

EMBRYO ADOPTION ALLOWED A 50-YEAR-OLD L.A. WOMAN TO GIVE BIRTH TO TWINS

BY **STEPHANIE HANEY**

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After three miscarriages, Ariane Fleiderman adopted another couple's frozen embryos.

Photo by Danny Liao

Ariane Fleiderman-Borges and Mauricio Borges tried for six years, almost from the time they met to become parents. One of the reasons Fleiderman was so intent on becoming a parent

met, to become parents. One of the reasons Fleiderman, an accountant, and Borges, an auto mechanic, were drawn to each other was their willingness to have children together. "I wanted her to be able to experience being a mother," Borges says, "because I already had children of my own and I wanted her to have that same feeling."

The couple conceived naturally a few months after they met – just before Fleiderman turned 44 – and miscarried weeks later.

"I made it less than a month," Fleiderman says. Her doctor at the time had predicted that might happen.

"He said right then and there, 'Your pregnancy's not going to last,' because of my age," Fleiderman recalls.

The following year, in 2008, Fleiderman and Borges turned to artificial insemination. Again Fleiderman got pregnant, but at around week five her OB-GYN told her she feared Fleiderman had an ectopic pregnancy. A few days later, Fleiderman was given medication to stop the growth of the abnormally progressing pregnancy, and she miscarried again.

"The emotional and financial strain of trying to get pregnant and having failed pregnancies, one after another, it's horrible," Fleiderman says.

But she and Borges kept trying.

Fleiderman's OB-GYN referred the couple to Dr. Sam Najmabadi, a reproductive endocrinology infertility specialist at the Center for Reproductive Health & Gynecology in Beverly Hills. Dr. Najmabadi oversaw two more rounds of artificial insemination, in November and December 2010, neither of which resulted in pregnancy.

Fleiderman attempted one more round of artificial insemination with Dr. Najmabadi in March 2011. That didn't work, either.

"He told me that was an indication that even if I went for full-on in-vitro [fertilization], my eggs were just not responding that well," she says.

Then, in late spring of 2011, Dr. Najmabadi brought up another way Fleiderman and Borges might conceive – with the help of an Arizona couple they'd never met.

"I already had experience loving a child that wasn't genetically related to me."

-Ariane Fleiderman

Fleiderman wasn't always sure she wanted to have a child, but she did have some parenting experience. From the time she was 36, she played second-in-command to the parents of her godson, Benjamin, who is now 16.

Benjamin's father has been a close friend of Fleiderman's since her late 20s. She helped raise Benjamin since birth.

"He's an only child and I was one of the first to hold him

when he was born, and I just fell in love with him," Fleiderman says. "I promised him I would stay by his side."

Fleiderman moved back to Los Angeles eight years ago from San Jose so she could keep that promise. She rented a room from Benjamin's father so she could live with her godson.

"I was the one who taught him how to swim," Fleiderman says. "I cared for him all the time when I lived with him, and after that he stayed with me on weekends. I was his third parent."

Sitting in Dr. Naimabadi's office that day in spring 2011. Fleiderman's complicated journey to

motherhood finally came into focus. She recalls thinking: "I already had experience loving a child that wasn't genetically related to me."

She says that as she sat there crying, "I felt a divine assistance of some sort. I'm not a heavily religious person, but all of a sudden I felt compelled to ask, 'Is there anything else? Like embryo ... or something?'" Fleiderman recalls saying to Dr. Najmabadi, not really sure how to finish her own sentence.

"And then he looked up at me, and he said, 'You know, as a matter of fact there is. Every now and again people leave embryos behind with me.'"

In July 1978, the very first "test-tube baby," Louise Joy Brown, was born in England. She arrived 34 years after the first human embryo was created in vitro – and after hundreds of failed attempts to birth an IVF baby.

Infertility treatment and options would rapidly expand in the four decades following Brown's landmark birth. More than 5 million babies have now entered the world as a result of IVF.

Embryo adoption is sort of a by-product of IVF. In IVF, eggs and sperm are collected (either the couple's own, or eggs and/or sperm provided by donors), and the healthiest eggs are fertilized by the sperm outside of the body, with the hope of creating multiple embryos. One round of IVF can cost up to \$15,000 without egg or sperm donors – and up to \$30,000 if an egg donor is needed.

The embryos are given three to five days to mature, then one or more are transferred into a woman's uterus, hopefully to implant and grow into a pregnancy. Others are frozen for later use.

A 2011 summary of 295 assisted reproductive technology clinics and four cryostorage facilities found that they were holding more than 387,000 frozen embryos – and estimated that another 225,000 frozen embryos were stored elsewhere in the United States.

Along the way, a woman occasionally will end up with extra frozen embryos that she and her partner don't intend to use, for whatever reason. Often they don't know what to do with these extra embryos. Sometimes they store them, sometimes they unfreeze them and let nature take its course, and sometimes they give them to a doctor or a facility or a specific parent-to-be.

"I almost never saw anybody donating embryos for adoption 20 years ago," Dr. Najmabadi says. "I don't know if it's the times or our education of the patient, but now more and more of that is happening."

In 1997, Nightlight Christian Adoptions created the first embryo adoption agency, the Snowflakes Embryo Adoption and Donation program, in response to the growing number of unused IVF embryos in frozen storage facilities. Children born from the embryos donated through the agency are often called "snowflake babies." Kimberly Tyson, Snowflakes' marketing and program director, says the name of the program was intentional – that "like natural snowflakes, human embryos are frozen, unique and a gift from heaven."

The term "snowflake babies" caught on, and many families now use the term for any baby born as a result of an embryo donation.

Tyson says that well over 1,000 babies have been born into families through embryo adoption agencies, which operate similarly to some traditional adoption agencies in that the

donating family chooses recipients from prospective parent profiles.

"The essence of our embryo adoption model is to encourage open relationships between the donor and the adopter," Tyson says. At Snowflakes, she adds, finding a donating family that's willing to adopt to a woman older than 45 is rare. She says donors "are trying to select the family that they believe will provide any resulting children with a safe and loving home environment, with parents who are healthy and able to care for them."

"There really isn't a difference in a woman's ability to actually carry a pregnancy with an adopted embryo, whether she's 48 or 46 or 45."

-Dr. Kristin A. Bendikson, with the USC Keck School of Medicine

Embryo donation also occurs at the fertility clinics where the embryos were created. At the clinics, the biological parents generally don't participate in selecting prospective parents for their donated embryos and are more likely to remain anonymous. Dr. Najmabadi says that at his clinic, some donors do place restrictions on potential recipients but for the most part don't remain involved after they choose to donate their embryos.

Dr. Kristin A. Bendikson, with the division of reproductive endocrinology and infertility at the USC Keck School of Medicine, says her clinic transfers adopted embryos into women up to the age of 53. "There really isn't a difference in a woman's ability to actually carry a pregnancy with an

adopted embryo, whether she's 48 or 46 or 45."

According to the American Society for Reproductive Medicine, women should not undergo embryo transfers after the age of 55.

Dr. Bendikson acknowledges that an older couple considering embryo adoption should take into account the potential drawbacks of having children at an advanced age.

"I think that it's important to consider the long-term ability to fulfill the emotional, psychological and physical needs of the child, and also consider what the chances of long-term parental relationships are going to be," she says. "I also think that it is helpful for anyone undergoing embryo adoption to undergo psychological counseling. That is beneficial not only because of the age of the patient but also because of the adoption process in general and having a child that is not genetically yours."

Couples who donate embryos also have pros and cons to take into account.

Kimmi Carlos, a middle-school language arts teacher, and her husband, Ryan, a Los Angeles firefighter, had to weigh the emotional impact of donating embryos to a woman who would give birth to and raise a child that is genetically theirs.

"When you're going through IVF, one thing that you're not really prepared for is the amount of extra embryos that you might have," says Kimmi Carlos, who, like her husband, is 34. "The majority of people don't have a ton. They have what they need. It's more common to have too few than it is to have an abundance. "

But Kimmi and Ryan Carlos did have an abundance of embryos. They were left with 12 strong embryos after successfully getting pregnant with their now 5-year-old twins, a boy and a girl.

Kimmi Carlos had a tough time with her initial pregnancy with the twins. She spent nearly 12 weeks on bed rest, and she knew she didn't want go through that again.

Then, 14 months after the twins were born, Kimmi Carlos got pregnant naturally with their third child, a son who's now 3.

The Carlos family eventually decided to donate their remaining 12 embryos.

"I personally struggled, as I'd be pushing my twins on swings at the park, with why they got to be the lucky two, as much as I love them," Kimmi Carlos says. "I felt in my heart the rest of them deserved the same chance at life."

The matured embryos that would become the Fleiderman-Borges twins came from a group of six that were created and frozen seven years before Fleiderman asked the right question at the right time in Dr. Najmabadi's office.

Back in 2007, an Arizona couple had been having trouble getting pregnant, so they paid a donor to provide them with an egg to be fertilized by the husband's sperm. The couple traveled to L.A. and went through the IVF process with Dr. Najmabadi, and they successfully had a baby.

Five years later, the couple decided that their family was complete and gave Dr. Najmabadi their blessing to donate their remaining half-dozen embryos to other hopeful parents-to-be.

Fleiderman remembers Dr. Najmabadi pulling a sheet of paper out from under his desk calendar. The list contained the names of previous patients who had donated their extra frozen embryos.

**"The doctor told us it was impossible for us to have kids with her eggs, even though she was very healthy and could carry the pregnancy, so there wasn't much else we could do."
-Mauricio Borges**

And it was a short list. Of the roughly 40 percent of Dr. Najmabadi's patients who end up with extra embryos, he estimates that only 5 percent choose to donate their embryos to others.

Dr. Najmabadi told Fleiderman that he could give her some embryos; she would have to pay only for the implantation. The cost would come to about \$3,000. Fleiderman says that once she took her ego out of it, she loved the idea.

"I thought, 'If I'm a true mother, I want [my] children to have the strongest bodies possible,'" Fleiderman says. "So I should not try and insist they be from my eggs." The egg donor the Arizona couple used was 22 years old at the time the embryos were created.

Borges says he was willing to try everything to have children together, no matter what. "The doctor told us it was impossible for us to have kids with her eggs, even though she was very healthy and could carry the pregnancy, so there wasn't much else we could do," Borges says. "She asked me what I thought, and I said, 'If it's good for you, it's good for me.'"

There also was the cost factor. Securing an egg donor and going through the IVF process would come to about \$30,000 – 10 times as much as embryo adoption. "It was beyond a generous offer," Fleiderman says.

Once Fleiderman decided to go forward with the gift, she let Dr. Najmabadi choose the donor from the list. "I didn't want to pick, because it didn't sit right," she says. "It felt like shopping. Letting the doctor choose made it feel more natural."

Dr. Najmabadi says that when it's left up to him, he tries to select embryos that come from biological parents who have similar physical characteristics to those of the parents-to-be.

"We try to match the prospective parent with a close match in race, eye color and hair color of the donor," Najmabadi says. "For example, if someone comes in with blond hair and green eyes, we would go through our data bank and say, OK, we have maybe one donor that matches them or three donors that match them, and then we present those options to the patient."

He says he can describe the donors' characteristics to the would-be parents but can't show any pictures due to doctor-patient confidentiality.

Kai and Audrey's genetic parents were the closest physical match to Fleiderman and her husband, and made the most sense to Dr. Najmabadi in terms of the other factors, so their embryos were the ones chosen to come to life.

The embryo transplant wasn't an immediate success. In June 2011, Dr. Najmabadi initially tried to transfer only one embryo, because Fleiderman didn't want to chance a multiple birth.

The process itself takes less than 10 minutes. To prepare, the patient goes through a series of estrogen and progesterone supplements, to mimic what would be happening to the body if it were experiencing a natural pregnancy. The embryos are thawed on either day three or day five of the progesterone supplement, corresponding to whether the embryos were frozen on day three or day five after fertilization.

On the day of transfer, the patient takes a Valium and goes into a dark room near the back of the clinic to relax. Some patients opt to receive acupuncture. Then Dr. Najmabadi goes to work.

"I go in under ultrasound guidance, put a catheter into the uterus and release the embryos into the uterus," Dr. Najmabadi says. "That's it. That's the embryo transfer process."

The next step is implantation, in which the embryo basically digs itself into the uterine lining. It doesn't always work.

"Once it's figured out, someone will win the Nobel Prize, because there's a lot that we don't know about it," Dr. Najmabadi says of the factors that guide implantation.

The embryo successfully implanted into Fleiderman's uterine lining – but the pregnancy resulted in another miscarriage, on Fleiderman's 48th birthday. "That one was probably the hardest," she says.

Dr. Najmabadi says he suspected the problem might have been with the embryo itself. "Many times abnormal embryos do not continue past a certain stage of pregnancy after they have implanted," he says. "It is sometimes possible to get pregnant with an abnormal embryo that then results in a miscarriage."

Genetic screening and diagnosis of the embryo can be done, reducing the odds of an abnormal embryo being transferred. However, Dr. Najmabadi says this kind of testing is invasive and expensive, so most embryo transfers are done without it.

Fleiderman tried again four months later, this time with two embryos. But neither would implant into her uterine wall. Fleiderman feared the stress of the loss of her mother, who had died from lymphoma, was not helping the situation. So she decided to take a break.

"Then my husband got himself detained," Fleiderman says.

"I made the mistake of getting arrested while driving without a license, and that put me in a very bad situation," Borges says. "They were going to deport me back to Brazil."

Borges was first sent to U.S. Immigration and Customs Enforcement's Contra Costa West County Detention Facility in Richmond before being relocated to the Adelanto Detention Facility in Adelanto.

Merely being married to a U.S. citizen is no longer a path to getting a green card if a person didn't enter the country legally in the first place. Because Borges entered the United States illegally in 2002, his marriage to Fleiderman, a U.S. citizen, is irrelevant to his immigration status.

With her husband stuck in Adelanto, Fleiderman decided to push ahead and try to get pregnant again.

This time, Dr. Najmabadi suggested trying to implant all three of the remaining embryos. But Fleiderman told him she wasn't sure she could handle it if all three happened to take, so she wanted to try with two instead.

Fleiderman says that on that day in February 2013, she showed up for the procedure at her most relaxed yet. "I went in by myself, popped the Valium and fell asleep after the transfer," she says. "It felt a lot like a Pap smear and only took about an eighth of a second. And bam! I was pregnant."

It took weeks before Fleiderman's blood test showed that both embryos had successfully implanted. Fleiderman admits that when Dr. Najmabadi confirmed she was pregnant with twins, she was torn.

"At that point I was so tired they could have told me I was going to give birth to Martians and I would have been like, 'OK, that's fine. What time do I need to report for the birth?'"

But at other times, she says, "I definitely freaked out that there were two."

She was still unsure of her husband's residency status. Borges' immigration lawyers were telling Fleiderman there was a 50-50 chance that he'd be deported to Brazil. "I was anticipating that I would basically be a single mother," she says. "A single mother of one was daunting enough."

Fleiderman says she started thinking about articles she'd read that described complications with multiple births, as well as situations when embryos were removed to save other embryos, or because the number of births posed a risk to the mother's health, or even because the parent wasn't able to properly care for more than one infant.

So she asked about embryo reduction.

Embryo reduction is performed by only a few doctors in the Los Angeles area, and Dr. Najmabadi isn't one of them. It's a process where the doctor removes one or more embryos after an IVF cycle to give the other embryos a better chance of survival.

Then Fleiderman's doctor showed her an ultrasound image of the two embryos and let her listen to their heartbeats. Fleiderman says she thought to herself, "Well, I'm kind of old to be having these babies, so I'll keep them both – so when I'm senile, they'll have each other."

But she still wasn't sure she could handle raising the two of them if her husband were to fail to get U.S. citizenship. She asked her cousin if he would be willing to raise one of them as a co-parent. She also scheduled an appointment to meet with an adoption counselor.

After missing her appointment three times, Fleiderman says she was hit with another realization. "One day I just looked down at my belly and I said, 'OK, I get the message. You guys don't want to be separated.'"

About halfway through Fleiderman's pregnancy, Borges was released from detention pending a deportation hearing. His immigration lawyers seemed to think the result would be one of two extremes: He would be granted a green card or sent back to Brazil.

"I really worried about her, because she was so big and pregnant," Borges says. "It wasn't easy for her, being 50 and pregnant with twins. And she helped me with lawyers, all the papers, everything to get me out of there."

Borges says when they let him leave Adelanto in May 2013, pending his hearing, that it was like "a gift from God."

And it left Fleiderman free to focus on enjoying her pregnancy as much as possible.

"Pregnancy was not comfortable with twins, at 50, at all," Fleiderman says. "My feet expanded a size and a half!"

When the day finally came for the twins to be born – Sept. 24, 2013 – she was ready. "I actually drove myself to the maternity ward."

The twins were delivered via Cesarean section. Fleiderman made it through the delivery fine, but she lost a lot of blood due to a blood-clotting condition.

"I remember hearing Kai. I heard him cry, and then I kind of deliriously remember Audrey," she says. "And then I passed out."

"I saw my boy first, and after that Audrey," Borges recalls. "Audrey was more skinny, smaller; Kai was bigger, more fat."

Audrey had to be kept in an incubator for a week because she did not have enough body fat to hold her temperature. "I was a little concerned," Fleiderman says. "But I was happy they made it, that they were safe. It was a healthy pregnancy, by general standards."





Ariane Fleiderman with her son, Kai, and daughter, Audrey

Photo by Danny Liao

On Sept. 22, 2014, two days before the twins' first birthday, Borges had his deportation hearing. He was granted a temporary work visa and was permitted to stay in the United States legally.

"It was my second chance," Borges says.

His second chance has allowed him to see Audrey and Kai start developing their own personalities. "Audrey is so smart, it's scary," Fleiderman says. "She wants to do everything herself. She's my little chili pepper – she's a little spicy.

"Kai is my little piece of chocolate," she says. "He's just sweet."

Fleiderman and Borges say that Audrey looks out for Kai, even though she's younger by one minute.

"They are like a team. Anytime you give anything to Audrey, like a piece of food, the first word out of her mouth is 'Kai,' to make sure you give something to Kai, too," Borges says. "She is very protective of him.

"They've hijacked my life," Fleiderman says. "Which is fine. One nice thing about having them when I was older is that I've been able to travel and work [before I had them], and so I'm at peace with dedicating all my time to raising them."

From the group of embryos created by the Arizona couple, the twins have at least one sibling that Fleiderman knows about. "Kai and Audrey were frozen in time," Fleiderman says. "They were conceived at the same time, but if they were ever to meet their sibling, their sibling would be eight years older."

Fleiderman and Borges say they're open to the twins meeting their biological family someday, if the Arizona couple is amenable. Dr. Najmabadi says he would be willing to discuss the issue with his patients.

Fleiderman says she does not feel threatened by the possibility of bringing biological family members into her family dynamic – and she hopes other women having difficulty conceiving might come to the same realization. "I would tell women not to sweat making it their egg, and men not to sweat making it their sperm," she says.

Fleiderman says that even though it's not her and her husband's DNA they're passing on. they

have been able to connect with their children in a profound way by experiencing pregnancy and childbirth.

"I always tease people and say, 'I beat the fertility clock,'" she says. "How about that?"

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