

MARY KAY

Mary Kay was 39 years old when I first encountered her as a patient. I had known her before through the media, as one of the Mayor's senior aids. She was both a lawyer and an accountant by profession and, what one would call, a workaholic. Of course, she was single "because her career never left her enough time for relationships," as she repeatedly lamented. After undergraduate school at Duke she was accepted into a concurrent JD and MBA program at Harvard. It wasn't easy, didn't leave much time for socializing but she graduated in record time and was at the top of her class in both subjects.

A year and a half before graduation, job offers started piling up. Some from academia, many more from private industry. She accepted an offer with one of New York's major brokerages and was well on her way towards a very lucrative Wall Street career, when in short order, first her mother and then her father, were diagnosed with cancer and Mary Kay decided to move back to Chicago to be with her parents during these difficult times.

She had been on Wall Street for five years at that point and her 18-hour days "didn't allow me to spend any of the money I made during that time," she explained. And she made enough money during those few years "to be financially comfortable, though by no means wealthy," as she rather defensively stressed.

It was her 35th birthday, when she arrived back in Chicago, where she had grown up, first in the City, and later in Highland Park," one of the fancy Northshore suburbs," as she described it. "My parents needed me since I was their only living child," she explained. A younger brother had died of leukemia at age 13, "a loss the parents had never overcome," she noted, as yet another reason for their dependency on her as the only child.

Her parents were, however, not the only reason for her return to Chicago. The hidden agenda was, of course, much less visible, though at least equally interesting. At age 35, Mary Kay felt that it was time to have a life.

She had dated a little bit while at Harvard “but my studies never allowed it to go anywhere,” she almost apologetically explained. Then, while on Wall Street “it was no life all over again,” initially, as a junior analyst, but very quickly as a vice president, then senior vice president and, finally, a partner in the investment and banking division. The long hours as a graduate student, at times, appeared like vacation in comparison. Deals had to be made, deadlines met, public offerings made. Five years flew by without her noticing. Suddenly, she was weeks away from her 35th birthday, with nobody in her life. The illness of her parents “almost came god-send,” as she told me, “because it forced me out of my daily routine. It made me re-think my life. It made my decision so much easier.”

The intent was to be close to her parents, take a year or two off from work and, maybe, finally meet a nice guy. “In my spare seconds I had dated a few Wall Street colleagues,” she told me but she felt that “they were just as crazy as I was and, therefore, it couldn’t last.”

Mary Kay was an attractive woman; not beautiful but New York had given her a degree of the classical Madison Avenue chic that characterizes so many professional women in this city and is not only typified by appearance but also by a very New York-ish attitude. Mary Kay clearly had the look and the attitude. At approximately 5’7”, she was not exquisitely tall, but her heels, which were a constant feature of her New York uniform, made her appear taller than she was. Combined with her well-groomed, reddish-brown hair and greenish-brown eyes, there was no question that she attracted attention, wherever she went.

Unfortunately, it wasn’t the attention she wished to attract. Even though word got around Chicago society very quickly and invitations started pouring in, the dream man of

her life did not appear on the scene. “Maybe I was too demanding,” she tried to explain to me on a number of occasions. The truth was, however, that she didn’t give it the time she had intended to, because, approximately three months after her arrival, she was contacted by the mayor’s office and invited to a meeting with the big guy himself. As it turned out, one of the senior partners at Mary Kay’s former Wall Street firms was friendly with the Mayor and had told him about Mary’s arrival in town. The Mayor, “always on the lookout for talent that didn’t need to be paid well,” saw an opportunity. Barely four months after her arrival in Chicago, Mary Kay started a job as a \$1.00 part-time advisor to the Mayor. Six months later, the Mayor’s Chief of Staff resigned and, while Mary Kay did not officially assume the title, she, for all practical purposes, filled the position.

Yet another three and a half years later, Mary Kay sat in my office and the topic was, what to do if she wanted to be a mother.

There was still no man in her life. She was now 39 years old and the biological clock was ticking. As a public figure, Mary Kay was very concerned about confidentiality. Not only was she worried about the traditional issues of personal confidentiality, but she was concerned about the potential political repercussions to the mayor’s administration if she, as a single woman, would suddenly show up pregnant.

“Why not resign your position?” I asked her. “You don’t need the job and you can have any other job at any other time.” “I can’t do it right now, with the election 18 months away. It wouldn’t be right,” she answered.

And so we discussed alternatives. Waiting through the election would mean that she would be 40 by the time we started any fertility treatment. Quite a risky strategy to pursue because fertility after age 40 declines quickly and dramatically, almost on a month by month basis. In fact, approximately 10 to 15 percent of women, after age 40, can no longer conceive with their own eggs.

On the other hand, was Mary Kay really ready to go into fertility treatment right away? She was for political reasons hesitant to be a single mom. But was she really, herself, ready to be a single mother?

Over the ensuing three-week period, Mary Kay came to see me four or five times. In addition, she called me almost daily with more and more questions. “Why can’t we freeze my eggs,” was a repetitive one, even though I had explained to her on more than one occasion that we still could not reliably freeze eggs. “But I read on the internet that some people in Atlanta had a pregnancy following egg freezing.”

“Yes, one out of how many,” I responded. The next day she found out that some physicians at the University of Milan, in Italy, had reported pregnancies after egg freezing. Then it was Seoul, Korea.

Mary Kay was clearly a researcher. From her days as a Wall Street analyst she had learned not to believe anybody. She trusted only her own research. I was being tested on every piece of information I gave her, and I better be right!

After a three- week research process which, I believe, also allowed her to clear her mind, she came yet for another consultation to my office, but this time it was not to ask more questions.

Her determined look said it all when she came through the door: “I have made up my mind,” she said. And then she continued: “I can’t be pregnant right now; I’m not ready for it, - I’m not ready to make such a decision. And who knows, maybe I’ll meet the right guy next week. Also, I couldn’t do this to the Mayor,” she explained, defensively extending her arm towards me, as if I was trying to convince her otherwise.

“However, at the same time, I don’t want to take the chance that my egg factory shuts down,” she continued. “Therefore, I want to start freezing as many embryos as I can, as quickly as possible.”

Seeing my somewhat surprised facial expressions, she expanded on her explanation: “I now believe you, that freezing my eggs would be too high a risk. But freezing embryos is well established with an average of sixty percent surviving thawing. And, as you explained to me, if you freeze good quality embryos, they usually survive well and lead to similar pregnancy rates as fresh embryos, when transferred into the uterus.”

“But where are we going to get the semen from,” I asked. “A donor bank,” she responded with absolute confidence, as if I had asked her where she would buy her next pair of shoes.

“And what if you meet the guy of your dreams next week, finally,” I shot back.

“Then we’ll have to make a decision, and I prefer to have options rather than have circumstances dictate them to me.”

What she meant by options seemed very obvious. First, it didn’t seem very likely that she would suddenly meet the dream man of her life and, therefore, she had to get ready to be a single mom. If she wanted a child through the use of her own eggs, she had to move now. In a few months, or years, it could be too late.

If, on the other hand, a miracle happened and she, in fact, entered a significant relationship, she might still be able to use the embryos or, if she were lucky enough to conceive with her partner, she could donate the embryos to another infertile couple.

Mary Kay had analyzed the situation well, after researching her options, and had reached the only absolutely logical conclusion. No wonder she had been so successful on Wall Street and the Mayor couldn’t do without her.

Approximately two months following our conversation, we retrieved a first cohort of oocytes. Unfortunately, despite maximal ovarian stimulation, we got only five eggs and ended up with only three embryos that could be cryopreserved. Two months later, Mary Kay had a second retrieval. This time, we were able to freeze five embryos.

Because of her age, the pregnancy chance per embryo, I thought, was not very high. I, therefore, had recommended that she freeze at least fifteen, but preferably twenty, or more, embryos, which meant that she would need at least four or five retrievals. We had, therefore, scheduled a third retrieval for two menstrual cycles following the second retrieval. Two circumstances delayed the third retrieval. The first was insurance-related. Mary Kay's insurance suddenly discovered that she was single and used donor semen. She, therefore, in their opinion, did not qualify for the diagnosis of infertility and was not covered for infertility treatment. The insurance company was very adamant about the rejection of her claims and, in fact, asked us for a refund of the payments they had made to our practice for her first retrieval. Mary Kay tried to handle the issue, discreetly at first, by calling various patient representatives at the insurance carrier and filing an official appeal. When her appeal was rejected, she decided to change tactics and sent a complaint letter on official-city stationary, indicating her title in the administration. Interestingly, once that letter was received, it took only days before the insurance company reconsidered.

A more important point in delaying a third retrieval was, however, the fact that Mary Kay had met a "nice guy." She didn't want "to get into any details on who he was," when we met, but she felt that this relationship might develop "into something serious." She, however, also felt quite uncomfortable about the whole situation and explained it in the following way: "I don't know whether to tell him about what I'm doing or not. I don't feel right, not telling him. On the other hand, if I tell him, he may think that I'm with him for all the wrong reasons. He may think that all I want is to have a child and, while that is of course not the case, I couldn't blame him for thinking this way." And she continued, "moreover, I don't even know whether he would like to have

more children. He already has three almost grown up kids from his first marriage. Our relationship is not yet at a point where I can raise the issue.”

I, of course, couldn't help Mary Kay in this matter. She, however, felt uncomfortable enough about the situation to reach the decision to take a break in her treatment.

Four months later Mary Kay was back. The relationship was over. “I'm not even disappointed,” she told me. “In a way, it makes my life less complicated. I now know for certain that I have to plan for my child on my own, by myself - with the help of nobody - except for yours, of course,” she added, smiling.

While all of this was going on, Mary Kay also had to deal with the deteriorating health of both of her parents. Both were receiving chemotherapy and both did not respond very well in either tolerance of treatment or tumor response. It slowly became apparent to Mary Kay that she may lose them both.

As she spent more time with them, she was surprised to see how much closer she, once again had grown to them. Geographic distance unpreventably creates emotional distance. Living away from them for so long, even though they visited each other frequently and talked all the time on the phone, had changed their relationship. Mary Kay felt less able to communicate her problems to them, as she felt that this would impose on them. “I was an adult now,” she explained to me, “and it was simply not right for me to bother them with my problems,” she continued. “They had their own in their own little world, and I didn't want to impose on them.”

However, now, that her parents became increasingly dependent on her, Mary Kay, paradoxically, became less hesitant to make them, once again, also a part of her world. Her parents had, a long time ago, stopped asking when she would get married. Mary Kay knew that this question was only a camouflage for the real question they wanted to ask: when are you going to give us a grandchild?

Being her parents' only surviving child, Mary Kay, in fact, was quite uncomfortable knowing about this, her parents' so obvious desire. Initially, she reacted angrily to their inquiries and basically told them that this was none of their business. However, over the years, her attitude changed and, at some point, she actually started feeling guilty for not being able to give her parents their beloved grandchild.

“Sometimes I wondered whether I wanted a child for them or for myself,” she questioned her own motivations. “I started to understand the importance of continuity for the family,” she explained to me. “This was a totally bizarre concept for me when I was younger. However, as I got older, it seemed more and more real. It was almost a discovery, like finding religion,” she went on to explain.

It was, therefore, not surprising that, one day, Mary Kay did tell her mother that she was thinking about having a child on her own. She would have never raised the issue, while still living in New York. But, now, she was back home in Chicago and “they were a family again.”

Mary Kay was astonished about the enthusiastic response to her idea. She had feared negativity from her mother and, possibly, outright rejection from her conservative father. Her mother almost jubilantly embraced the concept of single motherhood and her father apparently just nodded and smiled in silent approval, when first told.

As independent an individual as Mary Kay had perceived herself to be, her parents' response was a huge relief. “I would have done all of this with or without their approval,” she told me; “however, it is so much better knowing they stand behind me.”

Over the ensuing eight months, we completed three additional egg retrievals. After her fifth cycle, Mary Kay had a total of 21 embryos of good to excellent quality cryopreserved at our center. She went through these cycles with the same absolute determination that had driven her towards success in her professional life. This had

become her priority in life and the rest of her existence simply had to be adjusted to this one goal. Based on the quality of her embryos, I had told Mary Kay that these embryos would give her approximately a 90 percent chance of pregnancy.

In fact, if she was lucky, she might get more than one pregnancy established.

“I could use a little bit of luck,” she responded. “In fact, I deserve a lot of luck, after all I have been going through lately,” she continued.

Luck was, however, clearly not with her. Within three months from her last egg retrieval, and within one month of each other, both of Mary Kay’s parents died. They never came to see or to hold their grandchild. “We talked a lot about my future children in those last days,” Mary Kay told me a few days after she buried her mother. “She insisted that I name my first child after dad, whether it’s a boy or girl. I told her that I would do so. However, my second child would be named after her. And now, Dr. Gleicher, you have to help me keep my promise.”

It took 14 embryos, and three embryo transfers, to establish Mary Kay’s first pregnancy. Nine months later, she delivered a healthy boy. She named him Shane, after her father. However, “just to be on the safe side, in case we cannot repeat the miracle,” she told me, she gave her son the middle name Alexander, after her mother Alexandra.

Two years later, Mary Kay gave birth to Alexia Shannon, a healthy seven pounds, eight ounces sister to Shane.

There were no more embryos left in our freezer but, as Mary Kay so well stated: “I don’t need any more. I have my family.”

And that she did!