



MISCARRIAGES OF JUSTICE

I'm entitled to be a mum, aren't I? **By Erin Phelan**

It is 7:30 in the morning, and the waiting room on the 18th floor of the LifeQuest Centre for Reproductive Medicine in Toronto is packed. This is the witching hour for blood samples and ultrasounds, and I'm here for my first round of "cycle monitoring." Women thumb their BlackBerries, sharing glances, thought bubbles floating over their heads that say, *This sucks. Do I look as miserable as her?*

My number gets called, and I roll up my sleeve. The needle punctures my skin, and a vial fills with deep red. I sit down to wait for my ultrasound, where they will check my hormone levels and the size of my ovum. It's February 2008. I notice a copy of *Reader's Digest* on the table—in it, an article I've written about tracing my family roots in Ireland. I wonder how I ever got that story done; I was writing it in Dublin when my second miscarriage started—and everything afterwards is a blur. In fact, the past year is blurred beyond recognition. I'm nearly 36 years old and I feel like I don't know who I am anymore.

I was always going to be a mum. From the first time I changed a diaper, to being my childhood neighbourhood's popular babysitter, I embodied the word "maternal." When I met my husband I was elated to inherit two children; but though I adore my stepchildren, I felt I would only become a mother when I held my own baby in my arms. I waited to get pregnant until my 30s and my career was moderately successful, then stopped taking contraceptives. Bedroom forays took on purpose, and I figured I'd knock out my first child by age 33, and another before I hit 35. I had a plan. Recurrent miscarriage wasn't part of it.

The first one, in May 2006, was a shock: At the 12-week scan, bursting with excitement at seeing the baby for the first time, my husband and I were told the fetus had died, likely at eight weeks. They called it a "missed abortion," the first of many medical terms of a new lexicon I'd learn: the words of the infertility world. A missed abortion is when the pregnancy is present, but the fetus is no longer developing. A few days later I went for my dilatation and curettage, sandwiched between a 26-year-old in for a voluntary abortion and a woman pushing 40, in for her third D&C after seven miscarriages. The irony wasn't lost on me.

I went into a spiral, sobbing for weeks, blaming myself. I'd travelled to the U.K. that spring—had that caused it? I am a fitness trainer—had I taught one of my classes a little too hard? As I wracked my brain, I set myself the mission of getting pregnant again, and within three months, we were expecting. Nine weeks in, I started to bleed. I felt like I had been struck by lightning twice. Shortly after, I accompanied my husband on his business trip to South Africa, which I had been excited about—I'd thought I would see the sights and do some writing, but instead I lay curled up on our hotel bed, emotionally comatose.

Back in Canada, we went to a specialist at LifeQuest, one of Toronto's premier fertility clinics. The doctor handed us a stack of forms for testing (blood work to determine if there were medical problems with me, my husband or between us; sometimes, I learned, sperm and egg are not compatible)—and on the top were two words staring coldly at me: HABITUAL ABORTER. "It's just a medical term," the doctor reassured me as the tears ran down my face. When he saw us out the door, he gave just one order: "Whatever you do, don't get pregnant. If you do, you'll have to wait months for your body to settle down before we do any tests."

So we returned to using condoms—and, two months later, discovered they aren't fail-proof. I felt only dread when I saw the "+" sign on the home pregnancy test. And, sure enough, a scan indicated trouble—a low fetal heartbeat. He or she was gone before eight weeks.

It was January 2007, and I had lost three babies in less than a year. I had thought I was a strong person—I'd lost my father to a heart attack when I was 11 and had overcome an eating disorder in my 20s—but nothing can prepare you for wanting a child so badly, seeing its little heart beating on the ultrasound, and then learning it is gone.

I was now a woman who was "experiencing fertility issues," and it became something that defined me—like having blond hair, or being a writer. Everywhere I looked there were pregnant women and women pushing strollers. My gut wrenched whenever a friend announced her pregnancy. I tried to be happy for them, but inside I was shattering. What was wrong with me? Why was I such a failure?

Six months after that third miscarriage, we were back at LifeQuest. My husband and I completed the series of tests, and nothing was technically amiss—we were both considered healthy and fertile, so the command was to go forth and procreate.

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Sex had become a chore; on days where I was ovulating, we tried. And let's be clear: There is nothing less sexy than "trying" for a baby. Our marriage began to suffer. Men like to "fix" things, and my husband couldn't fix us. Month after month, the pregnancy tests came back negative. I'd never had a problem getting pregnant before, but now there appeared to be something else wrong with me. I was told to "relax." Frustrated, angry and a little psychotic, I went back to the specialist. If there was nothing wrong with us, why wasn't I getting pregnant? The doctor ordered more tests, including checking the size of my egg, when I was ovulating and my hormone levels.

"At this stage," the doctor explained, "we have to look at intervention." That could mean stimulating my ovaries with drugs to produce more eggs, taking drugs to augment a potentially thin uterine wall or, my favourite from the lexicon, "sperm washing"—separating my husband's good sperm from bad before artificially inseminating me. A part of me still needed to believe I would magically get pregnant without complications, because none of those options sounded good.

At this particularly raw moment, someone gave me Eckhart Tolle's *A New Earth*. I'm not one who seeks out Oprah selections, but I believe you read certain books at moments in your life when you are receptive to the message. I was angry and upset, and felt on the verge of mental collapse, but the book made me realize how wrapped up my ego was in becoming a mother. This was a dangerous track: If motherhood wasn't in the cards, would I go through life miserable? I was crippled by my past and fixated on an unknown future. I had to forgive myself for my miscarriages—for the responsibility I felt I bore—and somehow move forward.

I've always been the kind of woman who let experiences define her, and had been letting miscarriage be one of those experiences. →



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I'd been trying to erase something that was now, whether I liked it or not, a part of who I am.

Today, as I sit in LifeQuest, I look around the room and see compatriots, women who may or may not ever have children. Being a mum is no longer a given for us. I know how determined some of these women are—like my



An estimated one in four pregnancies in Canada ends in miscarriage.

friend who, after five miscarriages and three different drug cocktails, still hasn't given up hope. But I'm now asking myself tough questions: How far am I willing to go? How do I feel about fertility drugs and in vitro fertilization? Would I consider a donor egg or a surrogate? Is adoption for me? I'm 36—how long am I prepared to do this? And, most of all, what if I won't actually be a mother?

A few weeks later and the blood test results are in. The news isn't good. "What we see here," the doctor says, pointing to a graph, "is that you are ovulating too soon, likely with an immature egg. That's why you've been miscarrying." He outlines my "protocol"—injections to boost the egg's development, injections to delay ovulation, daily monitoring to see when the egg is mature, another injection to stimulate ovulation, "timed intercourse" (another favourite term) and, hope above hopes, nine months later, a baby. Or three, since that's a risk of fertility drugs.

My chart says I'm on time in my cycle to get started. *Today*. There is no time to process. I am ushered into a room where a nurse hands me a needle to be filled with drugs that I will purchase, measure out and administer at home. She shows me how to get the air out of the needle, where to stick it and how to dispose of it. All I need to do is to fill the prescription.

It is midday. I walk out in a daze, past the

waiting room. A couple of women are leafing through magazines—one of them *Reader's Digest*, the issue with my article about tracing my ancestors in Ireland. I smile, thinking of that amazing experience, of the dozens of reader letters I received after my story was published, and of the TV show *Ancestors in the Attic* that brought me to Ireland to film it.

And that gets me thinking about the positives that define me. I'm a writer and a fitness trainer. I'm a wife, a daughter, a stepmum, a sister and a friend. I'm a cook, a pianist, a traveller and a scuba diver. I'm a lover of films, books, food, wine and conversation. I'm creative, energetic and curious. I like making people laugh, but love meditative time. I have good health, a great family and wonderful friends. I'm blessed.

Riding down the elevator, the idea of fertility drugs coursing through my body is sinking in—and scaring me. I'm realizing that perhaps being a mum isn't in the cards. It's been more than two years since we started "trying" for a baby. At this moment, I don't know if I want to give over more of my life to the pursuit, to spend weeks, months or years and thousands of dollars, maybe for nothing. But I know this: I need to get off the roller coaster for a while.

I walk out onto the sidewalk with the prescription still in my back pocket—tucked away, to be filled in the future, or not, depending on what I decide. I can start the treatment any time, I'm told. But for now, there is a night out to enjoy with my husband, a glass of wine to drink and a novel to read by my bedside. There is also a story to write. For now, that's enough. In fact, that's plenty. □



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