



LONGING FOR A CHILD

RESPECT LIFE SUNDAY 2007



THE CRY OF HANNAH AND RACHEL

“Scripture is filled with accounts of women who suffered from infertility... The Bible tells us that the sorrow they felt at not being able to have a child could not be diminished even by a husband’s love. In the Old Testament Elkanah says to his wife who was unable to conceive, ‘Hannah, why do you weep? And why do you not eat? And why is your heart so sad? Am I not more to you than ten sons?’ Of course Elkanah’s wife loved him, but she wanted to bear their child. Most of these stories in the Bible are told to show the power of God since in most cases the women become pregnant even in their old age. There is Sarah, the wife of Abraham and the mother of Issac; Hannah, wife of Elkanah, who becomes the mother of the prophet Samuel; and Elizabeth, the mother of John the Baptist.”¹

“And when Rachel saw that she bore Jacob no children, Rachel envied her sister; and said unto Jacob, Give me children, or else I die.”² And Issac prayed to the Lord for his wife, because she was barren; and the Lord granted his prayer and Rebecca his wife conceived.³

“But the Bible tells us there are limits to acceptable methods for conceiving a child for example Noah’s unmarried daughters who tried to get their father drunk so that they might have children by him! Obviously not any means can be used to achieve pregnancy.”⁴

Infertility is a growing problem in Australia and in many other countries around the world. It is estimated that around 10 to 15% of couples have difficulties conceiving at some stage in their life. Many of us know couples – perhaps friends or relatives who have longed for a child of their own.

NEW REPRODUCTIVE TECHNOLOGIES—MORE HYPE THAN PROMISE

Often in distress and desperation, and encouraged by the media and the medical profession, the couples have turned to the “reproductive technology industry” to provide them with a child. Couples who have not conceived after 12 months of trying to have a child are encouraged to join the IVF queue. More than 3 million babies have now been born around the world as a result of in vitro fertilization.⁵ Australia has played a key role in the development of in vitro fertilisation. The world’s second IVF baby was born in Melbourne at the Royal Women’s Hospital in 1980,⁶ and ever since, IVF has been hailed as a spectacular triumph of science and medicine.

THE CHURCH’S CONCERN ABOUT REPRODUCTIVE TECHNOLOGY

Although often derided for its opposition to reproductive technology, the Church speaks out in a spirit of love and concern for those under her care and to all people of good will. In order to assist couples suffering the pain of infertility, the Congregation for the Doctrine of the Faith issued the document *Donum Vitae*, or “The Gift of Life,” in 1987. The Congregation did not condemn the motives of couples seeking to overcome fertility problems, but clearly says that some methods used in reproductive technology are immoral, and wished to draw attention to this.

“*Donum Vitae* teaches that if an intervention assists the marriage act to attain its natural end, it might be considered moral; if it replaces the marriage act, then it is immoral.”⁷ The Congregation said that these methods were not wrong because they were artificial but because in using them some couples would do harm to themselves and their children, to the dignity of the human person and to marriage and family relationships.

CONCERNED ABOUT IVF: THE CHURCH STILL LOVES IVF BABIES

“One reproductive technology that the Church has clearly and unequivocally judged to be immoral is in vitro fertilization or IVF. Nevertheless children conceived through this procedure are children of God and are loved by their parents, as they should be. Like all children, regardless of the circumstances of their conception and birth, they should be loved, cherished and cared for,”⁸ baptized, and welcomed into our families and society.

Very few people understand the Church’s concerns about IVF as the couple want children and are “trying to overcome a “medical” problem (infertility) in their marriage.” At first glance IVF can seem to be ‘life-giving.’ But why, exactly, does the Church oppose it?

IVF creates a new human life in a laboratory dish away from the bodily embrace of his or her parents. The woman is treated with fertility drugs so that a number of eggs can be collected at once. Semen is collected usually after masturbation. The egg and sperm are placed in the same dish and fertilization is allowed to take place. New human life develops for a few days in a culture before one or more embryos are transferred to the mother’s womb in the hope that one will develop normally and survive to term.⁹

Usually many embryos will be manufactured in the process—sometimes, as many as twenty or more and only some of these will be returned to the woman’s body while the rest may be frozen, destroyed or used for research.¹⁰

IVF is very difficult for couples. In a sense, the technology takes over the woman’s body. The child originates as a laboratory product subject to quality control. It is the object of making rather than the fruit of human love. Husband and wife become merely the sources of biological material. IVF causes a terrible waste of human life. Only those embryos that appear to be developing normally are placed back in the womb. The rest are discarded or used for experimentation. Only a few embryos ever survive to birth. (see graph)

CHILDREN AS “PRODUCTS”

When “husbands and wives “make love,” they do not “make babies.” They give expression to their love for one another, and a child may or may not be engendered by that act of love. The marital act is not a manufacturing process, and children are not products... but of equal status and dignity with our parents.”¹¹ Every person has the right to be conceived and born from within marriage and therefore conception should occur from the marriage act, where the child can come to be as an equal third party to their love, equal in dignity and respect.

Pope Benedict XVI reminds us “we are not some casual and meaningless product of evolution. Each of us is the result of a thought of God. Each of us is willed, each of us is loved, each of us is necessary.”¹² The God of love has created us out of love in order that we might love and be loved. He explains, “God’s love does not differentiate between the newly conceived infant and the child or young person, or the adult and the elderly person... the human person is endowed with a very exalted dignity, rooted in the bond with the Creator. This exists in every person, in every stage of life.” For this reason the Church defends all human life as sacred and inviolable from its very first moments until its natural end.

“The dehumanizing aspects of some of these procedures are evident in the very language associated with them. There is the “reproductive technology industry.” Children are called the “products” of conception. Inherent in IVF is the treatment of children, in their very coming into being, as less than human beings.”¹³

GIFT

Some couples ask whether gamete-intra-fallopian (tube) transfer or “GIFT” is an acceptable variation of IVF. GIFT does not involve producing the embryo in the laboratory. The technique is similar to IVF until a stage at which, instead of fertilization occurring in

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the laboratory, the sperm and eggs are transferred directly into the woman's body for fertilization to take place either in the fallopian tube or in the uterus.

The Church has not taught directly on GIFT, partly because there are different ways of doing GIFT. The question for a couple to answer is whether the child can look back to an origin in the celebration of their love, or whether, in fact, the procedure replaces the marriage act in the origin of the child. Is the child a result of their loving union or a result of the IVF technologist "producing" the embryo?

IVF RISKS:

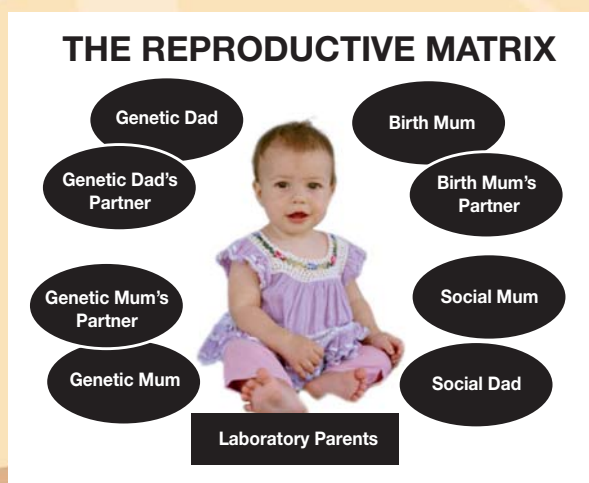
IVF is often promoted as a modern day scientific miracle, but the experience of those who have been involved in it shows that it comes at a price.

FERTILITY DRUGS

The Infertility Treatment Authority (ITA) collects information about IVF for the State of Victoria. From the latest figures in the annual report for 2006 it appears that 4561 women were treated with IVF in 2004. In order to improve their chances of taking home a live baby, these women were given hyper-ovulatory drugs to induce them to produce more than one egg per cycle, so that multiple embryos could be reimplanted. It appears that on average each woman produced 10 eggs (9.8) per cycle.¹⁴

Normally, a woman only produces one egg per cycle, from a ripened follicle in her ovaries. But fertility drugs force the ovaries to ripen many follicles at once. Each developing follicle can be around the size of a golf ball. Stimulating the ovaries to produce so many eggs at once can be extremely painful. Common side effects include; hot flushes, abdominal distension and discomfort, ovarian enlargement, blurred vision, nausea, vomiting, diarrhoea, bone pain, headaches, dizziness, pain redness and itching at the injection site, breast tenderness and swelling, irritability and mood changes.

Fertility drugs can be dangerous. In 2004, 308 women on ART programs in Australia developed ovarian hyperstimulation syndrome and 257 (83.4%) had to be admitted to hospital. In total, 1.3% of women developed this condition while undergoing ART treatment. There have been at least three documented deaths of women in Australia while undergoing IVF programs.¹⁵



PERSONAL AND PSYCHOLOGICAL PROBLEMS

Women who have undergone IVF treatment report suffering pain and feeling humiliated while undergoing these procedures. Commonly women say that they didn't realise what they would have to endure. One woman writes that after IVF she "felt very depressed for weeks following the failure of my second attempt."

"Emotional and unable to cope...I felt very lethargic and tired...suffered from headaches, bloated stomach, and was irritated...continued to superovulate for at least two or three months

afterwards... the effects of PMT tripled... worst was the continual dizziness ...Even now, three months later, I still feel dizzy if I overdo things. Three months after my first attempt I bled for three weeks and was very ill as I developed a severe bronchitis at the same time. The bleeding episode ...last year was very unusual for me—my GP said it was probably connected to the IVF treatment."¹⁶

Men also report humiliation and indignity in being sent to a cubicle to "provide a sperm sample."

EMBRYO WASTAGE

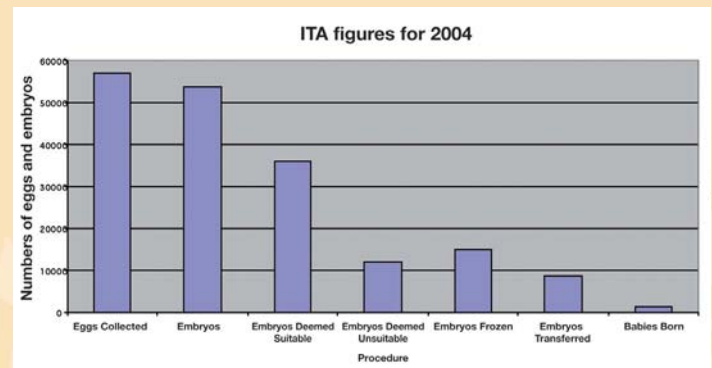
IVF clinics collected 56,986 eggs in 2004 from Victorian women who had been hyperstimulated. They fertilized 53,515 of them, and of these embryos they determined that 35,957 were suitable for further use (67%). It appears from the ITA data that of these 35,957 embryos,

- 15,130 were frozen for later use or experimentation (42.07%)
- 12,138 were lost or discarded as they were deemed unsuitable for transfer or freezing (33.75%)
- 8,689 used (24.16%) were transferred (to a woman's body)

Eventually, 1,271 babies were born for the year 2004, (presumably this would include embryos manufactured in 2004 and used fresh as well as those frozen and thawed from previous years).

It appears that the survival rate of fresh embryos could be expected to be less than 14.6%, if 8,689 embryos were eventually transferred back to a woman's body and some of the babies born in 2004 were also born after being frozen for a period of time.

The overall survival rate for embryos appears to be around 3.5%¹⁷



OTHER DANGERS FOR IVF CHILDREN

A study published in the UK this year (2007) by the Royal College of Obstetricians and Gynaecologists shows that IVF embryos are exposed to additional dangers.¹⁸ Children born as a result of IVF are at greater risk of being born with a low birth weight (1.7%) or a very low birth weight (2.7%) when compared to naturally conceived singletons. They are also at greater risk (40-60%) of being small for gestational age and have a two-fold greater risk of being born before term (less than 32 weeks).

This same study reports that there is almost a 70% increase in the risk of perinatal death for IVF singletons compared with spontaneous conceptions. There is also a 30%- 40% risk that the children will be born with congenital anomalies compared with children born without their mother receiving IVF treatment. Australian studies have found similar increased risks of defects.¹⁹ This could in part be due to the way IVF embryos are cultured in the lab and outside their normal environment.

SELECTIVE TERMINATION

In an effort to reduce the numbers of IVF babies born with a genetic disease doctors often suggest a technique called "selective termination" to mothers carrying two or more unborn children. A leading IVF expert, Professor Evans has claimed that this

procedure is not abortion, as this “is not ending a pregnancy.” Clearly this is not the case. He reportedly “has carried out about 4000 “foetal reductions.”²⁰

One heartbroken Melbourne couple say “they will have to live with the guilt and pain for the rest of their lives after deciding to abort one of their twins, ...because they found that the baby had an extra chromosome...The whole pregnancy was poisoned. What should have been a time of joy wasn’t. We’re dealing with guilt the whole time. Every single day we look at Lachlan, we are going to remember Jarod. It is going to be a lifetime of grief.”²¹

LOST FATHERS: LOST FAMILIES

It has been estimated that in Australia alone over 10,000 babies have been born as a result of artificial insemination programs.²² Some think that sperm donors have performed a noble community service by helping infertile couples create happy families. But Joanna Rose and Myfanwy Walker “are the first generation of children born of donor insemination and the very first to speak out against it. They want it banned, to stop the very process that created them in the first place.”²³

Just wanting to find their father can lead to further family grief for children born from AI. As Joanna Rose describes, “if DI (Donor Insemination) children declare an interest in wanting to know their full identity they are, in effect, publicly acknowledging the fact that specific choices made by their parents have caused them genealogical disadvantage, and that they are seeking a remedy for that distress. Of course this risks putting a strain on their family relationships.”²⁴ She says she feels like a member of a new stolen generation.

Joanna and her brother have taken their fight to find their father to Britain’s High Court. Joanna is currently studying for a PhD in Australia, researching the consequences of donor conception. She speaks of suffering from a disenfranchised grief and of being “robbed of 50% of my genetic heritage”²⁵ She says that she suffers from feelings of loss and separation, from grief of familial severance, feelings of illegitimacy, loss of medical history of our paternal families, grief and separation anxiety²⁶ and genetic abandonment.²⁷ She says about her father “I think he was a medical student, apparently, and I know he donated during 1971 at Harley Street. There was a handful of guys who donated for seven years, up to three times a week, and they called it the “wank bank,” and apparently I have probably between 200 and 300 half-siblings.”²⁸

Joanna pin-points the depersonalised and clinical manner of her conception. “You had lab coats and syringes and an aseptic technique, you know. You are the genetic combination of people who wouldn’t touch each other with a barge pole. You know, they didn’t even want to look at each other. That gets to you.”²⁹

TANGLEDWEBS SUPPORT GROUP

A new support group, *TangledWebs* has formed in Melbourne to help those suffering as a result of these programs, and to “raise public awareness concerning issues of identity and kinship loss for Donor Conceived people.” They are also working to “shift the focus of Donor Conception from meeting the needs of adults to defending the rights of children born as a result and protecting them from the intrinsic injustices of the practise.”³⁰

The Infertility Treatment Act in Victoria has given those involved in IVF and donor conception programs some protection, as sperm donors in Victoria are only allowed to donate up to 10

times. In other states such as NSW where there were few restrictions, one donor told the ABC’s Four Corners program that he had donated sperm 318 times.³¹ As each donation can be used more

than once it is possible that he has fathered many children, and that they will be completely unaware that they are genetically related.

IS IVF INHERENTLY ANTI-WOMAN?

Courageous feminists have opposed reproductive technology, and they continue to do so. Gena Corea says “it is true that we are allowed to speak, even taken along by pharmacrats to talk on television programs, if we say the right things such as: “I will go through *anything*, including IVF, to bear a child and be grateful for it,”³² but there is much less readiness to hear women who have had negative experiences.

A number of feminists have documented women’s experience of IVF in books such as *Living Laboratories, Women and Wombs, The Baby Machine, The Mother Machine, and Infertility*. Alarmed at the implications of these technologies the future of women, they formed the Feminist International Network on the New Reproductive technologies, or FINRAGE,³³ and more recently *Hands Off Our Ovaries*.

Gena Corea and Robin Rowland say that women who speak out are often accused of being insensitive to the needs of infertile women.³⁴ But they have an “overwhelming sympathy and empathy for the plight of the infertile” but “cannot divorce this from the feeling that they (infertile women) are being used by the medical profession in order to gain funding for research which is not necessarily intended to help the infertile person.”³⁵

Gena Cora is adamant that “the new reproductive technologies are not all about helping the infertile,” but are “about controlling women, controlling child production, controlling human evolution,” and that women’s bodies provide the raw material for research.³⁶ Janice Raymond argues that reproductive technologies amount to a form of “medical violence against women,” because they “violate the integrity of a woman’s body in ways that are dangerous, destructive, debilitating.”³⁷

Anna Pappert writes “the new reproductive technologies, however, try to seduce us with science. We live in an age where we are made to believe science can make all things possible. We are supposed to believe that new reproductive technologies will give us babies because we have been taught to believe in the promise of science. But the promises of new reproductive technology are false, and worse, they are cruel.”³⁸ And they are often offered to women at a time in their lives where they are most vulnerable to exploitation.

SURROGACY

Surrogate motherhood involves engaging a woman to become pregnant for another couple or for someone else. The surrogate mother may use her own egg, or another woman’s in which case IVF would be needed. The sperm may be her partner’s or it may come from a donor. For those couples unable to carry a child to term, surrogacy might seem like a way of having a child of their own.

But the Church warns that “surrogate motherhood represents an objective failure to meet the obligations of maternal love,

of conjugal fidelity and of responsible motherhood; it offends the dignity and the right of the child to be conceived, carried in the womb, brought into the world and brought up by his own parents; it sets up, to the detriment of families, a division between the physical, psychological and moral elements which constitute those families.”³⁹

Feminists say surrogacy only creates a new form of trafficking in women’s bodies. Mary Beth Whitehead was one of the first women in the world to become a surrogate mother. She was hired by a wealthy US couple, and describes her experience,

*... I genuinely believed that this was a way for me to help better the world, ... I now believe that this was a form of brainwashing. Over and over they told me that this was the “couple’s baby...No one ever said to me: It’s your baby ... They didn’t tell me that it was Ryan’s and Tuesday’s baby sister...It was the “couple’s child.” It wasn’t until the day I delivered her that I finally understood that I wasn’t giving Betsy Stern her baby. I was giving her my baby.*⁴⁰

Another woman, Nancy Barrass says,

*The “surrogacy” arrangement has disrupted my family forever. I did not realize the effect it would have on my daughter. When I came home from hospital, my daughter, aged eight at the time, asked: “Mommy, if I am a bad girl, are you going to give me away too?”...For months she could not sleep at night and frequently asked if I was going to give her away or if I had ever thought of giving her away. The psychologist who counselled my daughter after her brother was born said this will affect her for the rest of her life.*⁴¹

A growing number of women who have been involved in surrogacy arrangements are now speaking out against surrogacy and are working together to have it banned. As Patricia Foster explains,

*“...Surrogacy may help take the heartache away for one family but it surely destroys another. Infertile women sometimes say they feel pain every time they see a baby, a child. I’m the one who now looks at a child that goes by, at every crying baby that I hear, to check if it is my child. I wonder every day what he looks like or what he is doing –is he healthy or could he be sick? Is he being taken care of? I look at his empty crib and live one day at a time until I see my child again.”*⁴²

In another tragic twist “a British woman hired by a Californian couple to have a baby for them has sued the couple for allegedly backing out of the deal because she refused to abort one of the twins...The couple made it clear they wanted one child or none at all.”⁴³

As experience shows when a woman carries a child for nine months she usually develops a strong emotional attachment to that child and can have great trouble giving that child away. For that reason in Victoria the woman who gives birth to the child is considered the legal mother and surrogacy contracts are legally unenforceable. The Victorian Parliament has decided not to prohibit surrogacy arrangements but does discourage them.

POSITIVE ALTERNATIVES TO IVF

Many couples are relatively fertile rather than permanently infertile. In those who are reported as infertile, there is a natural conception rate, which would appear to be of the order of 25-30% per annum. From a broad range of studies it would appear that between 50% and 70% of couples who are classified as having a problem with infertility will conceive a child within 5 years. There are several retrospective studies that indicate that in developed countries, the rate of absolute infertility, that is in women who have tried to conceive but are still childless when they reach 50, may be as low as 3%.”

Learning to know when she is at her most fertile can increase a couple’s natural fertility. As few women have regular cycles, this may involve hormonal testing or methods of natural fertility

awareness that focus on natural symptoms of fertility.

BILLINGS OVULATION METHOD

The Billings Family Life Centre has recently concluded some research into couples seeking to overcome infertility. In the study group, 207 women had been trying to achieve pregnancy for more than twelve months. They were thus classified as infertile. They were instructed in the Billings Method and taught to identify peak fertility. The outcome is known for 172. Subsequently, within an average of 4.7 months, 111 became pregnant. That is a success rate of 65%.

In the same study group there were 37 women who had unsuccessfully attempted IVF or other form of assisted reproduction. After Billings instruction, 14 became pregnant. For more information about the Billings Method see www.woomb.org

FERTILITY CARE CENTRE- PERTH

The Fertility Care and NaProTechnology centre in Perth have developed an approach to women’s health care that depends on the natural symptoms and respects their natural fertility, but uses medical technology such as ultrasound analysis and hormonal supplementation to aid fertility. For more information see www.fertilitycare.com.au.

SYMPTOTHERMAL METHOD

The symptothermal method uses a range of observations to determine fertility. For more information contact Australian Council of Natural Family Planning at www.acnfp.com.au

A PEOPLE OF LIFE AND LOVE

Couples who long for children can suffer emotionally, spiritually and psychologically. Some insights might help us understand this suffering. Life is a gift. No one can demand a gift but it is only something to be received and accepted with humility and gratitude. This period of waiting “need not be wasted time but can instead be a time to develop authentic spiritual parenthood.” In their childlessness, they have something irreplaceable to offer the Church and the world: fruitfulness in Christ.⁴⁴

The mystic Adrienne von Speyr, explains it beautifully, “every Christian marriage is blessed by God and is fruitful in him, whether through the blessing of children, or the blessing of sacrifice. If God chooses the second alternative, the spiritual fruitfulness of marriage is increased and widened out invisibly so that it flows into the whole community.” In other words that love that the couple would have lavished on their children can be re-directed to some other special vocation.

Benedict XIV says that “love is the light and in the end the only light” that can illuminate the darkness of the world. We are called as Christians to be the true bearers of light within history, and to transform our world with love. All of us have a special dignity whether or not we ever marry or become parents. We are called to build a world where every human life is loved and revered as a sign of God’s love in the world.

PRAYER TO OUR LADY OF SEIDNAYA

Our Lady of Seidnaya,
Your intercession has brought joy to so many women;
We pray for all those suffering from infertility,
Couples like Rebecca and Isaac
Women like Hanna and Rachel who longed for children
We ask that you might remember them
And ask the Father of Life to bless them with children
Comfort those who remain childless and keep them close
For we are all called to love and be loved
And to build a new culture of life and love.



THE STORY OF SEIDNAYA

High on a hill near Damascus lies the town of Seidnaya. It is home to the Greek Orthodox convent of Our Lady, and looks more like a Crusader castle than a convent. According to legend the monastery was founded in 547 century by the Byzantine Emperor, Justinian, who chased a stag to the top of the hill only to witness it change into an apparition of the Virgin Mary. Our Lady asked him to build a convent there on top of a rock. Ever since the convent has been a place of pilgrimage, at one point the most important Christian pilgrimage site outside Jerusalem. It also houses a remarkable icon of Our Lady, said to be painted by St Luke, the Evangelist and venerated for its miraculous powers.

William Dalrymple a visitor to Seidnaya says that he witnessed something of a modern miracle, an extraordinary sight, "Christians and Muslims praying together in a fashion unimaginable today almost anywhere else in the Near East." Curious, he approached Sister Tecla, who explained, "the Muslims come here because they want babies," she said simply. "Our Lady has shown her power and blessed many of the Muslims. The people started to talk about her and now more Muslims come here than Christians. If they ask for her she will be there... They come in the evening, they make vows and then the women spend the night. They sleep on a blanket in front of the holy icon of Our Lady."

"And it works?" Dalrymple asked. "I have seen with my own eyes," said Sister Tecla. "One Muslim woman had been waiting for a baby for twenty years. She was beyond the normal age of childbearing but someone told her about the Virgin of Seidnaya. She came here and spent two nights in front of the icon. She was so desperate..." "What happened," he asked? "She returned the following year," said Sister Tecla, "with triplets"⁴⁵

Prayers to Our Lady of Seidnaya cannot hurt anyone! The more we learn about reproductive technology and its harmful effects on women and children, a holiday to Seidnaya might be far safer, cheaper and more effective!

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15. The deaths were held to be anaesthetic related. Anaesthetic risks are increased by ovarian hyperstimulation syndrome. Two women died on the IVF program at the Avro Clinic, now the Concept Clinic, which was housed in the King Edward Memorial Hospital in Perth. In both cases there was respiratory failure, in the second case die to "therapeutic misadventure" according to the coroner's report. In both cases the women were undergoing laparoscopy. Dr Nicholas Tonti-Filippini, *Scrutiny of Acts and Regulations*

- Committee Alert Digest 17/4/2007. Also see the National Perinatal Statistics Unit Report 2004.
16. Renate D. Klein, *Infertility: Women Speak Out*, (Pandora Press: Sydney), p 226
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41. Nancy Barrass, in Renate D. Klein, *Infertility: Women Speak Out*, (Pandora Press: Sydney) p 158
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