the girls occasionally but thought that there was room for both fathers. When the girls returned from a weekend with Pierre, Gabriel went from being "Dad" to "Gabriel." Since my remarriage, after each school vacation visit Pierre supplied the girls with a framed photo of himself. Whenever I straightened their bedrooms, I inadvertently knocked over a few Pierres.

I decided to contact my sleep-away camp friend Star during this pregnancy waiting period. We had known each other since we were fifteen. I met her when she was sitting under a tree reading a book about Bob Dylan. Once camp ended, our parents used to drive us to sleep over at each other's houses. I felt like a wide-eyed country bumpkin of the suburbs, going to stay at my friend's city home in Brooklyn. Star, who had natural Shirley Temple curls, showed me around Manhattan, and we stood on the twofer line to buy half-price tickets to a Broadway show. We had been each other's confidantes for over twenty-five years.

Star had endometriosis. She had tried for years to get pregnant with artificial insemination, but nothing worked. Star had shown me an adoption book that she and her husband had prepared. There were smiling pictures of the two of them and welcoming words about how much they wanted a child. No one had selected them yet.

While on the adoption wait list, Star also tried one IVF cycle. Although she produced nine eggs, none of them fertilized. She was the only patient with no embryos. After her trial, a new doctor became head of the IVF program. He reviewed her chart and determined that the eggs had been harvested too early. Star tried a second IVF trial, and this time the eggs were kept in her follicles longer. At age thirty-nine, Star was

successful and nine months later gave birth to her daughter, Jewel.

I saw Star and her husband, Jay, as my IVF gurus. They knew about it from personal experience, support groups, and professionally. Star also was very active with RESOLVE: The National Infertility Association. She talked to other couples who were striving to have babies. Her husband was a physician's assistant for a doctor who dealt with infertility issues. Jay was very knowledgeable about the medical aspects. I knew that they would both be good resources during my IVF process and had already begun to talk with them.

I made the long distance call to Florida, where Star had moved from Brooklyn.

"Hey, Star."

"Any news yet?"

"No. I'm still waiting."

"I remember when Jay and I waited each time until it finally worked. It was agony. The whole process was really stressful. Are you and Gabriel still getting along?"

"Yes. We're both really wanting it to work."

"What about the girls?"

"They are both praying it doesn't work."

"Do you want to speak with Jay too?"

"Okay."

"I wish you well on the pregnancy test. Maybe you'll be one of the really, really lucky ones."

It was time to have my blood drawn for the official pregnancy test. I was sure the results would be negative, but my daughter Lisette tried to be encouraging. She said, "You never know, Mom. Don't give up hope. Maybe you are pregnant."

I was at the Thai restaurant getting takeout dinner when my cell phone rang. It was my husband Gabriel with the results.

"The test shows you're pregnant."

"I'm pregnant!" I screamed in the middle of the restaurant as if I'd just won a game show. Then, for more privacy, I went to the vestibule at the front of the restaurant. This was a small space wedged between the two sets of glass entry doors. Once there, I heard Gabriel qualify the results. "Well, you're sort of pregnant. The lab and the hospital count pregnant as an hCG number of five or above.

You're pregnant but you're only a 19. You should have a value of about 50. In two days you'll have another test to make sure you are still pregnant. The number should at least double."

Well, I didn't know you could be a "little bit pregnant." As far as I was concerned the hospital and the lab criteria both considered me pregnant so I was pregnant. Yeahhh!

On the way home I passed in front of the Babies "R" Us store. I made a sudden swerve into the parking lot and got a spot right by the door. First I looked at all of the adorable outfits. There were cute tiny dresses with bows and little boy jumpsuits with matching hats. There also were beautiful blankets to take the baby home from the hospital. They even had diaper bags that looked like designer pocketbooks.

Then I looked at the bassinet section. The bassinets were very high-tech and performed multiple functions: they could play music, rock like a cradle, and become a changing table.

The best was the crib set. I fell in love with an "antique" one that looked like Victorian wrought iron, with a star and moon and a canopy on top. I started to call over the salesman to purchase it but managed to restrain myself.

Two days later I had my second blood test. While I was waiting for the results, Lauren called. She was pregnant with multiple children. Definitely more than two, but she didn't know how many yet—maybe enough for her to make it onto *Oprah*. She told me that the "hatching" really worked because a bunch of embryos latched on. Her husband was already worried about his multiple mouths to feed.

I was called again with my blood test result. The level had gone up to 31! It wasn't in the safe 50 zone, but it had almost doubled. The nurse said that the baby could make it, but the odds were slim. I had an image of the baby extending a little hand and trying to hold on tight to the wall of my womb. Every night I looked at my five fertilized eggs picture and wondered which was the baby struggling to make it. Finally I picked one egg and called him James. James became my child. He was fighting for his life. I was moving carefully, trying not to dislodge him. He would grow stronger with time. He would make it to his birth. Then Gabriel and I would take him home from the hospital, wrapped in his tiny blanket.

Brittany called me. Her pregnancy test was negative. Her sister

Dakota had already left for Australia. Brittany would fly back to London. They would try again in the summer. I lost Lauren's phone number and never found out if she eventually delivered her multiples.

By now I was bleeding. The doctor told me that some people bleed during pregnancy. The bleeding could even appear to be a period, but you could still be pregnant.

Two days later I went for the next pregnancy test. It was an agonized wait. This time when the nurse called she said the number had gone to 17. She said I should continue my progesterone shots because technically I was still pregnant. I knew that the numbers should be going up—not down. I asked to speak with a doctor. The doctor came on and said it was all over. Don't take any more progesterone shots. In fact the number 17 could be much lower and the baby might already have died, although I was still registering pregnant.

I felt the tears welling up and believed that they would never stop. I felt as if my baby was being ripped out from me. He had been there, trying so hard to make it. And now James was gone. The sense of emptiness was total.

I waited for Gabriel to return from work.

"Gabriel, the baby is gone."

"Oh no. I'm so sorry."

We hugged each other.

"What if we never have a baby?" said Gabriel.

"Don't worry. We'll try again. We'll have one."

Gabriel also had been positive that the IVF trial would work. He already had researched obstetricians and made me an appointment with one of the best in our area. He had also compiled a list of pediatricians.

Lisette told me I could always try again. If we came upon baby goods stores, she took my hand and pulled me quickly past them. She was relieved there was no baby but concerned about me.

Elizabeth asked me the result of each blood pregnancy test. She wanted to know the baby's progress and to provide reports to her friends. When there was no more baby, she wasn't surprised.

I did not want Elizabeth to tell everyone about my IVF trial. But I did not think it was right to dictate that it was a "family secret." Elizabeth probably needed to talk with her friends to help her cope with

the whole situation. During my IVF trial, Elizabeth had also become a “mother.” Her home economics class conducted mock marriages. Every girl was assigned a male classmate as her groom. They designed wedding invitations and chose their honeymoon spots. Then the lucky couples received an instantaneous family—two eggs with their contents blown out. The blushing bride cared for one egg, and her husband for the sibling. Both children had the husband’s last name. Fortunately Elizabeth liked the partner in her arranged marriage.

Each day Elizabeth transported her egg baby, “Skyler Rose,” to and from school in a shoebox. Skyler wore a miniature felt diaper and snuggled under a cotton ball blanket. Alas, Elizabeth had bad luck. The last day that Skyler was due back in class, Elizabeth tripped on the way to school, and Skyler became Humpty Dumpty.

Elizabeth had no second chances. I planned to keep trying.