

THE WHOLE STAIRCASE
OR
One Step
at a
Time

by Jane Bouterse



*Shannon and Kirk Reardon's son,
Holden Vincent*

The letter arrived unexpectedly after the publication of ALT's Special Edition! Health and Fitness, September 2010. "I want to approach you with a subject that is rarely broached," the spare, informed sentence stated. "I am emailing you about this after much thought and the realization that this is a large problem here in Texarkana. The number of women that I personally know that are struggling... is now in the double digits."

In today's world--awash with media and messages—does a "rarely broached" subject actually exist? Katrina Thrash, the letter writer, not only knows the subject's existence but also understands the necessity for increased awareness. The subject is Infertility. According to the Centers for Disease Control and Prevention, "about 10 percent of women (6.1 million) in the United States ages 15-44 have difficulty getting pregnant or staying pregnant." About one-third of infertility cases are women's problems; one-third, male and one-third caused by a mixture of male and female or unknown problems. Katrina and her husband, Tim have weathered the challenges of infertility and have joined three other couples—Lisa and Alex Harris; Shannon

and Kirk Reardon and Ginger and Johnny Mitchell-- to share their experiences. All of these couples have ridden the emotional roller coasters created by their intense desires for biological children and their inability to conceive. Their willingness to describe the various features of their experiences is prompted by their hopes for helping others—testimonies of their faith and courage. Although the tears and fears, even the pains and progress, of their choices are similar, their rides have been quite different.

Lisa Harris and her husband Alex were stunned by the existence of an infertility problem, since Lisa, at age 17 had conceived naturally and delivered her daughter Jordan, prematurely. Lisa had been a single mom for several years when she married Alex. After two years of marriage, 36 year old Lisa and 35 year old Alex decided that it was time to have a child of their own, and they began in earnest. Lisa laughs softly and almost as though she is talking to herself, "The first time I was young, totally unprepared and scared. This time, every detail had been planned. I was so excited, so ready." Nothing happened. Most specialists recommend a year of trying, but women

35 or older are encouraged to see their doctor if conception has not occurred after 6 months. "A woman's chances of having a baby decrease rapidly every year after the age of 30."

Doctors rely on multiple tests for both the woman and the man when an infertility problem seems to exist. Lisa's tests began first and immediately revealed that her fallopian tubes (the transports for the egg to the uterus) were completely dilated and about to rupture. The poison liquid within these blocked tubes can be deadly if released, but Lisa made it to Baylor in time for surgery. Her life was actually saved by her failed attempts to get pregnant. Six weeks later Lisa and Alex took the first of many trips to the Center for Fertility in Shreveport and eventual in vitro fertilization, one type of ART (Assisted Reproductive Technology). Alex and Lisa have been fortunate, as the cause of their infertility problem was quickly identified and resolved. Often identifying the cause or causes of infertility can be a long and emotional process.

Katrina and Tim Thrash were married in 2003, and one year later decided they would begin their family. Katrina was anxious, since she had a

medical history of irregular periods and pain. "I think I developed endometriosis (when the uterine tissue implants and grows outside the uterus causing pain, scarring, inflammation and often infertility) in high school, but the doctors just put me on birth control pills" After an unsuccessful year of trying, Katrina and Tim sought medical advice. Three years and six doctors later, they were still seeking answers.

A friend referred the couple to an OB/GYN in Plano. By now, Katrina was begging for a hysterectomy because of pain and felt like a complete failure. She even encouraged her husband to leave her and marry someone who could give him the family he wanted. Katrina was denied the hysterectomy and the divorce; instead, they were directed to the office of Dr. Putman, an infertility specialist at Baylor Medical Center. Their world began immediately to change.

Tim was referred to Dr. Buch, a male infertility specialist. "I didn't know there was such a thing," Tim still speaks with a touch of surprise in his voice. Tests determined that Tim had problems with the motility of his sperm "and that was after he has been told by two separate doctors he was OK," Katrina writes. "[Dr. Buch] told us we had only a 3% chance of conceiving...so this information floored us! He recommended surgery and explained that my husband's recovery would take 9 months. I was recovering from my second surgery for endometriosis, and I had only an 18 month window in which I could get pregnant. With his 9 month recovery

period, this put us near the end of my window of opportunity. The waiting was awful."



Katrina and Tim Thrash's twins, Abigail Marienne and Jared Deene

"Now, I always ask if the husbands have been tested," Tim adds. After 6 months, Tim was declared fit, so the couple could move on to their last procedure, but their roller coaster was just beginning to gain speed.

Causes of infertility in both men and women vary, but major factors for both include **age**, **lifestyle choices**—alcohol, smoking, obesity, caffeine; **health**—disease or physical problems, medicines, treatments; **exercise**; **STDs**; **family history** or **stress**.

Another couple was just boarding their roller coaster. Shannon and Kirk Reardon love their Jack Russell Terriers, Kramer and Milo, but they wanted children

to complete their family circle. After trying for a year to get pregnant, they sought medical advice. Kirk was tested first,

and he was pronounced OK. When Shannon's tubes were examined in Texarkana, she was referred to the Arkansas Fertility and Gynecology Associates in Little Rock; one of her tubes was a bit cloudy. The real problem was endometriosis, but a laparoscopy (minor surgery to see inside the abdomen) successfully removed most of the implant from her ovaries. After six months of trying again on their own, Shannon discovered she was pregnant but five days later, miscarried. By now they both needed some recovery time, so they suspended their efforts and enjoyed some R&R in Mexico. Four months later, the couple began IUI treatments (15-20% chance of getting pregnant), but after four unsuccessful procedures,

realized that IVF was going to be necessary. The cycle of shots, medicines, sonograms, blood work began again. "When I got my medicines," Shannon explains, "I felt like we could open our own pharmacy. I was a walking hormone." Both Shannon and Kirk had to give up all caffeine for six weeks prior to the IVF process. "We were both horribly scared to do this [IVF]. It was a huge risk." Shannon confesses.

Finally, the long process reached the moment doctors and the couple had been working toward—harvest day. Everything had to be done on a precise schedule. Fourteen eggs were retrieved, seven, fertilized. Then the "fun part,"

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Internet Address: <http://www.fda.gov>

The Centers for Disease Control/ Division of Reproductive Health

Phone Number(s) (800) CDC-INFO (232-4636)

Internet Address: <http://www.cdc.gov/Reproductivehealth/DRH/index.htm>

American College of Obstetricians and Gynecologists (ACOG) Resource Center

Phone Number (s): (800) 762-2264

Internet Address: <http://www.acog.org>

American Society for Reproductive Medicine

Phone Number(s): (205)978-5000

Internet Address: <http://www.asrm.org/>

RESOLVE: The National Infertility Association

Phone Number(s): (888)623-0744

Internet Address: <http://www.resolve.org>

American Fertility Association

Phone Number(s): (888)917-37777

Internet Address: <http://www.theafa.org>

Fertile Hope

Phone Number(s): (888)914-HOPE (4673)

Internet Address: <http://www.fertilehope.org>

U.S. Department of Health and Human Services, Office on Women's Health

Phone Number(s): 1-800-994-9662 or TDD: 1-888-220-5446

<http://womenshealth.gov>

according to Shannon, began as daily calls from Little Rock relayed the status of her “embabies.” Five days after retrieval, three fertilized eggs were ready for transfer. The Reardons’ doctor recommended only one egg be transferred.

Kirk and Shannon wrestled with this decision all the way to Little Rock. Shannon was on the gurney, ready for the transfer, when they told the doctor, “We just want to go for two.” Ten days later, they learned they were pregnant. After an uneventful pregnancy, Holden Vincent Reardon, a healthy 8 pounds, joined his mom and dad on January 12, 2010.

Shannon and Kirk’s courage, emotional, physical and financial commitments and sacrifices have been rewarded.

Ginger and Johnny Mitchell are virtual newlyweds. A native of Daingerfield, Johnny met Ginger in June 2008, shortly after his move to Texarkana. An outdoorsman who enjoys hunting and fishing, Johnny took Ginger fishing at Lake Wright Patman on their first date. Ginger just smiles when she admits, “After that date, I was hooked.” Johnny teases, “I caught a 35 lb. catfish on a line on the same date, “but he also admits he caught the love of his life, too. From the beginning of their relationship, Ginger was honest. During her junior year in high school, she began to gain weight and have period problems. Three doctors diagnosed her problem as Polycystic ovary syndrome (PCOS), a hereditary disease. “In PCOS, your body produces too much androgen hormone, which affects ovulation. PCOS is also associated with insulin resistance and obesity.” Surgery of a blocked fallopian tube was eventually required, but Ginger knew the PCOS also significantly reduced the possibility of her getting pregnant naturally. Currently, Dr. Goldstein, her Dallas fertility doctor says, “The question is not IF [you will get pregnant] but WHEN.” The Mitchells know the I 30 Texarkana to Dallas corridor as their own roller coaster

track, but like all the others are doing whatever it takes to make their dreams of a family their reality.

After a diagnosis of infertility, hormones, eggs, and timing become a couple’s major issues along with needles, an extensive pharmacopeia, sonograms, bed rest, blood work and highways. If the decision has not already been made, the time is now for the couple to decide on the desirable procedures for getting pregnant. The loss of any of the basic equipment requires



Katrina and Tim Thrash, with twins, Abigail Marianne and Jared Deene

that alternative measures be taken to assist Mother Nature. Those measures fall into two basic categories: The first is Intrauterine Insemination (IUI). “This is an infertility treatment that is often called artificial insemination. In this procedure, the woman is injected with specially prepared sperm.

The second category is assisted reproductive technology (ART). “ART works by removing eggs from a woman’s body. The eggs are then mixed with sperm to make embryos. The embryos are then put back in the woman’s body.” Several methods of ART exist, but the most common and effective is IVF (In vitro fertilization). IVF involves fertilizing the eggs outside the woman’s body, then implanting the embryos into the uterus 3 to 5 days after fertilization. Chances of more than one baby are increased with IVF because multiple fertilized eggs are often implanted to increase the chances one of them will develop into a baby.

Katrina and Tim Thrash decided early on that IVF was not an option for them. If IUI did not work, they would consider adoption—which they did. With emotions soaring one moment and plummeting the next, the thought of “throwing in the towel” occurred to them more than once.”

Once the decision is made, the hormones begin. The woman’s body must produce eggs which are healthy and harvestable. The eggs are fertilized to produce embryos which become healthy children. Sounds so simple, but it is one of Nature’s most complex procedures. In a natural procedure, the chances of becoming pregnant during one ovulation cycle are only 20%. Those chances are appreciably reduced when medicine is manipulating the procedures, so a stiff regimen is followed. To grow the eggs and produce the hormones that allow the body to accept the eggs requires months of shots to the stomach and hip. Many of



Lisa and Alex Harris

the husbands become experts at giving the shots while some of the women prefer giving them to themselves. These are hormones that the body would naturally produce, but the body does not know it is pregnant. When the eggs are ready, the woman may be injected with sperm in IUI or harvested and fertilized in IVF.

Embryos now exist, and their growth and well being is carefully monitored by regular sonograms and blood work from the day pregnancy is determined . Both Lisa and Shannon and their husbands have known the loss of fertilized embryos while Ginger and Johnny have had their hopes high and been disappointed when bleeding appeared. The entire process is a complex medical procedure, but the outcome is just as miraculous as when Mother Nature is in charge.

Today, Lisa, Alex and Big Sister Jordan Harris are expecting a little girl to arrive on April 20. Katrina and Tim Thrash enjoy the busy life of three year old twins, Abigail Marianne and Jared Deene, and Shannon and Kirk Reardon are learning

from Holden Vincent Reardon. Ginger and Johnny are still making those trips to Dallas “Not IF but WHEN.”

Internet information on Infertility and Treatment is abundant and thorough [NOTE the Sidebars]. What is left out of the internet information, however, are the personal struggles of both these women and men who have shown a kind of courage and commitment—to each other and to their dream—that rarely exists. They are a special group who offer themselves and their experiences to anyone who needs them.

The physical challenges of the infertility procedures are invasive, painful, repetitive and exhausting. From beginning to conclusion the process is time consuming and expensive, but these are people with a dream and a willingness regardless of what it takes-- to have a child. Even though careers are pursued—Lisa is a cosmetologist/owner of Style Studio; husband Alex is a coach and teacher.

Katrina practices occupational therapy while Tim works at Red River; Shannon is a para-legal for David Ruff while husband, Kirk has his own almost 24/7 business. Johnny Mitchell works graveyard at Cooper Tire, and Ginger has decided to devote all her energies to their pursuit of pregnancy. During their infertility procedures, these women and men are always on notice and must be connected to employers who are willing to work with their mood swings on the job as well as their abrupt departures and absences. Therefore, attention must be paid to their coping and support efforts.

Their greatest support comes from each other. Although women tend to be the focal points of the pregnancy experience, regardless of the method

of conception, men inhabit their own strained emotional worlds. For example, Lisa remembers the day she and Alex returned to Shreveport to have their embryos implanted. “It had been such an ordeal getting to this point,” Lisa recalls.

Both Alex and Lisa were clad from head to toe in scrubs then—what else?— put in a room to wait. “Out of nowhere,” Lisa writes, “Alex

today...I wouldn't trade a minute of it. I've loved spending all this time with you. You are my best friend, and I love you so much! I just cried, and I knew no matter what I was already so blessed because I married the most wonderful man I could have ever asked for.”

Laughter and appreciation are important. Shannon laughs at the “Clean freak” her husband, a microbiology major, has become where Holden is concerned. At the same time she enjoys watching how Holden brings out traits in his dad that Shannon has never seen before. “I want this child as much as you do,” Kirk had told her. In spite of a busy schedule, Kirk manages to give Holden his last bottle each day. This new dad also tends to be “obsessive”



Ginger and Johnny Mitchell



Shannon and Kirk Reardon with son, Holden Vincent

looks at me and says ‘This isn't exactly what I pictured when I imagined getting you pregnant, so much for romance!’ We both just died laughing, then Alex added, ‘No matter what happens

according to Shannon about having Holden's ears covered outside, and socks and shoes always on his feet. Shannon admits she and Kirk are even closer now because of the prayers, faith and friendships that provided vital support during their ride. “I'm telling you,” Shannon affirms, “Kirk is my rock. He is the most

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positive person I know. I could not have made it through this without him.”

Katrina acknowledges that Tim was amazingly patient with her during the entire process. “We know we can get through anything together. We made it through this. With support for each other and prayer, we can make it through anything.”

Ginger and Johnny are building their relationship, too, as they endure the same regimen of meds and shots and blood work and sonograms the others know so well. “I’ve had days when I asked Johnny to divorce me because I’m stealing his future,” Ginger explains, “but he just says, ‘If I didn’t want to be with you, I wouldn’t have been with you.’ He keeps me calm.”

These husbands have learned the importance of giving shots, spending time in doctors’ offices, dealing with the emotions of the day, and having an abundance of patience and encouragement.

One of the most difficult components of the entire process are those contacts of everyday encounters. As Katrina observed, “Resorting to invasive and expensive medical procedures is not something you just *talk* about. People don’t know what to say. Infertility is just such a complicated subject. You would be surprised at some of the advice I’ve gotten: ‘Get a 6 pack of beer, just relax. It’ll happen when you least expect it.’ or ‘Stand on your head.’ These are the most frustrating. I just want

to say, ‘Don’t you think I’ve tried? You would turn red at some of the things I’ve tried.’”

At some time during the process, most of the couples have questioned God. “Why are You putting us through this?” The support from their church families and faith has been an invaluable source of strength for them.

Another source of strength has been the discovery of people who have been or are going through the process. Tim discovered a high school friend whose wife was taking the same ride as Katrina. Finally Katrina called her, and “It was the best thing I ever did,” she declares. “Unless you have experienced infertility, you can’t understand. Emotions I didn’t even know I had came to the surface.

COPING AND SUPPORT

The emotional burden on a couple dealing with infertility is considerable, and plans for coping can help.

Planning for emotional turmoil

- **Set limits** – Decide in advance on the emotionally and financially acceptable procedures and attempt to determine a final limit.
- **Consider other options** – Determine options as early as possible in the process.
- **Talk about your feelings** – Locate support groups and/or counseling services before and after treatment.

Managing emotional stress during treatment

- **Acupuncture** – This ancient therapy

has been shown to reduce anxiety and increase optimism during IVF.

- **Practice relaxation** – Cognitive behavioral therapy, which uses methods that include relaxation training and stress management, has been associated with higher pregnancy rates
- **Express yourself** - Reach out to others rather than repressing guilt or anger.
- **Stay in touch with loved ones** – Talking to your partner, family and friends can be very beneficial. The best support often comes from loved ones and those closest to you.

Managing emotional effects of the outcome

- Whatever the result of your fertility treatment, you’ll face the possibility of **psychological challenges**. Seek

professional help if the emotional impact becomes too great.

- **Failure** – The emotional stress of failure can be devastating even on the most loving relationship and people for people who have prepared for the possibility of failure.
- **Success** – Even if fertility treatment is successful, it’s common to experience stress and fear of failure during pregnancy.
- **Multiple births** – Multiple births introduce new medical complexities and the likelihood of significant emotional stress during pregnancy and after delivery.

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Friends are so important.” Because Katrina now understands the importance of being able to talk with someone who understands, she has an e-mail address specifically for people who need an understanding ear: infertilitysupport2010@windstream.net. “I’m here if you want to talk.”

Ginger also invites contact with those who want to talk at ginmitchell313@aol.com.

Two other areas must be addressed in this snapshot of the infertility problem. One is money. The entire process can exceed \$30,000. Because most insurance companies do not cover infertility, and infertility insurance is very expensive, many couples must depend on financial assistance from an outside source—usually family. Drastic measures are often required. Lisa and Alex sold their home to raise the money. Insurance paid for the procedures of only one couple in this piece. As a group they agree: changes need to be made in insurance policies.

A second area is doctors themselves. Mayo Clinic advises that potential candidates should ask their doctors questions like:

- ✓ What are the possible reasons we haven’t conceived?
- ✓ What kinds of tests do we need?
- ✓ What treatment do you recommend trying first?
- ✓ What side effects are associated with the treatment you’re recommending?
- ✓ What is the likelihood of conceiving multiple babies with the treatment you’re recommending?
- ✓ For how many cycles will we try this treatment?
- ✓ If the first treatment doesn’t work, what will you recommend next?
- ✓ Are there any long-term complications associated with this or other infertility treatments?

Likewise, couples should be able to supply answers about their medical history and current practices. They should also ask questions at any time about matters they do not understand.

Katrina who works in the medical/social environment observes, “I appreciate when a doctor tells me ‘I can’t help you, but I know someone who can,’ rather than trying to treat me—unsuccessfully. Doctors should get respect, but it’s no loss of respect to say, ‘I don’t know.’” She also describes the doctor who listened but didn’t understand her, so he just wrote in his report that she did not appear to be depressed, “and I was sobbing all the time. A level of compassion on the doctor’s part would be helpful.”

Dr. Martin Luther King, Jr. advised, “Take the first step in faith. You don’t have to see the whole staircase, just take the first step.” ---One step at a time.

Shannon, Kirk and Holden Vincent Reardon; Lisa and Alex Harris; Ginger and Johnny Mitchell and Katrina, Tim, Abigail and Jared Thrash are living the truth of Dr. King’s wisdom. The subject of infertility is broached, and Shannon probably speaks for the entire group with her enthusiastic “I’m passionate about it, and I want people to get it.”

Editor’s Note: In a visit with the Reardons just prior to publication of this issue, Shannon and Kirk revealed that they were expecting a second bundle of joy in August, 2011. Surprise! No fertility experts needed for this one! God is good!

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