

BY BETH HOWARD

wo YEARS AFTER LAURA MANCINI,**
now 38, gave birth to her
daughter in 1996, the Easton,
Connecticut, counselor and
her husband decided it was
time for baby number two.
She was elated when she conceived, but 13½ weeks later, she suffered
a miscarriage. Mancini and her husband
tried for another child again and again
over the next three years, only to get pregnant and miscarry three more times. Even
after her third miscarriage and an infertility
workup, which came back normal, doctors told her to just keep trying.

Six years—and thousands of dollars in tests and procedures—later, the Mancinis are still waiting to complete the family they envisioned. "When you've already had one child, as much as we love her, it's hard to accept that you can't have another," she says. "You keep pushing it another week, another month, another year. It's hard to rewrite the script you had for yourself."

More than 3 million couples are currently experiencing



Infertility after a baby? SELF explores the challenges faced by the millions of women who are struggling to have a second child.

secondary infertility, the inability either to conceive or bear a subsequent child, according to Resolve, a national infertility education organization in Somerville, Massachusetts. Secondary problems are significantly more common now than they were in the mid-1990s, in part because couples are delaying first pregnancies. And while the condition evokes all the trauma

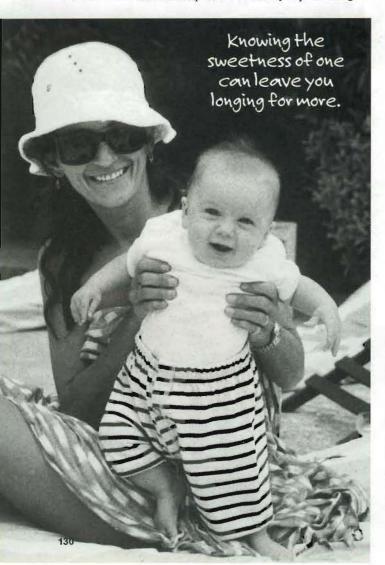
and grief of primary infertility (the inability to have a first child), women facing secondary issues often don't get the same compassion and sympathy afforded those who've never given birth. Yet, as Mancini puts it, "just because you have one child doesn't mean that's enough."

Economist Sylvia Ann Hewlett's landmark study chronicling the childbearing patterns of professional women confirms the growing phenomenon of infertility after having one baby. Although 30 percent of her high-powered subjects had only one child, just 8 percent had intended to, says Hewlett, author of Creating a Life: Professional Women and the Quest for Children (Hyperion). "In most cases, the women had the child pretty late, then tangled with the infertility challenge the second time around and failed," she says.

Whatever the reason, one thing is certain: "Secondary infertility is a complicated dynamic," says Linda Applegarth, Ph.D., who counsels infertile couples as the director of psychological services at the Center for Reproductive Medicine and Infertility at Weill Medical College of Cornell University in New York City. "Couples feel embarrassment and shame for wanting another child so desperately because they've been blessed with one. And because they have a child, they really have a good understanding of how wonderful that is."

Only can be lonely

As with primary infertility, women who deal with the problem after a first child experience every permutation of pain. The reasons, however, often differ. Many feel guilty for not producing a sibling for their son or daughter—and then worry they're neglecting their child when they become so focused on having another. "It was a constant struggle," says Melanie Brooks,* 35, a health-care consultant in Atlanta who grappled with unexplained secondary infertility for four years. Her son, who is now 6, began asking for a sibling at age 3. "It hit home over a year ago when Jason's preschool class drew pictures of their families," says Brooks. "He said, 'Mommy, I'm the only one who doesn't have a brother or sister.' That broke my heart." But that was hardly the worst of it: "Sometimes I felt so depressed, I couldn't play with him," says Brooks. To ensure that her son felt cared for, Brooks quit her job three years



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ago and began working from home. "I wanted to enjoy the child I had," she says.

Compounding women's emotional pain is the indifference they feel from friends and family. "Well-meaning friends have made insensitive comments like 'You have your one daughter-be thankful," says Mancini. "Or if you have one child, people assume you can auto-

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matically have another. People have even said to me, 'Why are you be- couldn't have ing so selfish, not having a sibling for your daughter?' After a while, you start avoiding people." Adds Brooks, "My friends have said, 'You have a child and he's healthy. What more could you want?"" Brooks's story has a happy ending.

After two in vitro fertilization (IVF) attempts, she had her second child, a daughter, in November.

> The causes and the cures

The culprits behind secondary infertility are almost always the same ones that lead to primary infertility: irregular ovulation, endometriosis (which can block the fallopian tubes or ovaries) and fibroids, says David Adamson, M.D., a fertility expert and clinical professor at Stanford University in California. "Unfortunately, a lot of physicians say, 'You got pregnant. Don't worry," he says. "They're slow to refer patients to specialists." And that lack of urgency from doctors may be the most vexing simply because many causes of infertility can be treated fairly easily if discovered early. But the longer women have to wait, the less likely they are to become pregnant, naturally or otherwise.

In about one in 10 cases of secondary infertility, however, the problem is a consequence of prior pregnancy. Postpartum infections, even those that are treated, can block tubes or cause scar tissue, which may foil conception, says Dr. Adamson. Similarly, levels of the hormone prolactin may not normalize after birth, which can interfere with ovulation. "These problems are rare but real," Dr. Adamson says.

Mancini learned the probable culprit behind her miscarriages a year ago: a rare blood-clotting disorder, likely triggered by childbirth, that can hinder blood flow to the placenta. Though that condition could be treated, Mancini has also been diagnosed with premature ovarian failure, which makes another pregnancy nearly impossible. She and

> her husband are now considering adoption.

More typical of secondary problems is the threeyear infertility odyssey of Jinah Tak-Lau, 37, a preschool teacher in Glenview, Illinois. She had been diagnosed with endometriosis in 1994. With her condition, she expected trouble conceiving the first time and was thrilled when she got pregnant

at age 29 with her son, Kendrick, within three months of trying. But when she and her husband tried again a year and a half after her first child was born, their good fortune ran out. She spent the next 18 months undergoing treatment, including surgery to remove scar tissue and a failed IVF cycle.

Devastated, Tak-Lau quit her job to reduce stress, spend more time with her son and get her body in better shape to bear another baby. She started exercising, dropped 20 pounds and even consulted an herbalist before reentering the high-tech infertility world a year and a half later. After a second cycle of IVF, the couple conceived a daughter, Sophia, now 2 years old. "Finally," she says, "we feel complete as a family."

Still, other families learn to feel complete as three instead of four. That was the case for Margie Klayman, 41, a teacher supervisor in Mansfield, Massachusetts. "When I couldn't get pregnant a second time, my husband said, 'Let's love what we have and have a life." With time, Klayman also focused on the benefits of one: "We enjoy doing things on our own, and when Lili goes to bed at night, we can still do that," she says. "Plus, we're in our 40s, and our daughter can be exhausting!"

Beth Howard is the author of Mind Your Body: A Sexual Health and Wellness Guide for Women (St. Martin's Griffin).

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