

# AGENTS OF CHANGE

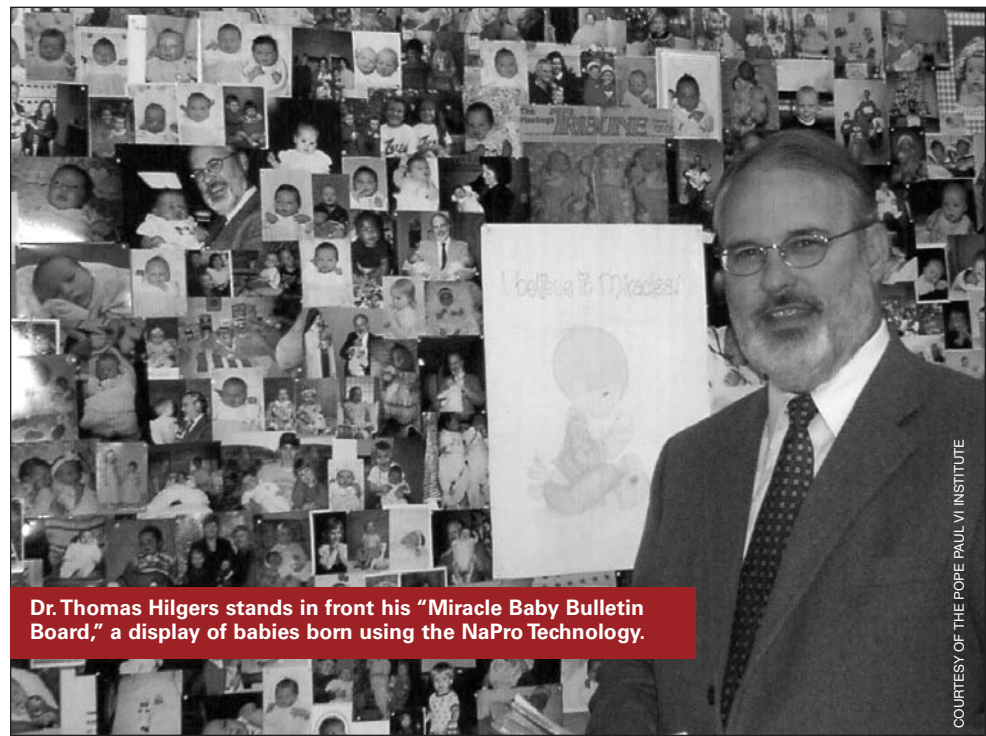
By Chuck Weber

A SMALL BUT DEDICATED AND GROWING CADRE OF CATHOLIC HEALTH-CARE PROFESSIONALS IS INTRODUCING AN EXCITING NEW APPROACH — WHICH IS BOTH MORALLY ACCEPTABLE AND REMARKABLY SUCCESSFUL— TO THE TREATMENT OF FERTILITY PROBLEMS.

The firestorm ignited in 1968 when Pope Paul VI issued the encyclical *Humanae Vitae*, reaffirming the Catholic Church's support of "responsible parenthood" and her condemnation of contraception, still burns brightly today. Now as then the Holy Father's teaching is widely denounced as out of step with modern science and out of touch with Catholics in the pews.

Cultural and political clashes centering on the dignity of human life continue to intensify, as emerging medical technologies bring a dizzying array of new products and services to the marketplace. Frozen storage of human ova, embryonic stem-cell research, surrogate motherhood, and the question of human cloning make up just part of the growing list of medically acceptable but morally objectionable techniques and practices.

In light of recent developments, the words of *Humanae Vitae* are nothing less than visionary—as if Pope Paul VI saw it all coming. He acknowledged the "stupendous progress" of scientific research while issuing a grave warning that their new "domination" of the



Dr. Thomas Hilgers stands in front his "Miracle Baby Bulletin Board," a display of babies born using the NaPro Technology.

"forces of nature" was beginning to degrade the dignity of the very "transmission of life."

Viewed through the lens of secular news coverage, public opinion of *Humanae Vitae* and other Catholic thought on issues related to science, medicine, and morality is overwhelmingly hostile—if, in fact, the Catholic viewpoint is considered at all. Yet largely hidden from the mainstream media there are new signs pointing to a steady growth in the appreciation of Catholic teaching. More importantly, there is a growing record of success in the application of Catholic thinking to real-life problems.

This is precisely what Pope Paul VI

envisioned when, in a little-noticed section of his life-giving encyclical, he urged doctors, researchers, and other medical specialists to "consider as their proper professional duty the task of acquiring all the knowledge needed in this delicate sector, so as to be able to give to those married persons who consult them wise counsel and healthy direction, such as they have a right to expect."

Nearly four decades after his controversial encyclical appeared, the wisdom of Pope Paul's words and the fruits of his legacy are on full display, embodied in a new science of health care for women that is gaining converts in the United States and around

the world. NaPro Technology—Natural Procreative Technology—represents today’s definitive Catholic answer to mainstream human reproductive medical procedures, practices, and paradigms.

### A LIFE’S MISSION

The recently released 1,300-page medical textbook *The Medical & Surgical Practice of NaPro Technology* (Pope Paul VI Press, 2004) culminates more than 30 years of research by Dr. Thomas W. Hilgers, an OB/GYN physician and founder of the Pope Paul VI Institute for the Study of Human Reproduction in Omaha, Nebraska. Dr. Hilgers is also co-creator of the Creighton Model FertilityCare System, a popular method of natural family planning, fully in keeping with the teachings of the Church, which is used by thousands of couples to achieve or avoid pregnancy; this system is closely linked to NaPro Technology.

NaPro Technology applications—already in use today—extend far beyond the effective spacing of children. Medical and surgical practices of NaPro Technology effectively treat a wide range of women’s health issues including, but not limited to, infertility, repetitive miscarriages, pre-menstrual syndrome (PMS), post-partum depression, and more. Not only are NaPro Technology approaches morally acceptable to Catholics, they are at least as effective, *if not more so*, than currently accepted mainstream medical practices.

Inspiration for Hilgers’s groundbreaking work comes from that relatively obscure section of *Humanae Vitae* in which the Pontiff concedes that many Catholics will find it “difficult, if not impossible” to abide by the Church’s teaching regarding artificial birth control and responsible parenthood. His appeal for more scientific study of the woman’s natural cycle of fertility and a search for ways to make Church teaching easier to embrace was assuredly dismissed by many scientists. But to others, it carried both the challenge and the encouragement that suggested divine inspiration.

“From the moment I read the Pope’s words as a 4<sup>th</sup>-year med-school student, I knew he was speaking directly to me,” says Dr. Hilgers. On August 6,

the feast of the Transfiguration, in 1978—the date of the death of Pope Paul VI—he vowed to open the Institute. Drawing on the insights and

approaches to health care that could eventually boil over: a mounting dissatisfaction at the grassroots level with the way doctors do business—particu-



COURTESY OF THE POPE PAUL VI INSTITUTE

Stephanie and Anthony Epolite, with their daughter Claire Marie, speak at a NaPro Technology conference.

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discoveries of human fertility pioneers like Drs. John and Lyn Billings (co-founders of the Billings Ovulation Method), Dr. Hilgers embraced the scientific study of human reproduction as a personal, professional, and spiritual challenge.

During the ensuing years and up to the present day, Hilgers has continued to lead a counter-cultural medical movement, with his work standing in sharp contrast to the widespread acceptance of license, abortion, sterilization, the Pill, test-tube babies, and other trends that the Church can only deplore. These same attitudes and practices, described and condemned by Pope John Paul II as the “culture of death,” fueled the startling rise of a powerful marketplace within the multi-billion dollar pharmaceutical and medical industries. Given the colossal financial stake that powerful players exert in maintaining the status quo, widespread acceptance of alternatives seems unlikely.

Yet at a level just beneath the collective consciousness of consumers, there are signs of a frustration with current

larily in the area of reproduction.

Working alongside a growing number of health-care professionals and some members of the clergy, Hilgers is convinced that NaPro Technology is a new, Catholic-centric health science—fundamentally different from the accepted norms, yet highly effective, and at the same time compassionate in its approach to women. Today the inherent innovations of NaPro Technology may well be sparking a

global revolution in health care. If so, it will be a revolution incited and carried out most notably by the women and married couples whose authentic happiness depends upon it.

couldn't conceive. "He kept bringing up my age (nearly 39 at the time) and said there was really only one option for us," Stephanie recalled of the doctor. "That was basically the consult: no

Their hope rested in a procedure called *IntraCyttoplasmic Sperm Injection* or ICSI-IVF, considered one of the most radical and invasive of all ART practices. A lab technician peering through a microscope injected a single sperm cell taken from a cup of semen produced by Anthony into a number of ova (human eggs) that had been surgically removed from Stephanie.

Now the couple awaited word to see if fertilization in the Petri dish would occur. If signs of life were detected, they would be summoned back to the clinic for the final phase of the process, the transfer of the embryo into Stephanie's womb. A steep price had been paid to get this far—nearly \$25,000 for two cycles of services and drugs.

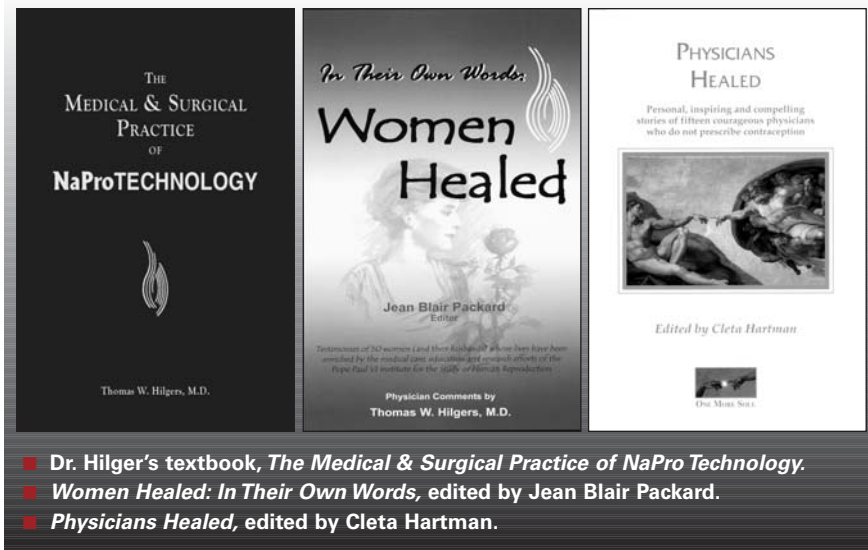
The clinical regimen over the previous two months had been tedious and emotionally draining. Part of the protocol involved Anthony injecting his wife with multiple, daily doses of drugs at various points of her body; the injections were designed to control her fertility cycle. Throughout the process they kept telling themselves it would all be worth it if the end result produced the child of their dreams. And so they waited expectantly for "the call."

Like most of the millions of women and couples in the United States who have endured ART treatments, the Epolites found that the call they were hoping for never came. Doctors from the clinic were matter-of-fact in assessing the failure. "Basically it was, 'We've done as much as we can, we can go no further, so basically, live with it,'" remembers Stephanie about being informed that fertilization failed. "There was no hope. In fact it was said that 'you will probably never have a family.' In essence, 'deal with it.'"

"I felt like it wasn't meant to be," said Stephanie recalling those dark days. "It was like my body had failed me, and that I couldn't do what I was meant to do. There was an emptiness inside myself and my heart that could never be filled."

#### BEHIND THE ART CURTAIN

The Epolites experienced firsthand what most other couples turning to ART discover sooner or later. Behind the glowing media reports and the marketing blitzes that feature satisfied parents cuddling smiling babies is a



- Dr. Hilger's textbook, *The Medical & Surgical Practice of NaPro Technology*.
- *Women Healed: In Their Own Words*, edited by Jean Blair Packard.
- *Physicians Healed*, edited by Clea Hartman.

#### THE HEARTBREAK OF IVF

"I never dreamed we would be walking this road to hell."

That harsh realization struck Stephanie Epolite and her husband Anthony like a blow to the head as they waited uneasily for a child—their child—to take shape inside the laboratory of a Sacramento, California, fertility clinic in the fall of 1999.

In their late 30s but recently married, the Epolites had failed repeatedly in their attempts at conceiving a child in the months following their wedding day. Desperate and frustrated, they sought the advice of a doctor, who referred them to a local fertility clinic. Assured by their parish priest that it was morally acceptable to "do whatever you are comfortable with," the Epolites concluded that the Assisted Reproductive Technology (ART) industry practice—commonly known as *in vitro fertilization* (IVF)—represented their last, best chance for starting a family.

As practicing attorneys, the Epolites were familiar with professional consultations. Even so, the initial meeting at the fertility clinic seemed more businesslike than what they had anticipated, especially considering the stakes. There was no talk of diagnosing the causes behind *why* the couple

blood samples, diagnostic tests, or anything else."

An in-house financial planner discussed the various "packages" available for purchase—one cycle of treatment versus two or three. "It was a little like buying a car: very structured," says Stephanie. She recalls:

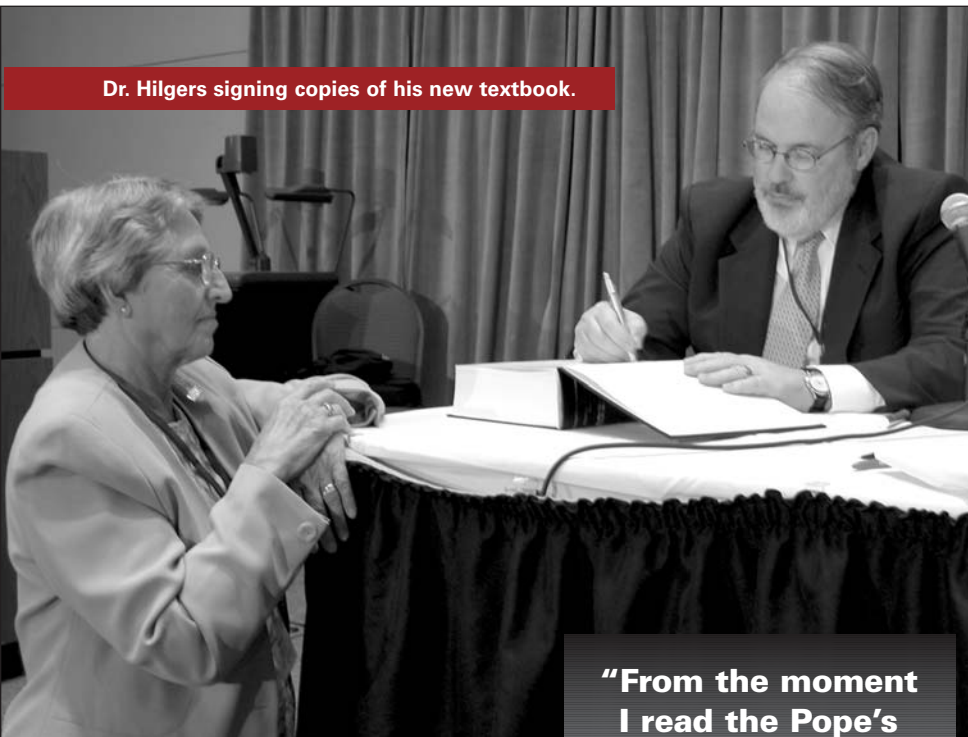
*Anthony is the numbers guy and dug into that more. I was just awestruck. They saw the desperation in my face, I'm sure they see it all the time. I guess they figured, "We've got two easy people here," and they were right. We were willing to go through with it.*

**According to the latest statistics available from the CDC, the success rates for ART procedures range from 21 percent to 34.8 percent.**

deeper, darker truth: assisted reproductive technologies are hardly the panacea to infertility they are made out to be.

IVF procedures invariably require the so-called “selective reduction” of human embryos—that is, the destruction of tiny unborn babies—that are typically produced in clusters, numbering as many as six or more at a time. Because the couples are dealing with

the *New England Journal of Medicine* found that babies conceived through IVF or ICSI were more than twice as likely as naturally conceived infants to have major birth defects (9 percent vs. 4.2 percent), such as problems with the heart and urinary or genital tracts. A number of other studies published in professional medical journals implicate IVF for significantly higher incidences of low birth weights, cancer, birth



Dr. Hilgers signing copies of his new textbook.

## Loome

multiple embryos and heavy fertility treatments, the approach can also yield unexpected results of another sort; a startling 35.4 percent of all ART pregnancies result in twins, triplets, or more, according to the latest data published by the Centers for Disease Control (CDC).

Success rates for ART procedures as defined by the CDC are measured in a variety of ways, including “pregnancies per cycle” of treatment as well as “live births” per cycle and other measures. According to the latest statistics available from the CDC, the success rates for ART procedures range from 21 percent to 34.8 percent. But even among those instances in which ART procedures result in a pregnancy and birth, there is growing cause for concern.

One large-scale study published in

**“From the moment I read the Pope’s words as a 4<sup>th</sup>-year med-school student, I knew he was speaking directly to me.”**



defects, and other conditions that can cause developmental problems like speech impairment.

The response from the ART advocates to these findings, as reflected in secular media reports, ranges from mild concern to dismissal. Kathy Hudson is the director of the Genetics and Public Policy Center at Johns Hopkins University in Baltimore and former assistant director of the National Human Genome Research

Institute. In a feature article examining concerns about ART and its impact on the health of infants published by MSNBC.com (the online partner of *Newsweek* magazine), Hudson responds to the troubling studies by saying: "The risks that do exist, if they do exist, are rare."

To date, some 300 studies on the effects of ART on children have been completed. A panel that includes members from the American Society for Reproductive Medicine (ASRM), considered by some to be the leading advocate of ART in the United States, and the American Academy of Pediatrics is now analyzing the available research.

### A SECOND CHANCE

But now, back to the case of Stephanie and Anthony.

Although unwilling to tolerate another round of ICSI IVF, the Epolites were not yet ready to give up their dream of having a child. In May of 2001, Stephanie decided to call an old friend, Nancy Mattioli, a veteran instructor of the Creighton Model FertilityCare system and a Certified FertilityCare practitioner with an expertise in NaPro Technology. The two women had first met a few years earlier during Stephanie's engagement when the bride-to-be inquired about natural family planning methods as a way to avoid pregnancy. The focus of their discussion now was quite different.

Stephanie remembers:

*Nancy was someone I felt comfortable talking with about all we'd been through. I laid it all out on the line for her, and I mean everything. I told her I felt like I'd violated my body, my religion, and that I felt like a sinner. She just heard me out and said, "Okay Stephanie, let's get back on track and start charting." So that's what we did.*

"Charting" is the foundation of the Creighton Model FertilityCare system and the key diagnostic tool of NaPro Technology. Prospective practitioners undergo a rigorous training curriculum that, once completed, certifies them to teach women how to look for and record changes in their cervical mucus. These changes, also known as

biomarkers, appear throughout the course of every woman's menstrual cycle. Research shows that changes in mucus correspond with changing levels of estrogen and progesterone in the

**"It was a little like buying a car: very structured."**



**It is one and-a-half to three times more successful than *in vitro* fertilization at helping infertile couples have children—at a fraction of the cost.**



**The per capita rate of hysterectomies in the United States is three to four times as high as in European countries.**



body that cause a woman to ovulate and menstruate.

Dr. Hilgers refers to the charting of these biomarkers as a way of reading "the language of the woman's body." Properly understood and used, this unique vernacular helps unlock the secrets of underlying health problems and points to appropriate treatments.

"This is perhaps the most striking distinction between mainstream medicine and NaPro Technology," explains Hilgers. "Most medical approaches today bypass the woman's problem or simply override her natural processes altogether. With NaPro, we find out *why* the body isn't functioning correctly, then apply treatments that work cooperatively with the body."

Once basic problems are diagnosed, NaPro physicians can utilize a range of cutting-edge medical and surgical practices, which are described in Hilgers' new medical textbook, to restore the natural process of the woman's body to its proper function. Thanks to this almost obsessive focus on diagnosing and curing underlying health concerns, Dr. Hilgers has documented important advances in treating endometriosis, polycystic ovarian disease, blocked fallopian tubes and hormonal disorders—all common conditions that can contribute to infertility and other problems.

### "WE'RE IN GOD'S PLACE"

Couples like Stephanie and Anthony Epolite include another element when they describe the NaPro Technology approach to health care: compassion. Stephanie remembers:

*When we walked through the doors of the Pope Paul VI Institute and met that first staff person, I told myself, "We're in God's place." Everyone treated us with respect, kindness, compassion, and love. When I finally met Dr. Hilgers in person, I told him we were in the right place and he was one of God's messengers.*

It was July of 2001, and the Epolites were in Omaha, daring once again to believe that their dream of having a child might be within reach. Under the direction and encouragement of Nancy Mattioli and a Sacramento physician, Dr. John Gisla, the couple had faithfully charted Stephanie's cycle for months before sending the data to Dr. Hilgers along with a letter asking if he would consider taking their case.

Dr. Hilgers's reply in January of that year outlined the protocol that would be involved if they wanted to move forward, and the couple readily agreed. Based on a reading of the charts, Stephanie's blood was drawn on targeted days and shipped to the Institute's hormone lab for analysis. After multiple long-distance phone discussions—and a word of caution from Dr. Hilgers that there are no guarantees for success—he agreed to take their case and the Epolites flew to Omaha.

In Nebraska, Dr. Hilgers immediately conducted diagnostic procedures on

Stephanie and Anthony. Those tests confirmed that she suffered from endometriosis and blocked fallopian tubes, while his sperm count was unacceptably low. (Unlike typical practitioners of assisted reproduction, the Pope Paul VI Institute has developed a technique for collecting semen during natural intercourse, so that the process does not violate the chastity of the man or the integrity of the marital act.)

During a two-week stay in Omaha, NaPro surgical procedures were performed on Stephanie, and a high-potency nutritional supplement was prescribed for Anthony. As they boarded the flight home, the couple's hopes were high that they would be able to conceive. They also sensed a new inner peace, knowing they had done all they could. Now, they decided, it was time for prayer and trust.

#### A LEAP OF FAITH— AND A SURPRISE

The weeks that followed were more difficult than the Epolites had imagined. Dr. Hilgers had repeatedly cautioned them not to expect instant results, but with each passing month, as they saw no visible results, the couple grew more discouraged.

"At one point I think I had convinced myself that I was experiencing symptoms of being pregnant," recalls Stephanie. "Then when my period came, I just threw myself down on the floor and shouted out, 'God, I can't do this any longer! You've taken a strong woman and you broke her down.'" Anthony consoled his wife as best he could, and reminded her that they had agreed to make a leap of faith. "We said we were going to rely on God," he said. "Let's trust him."

That trust was put to the test when the Epolites were asked to share their IVF experiences with representatives attending the annual meeting of the California Natural Family Planning Conference in March of 2002. They reluctantly agreed.

Conference attendees got more than they bargained for when, at the end of their prepared 30-minute presentation, Stephanie and Anthony made a dramatic announcement: she was seven weeks pregnant. Tears flowed freely during the extended standing ovation that followed. The journey to parenthood that Anthony describes as one of

"faith, endurance, heartbreak, and love" culminated on October 31, 2002 at 9:17 pm with the birth of their daughter, Claire Marie Epolite.

#### INTRODUCING A NEW TECHNOLOGY TO THE WORLD

NaPro Technology's application to the problem of infertility is perhaps the most captivating use of the emerging new approach to women's health

and the wife of an FBI agent, Debra Brock of Liberty Township, Ohio, spoke of her bouts with severe depression (including thoughts of suicide) while struggling with premenstrual syndrome (PMS). Brock had been successfully treated previously at the Institute for recurrent miscarriages, and during an otherwise routine follow-up phone conversa-



Denys and Gabrielle Tims and 3-day-old Baby Dionne, at Sligo General hospital, County Sligo, Ireland. The Tims received NaPro care in Ireland.

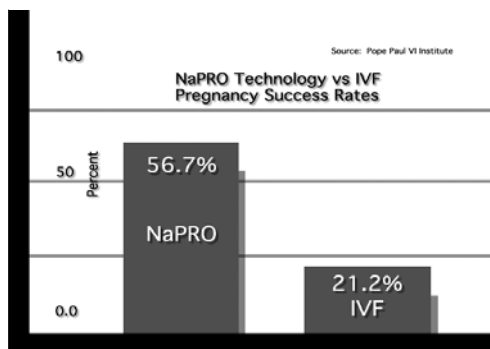
JAMES CONNOLLY/GRENGRAPH

undertaken by Catholic practitioners, but it is hardly the only one.

During a landmark conference in July of 2004 in Dr. Hilgers' home town of Omaha, Nebraska, more than 400 physicians, pharmacists, practitioners, and patients from the United States and around the world gathered to learn more about NaPro Technology's many breakthroughs, and to share their stories.

The conference theme: "Introducing NaPro Technology to the World," featured a series of emotional, first-person testimonials from women and couples—including Stephanie and Anthony Epolite—who described how their various conditions were diagnosed and successfully treated using NaPro Technology. For example:

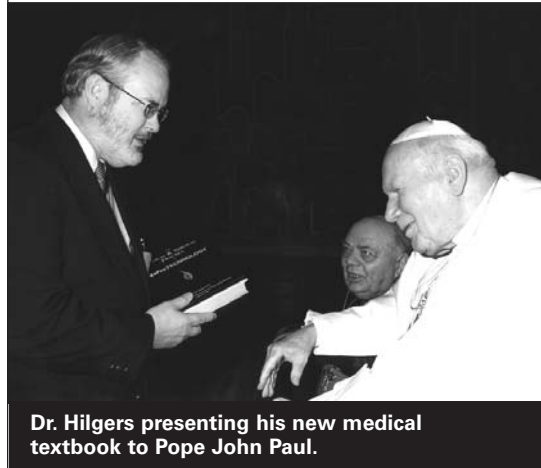
- A home-schooling mother of eight



tion mentioned her depression. At the request of a nurse, she sent in a blood sample and it was quickly determined that her hormones were at one-third the normal level. After receiving treatment she was "given her life back."

- Abby Bredemeyer was a 19-year-old college student whose severe

Three "miracle babies" from the same family.  
(From left) Steffan, Rile, and Johannes Sales.



Dr. Hilgers presenting his new medical textbook to Pope John Paul.

pelvic pain and cramps during menstruation forced her to spend several days a month curled up in pain. She had been offered two options: painkillers and the birth-control pill, which only slightly relieved the symptoms. Her parents recalled a presentation Dr. Hilgers's wife Sue had given years earlier and decided to call the Institute. After the first appointment Abby ceased taking the Pill and started charting. That led to Dr. Hilgers' diagnosis of endometriosis: the core cause of monthly agonies. She had surgery, and her problems all but ended.

- "Women do *not* have to accept post-partum depression as a part of pregnancy," declared Estelle Nigro, the mother of three boys. For the first time ever, she publicly shared the impact of her own post-partum depression before the hushed audience: her feelings of shame, embarrassment and perhaps worst of all, the horrific feeling that motherhood was a colossal mistake. This was anything but the normal "baby blues." Doctors prescribed antidepressants and assured her the feelings were "common"—a patronizing diagnosis that made her feel even worse. Fortunately she sought the help of Dr. Hilgers—who, far from dismissing or trivializing her concerns, recognized the totality of the situation and its impact upon her personal emotional health, her children, and her marriage. Her NaPro Technology treatment protocol included regular doses of progesterone that led to the resumption of a normal, happy life as wife and mother.
- After six painful, emotionally traumatic miscarriages, Dennis

and Debbie Lutgen of Beloit, Kansas, had all but accepted their fate as a childless couple. Even when they were convinced to call the Pope Paul VI Institute and set an appointment with Dr. Hilgers, they were philosophical about their chances. "At our initial consultation I told Dr. Hilgers that I didn't know if we needed to be talking to him," recalls Debbie, continuing:

We believed so strongly that if God wants you to have children, he will give them to you. Dr. Hilgers just looked at me and said, "If you have a clogged sink, are you just going to pray about it—or are you going to call a plumber?" He explained that he is not playing God, he's just being used to bring about God's plan.

The Lutgens then introduced little David and Amy to the delighted gathering: two more NaPro Technology "miracle babies."

#### NAPRO BREAKTHROUGHS

During the Omaha conference and in a series of medical conferences across the country in the months that fol-

lowed, Dr. Hilgers has re-doubled his efforts to spread the NaPro Technology message. Publication of the medical textbook marked a significant turning point. Now he was able to offer scientific documentation to support the personal testimonies and anecdotal evidence that had been quietly circulating for years.

Among NaPro Technology's many breakthroughs, described in the textbook, are:

- It is one and-a-half to three times more successful than *in vitro* fertilization at helping infertile couples have children—at a fraction of the cost.
- It is 79 percent effective at helping women have a successful pregnancy after they have suffered repeated miscarriages.
- It can help women learn they are at risk for a miscarriage even before one has occurred.
- It is 95 percent effective at treating pre-menstrual syndrome (PMS), a condition that plagues millions of American women each month.
- It is also 95 percent effective at treating post-partum depression, often achieving results within hours to ease a condition that afflicts as many as one in five new mothers.
- It cuts the rate of premature birth nearly in half—thus helping to reduce the incidence of birth-related injury.
- It allows for the accurate dating of the beginning of pregnancy, thus helping to avoid some end-of-pregnancy complications.
- It effectively treats chronic pelvic pain, and it reduces the hysterectomy rate by a remarkable 75 percent.

Not only is the NaPro Technology approach more effective at getting desired results, it has many important, beneficial "side effects" as well:

- By helping patients conceive naturally, the pitfalls of IVF like multiple births and the high incidences of birth defects are avoid-

ed. The multiple-pregnancy rate of NaPro Technology is just 3.2 percent, far lower than IVF/ART pregnancies.

- NaPro Technology helps avoid unnecessary surgeries. To cite just one example, rather than treating a woman's underlying problems, many doctors today will order a hysterectomy, preferring simply to remove the woman's reproductive organs. The per capita rate of hysterectomies in the United States is three to four times as high as in European countries. Although studies show that the complication rate for hysterectomy is very low, research has linked the surgery to other subsequent problems, such as depression, sexual dysfunction, weight gain, high blood pressure, and premature menopause.
- The habit of daily observation by the woman—a practice that takes only half a minute, several times a day—helps her catch the early signs of other potential health problems, including some cancers, assuring her a higher rate of recovery.
- As a means of avoiding pregnancy, the Creighton Model FertilityCare System is highly effective. A study published in the June 1998 issue of the *Journal of Reproductive Medicine* found its perfect-use effectiveness to be 99.5 percent and its method effectiveness to be an impressive 96.8 percent. This compares favorably to the success rates of the birth-control pill, of which Planned Parenthood's web site states: "Of 100 women who use the Pill, only eight will become pregnant during the first year of typical use." It is well worth noting that the natural solutions advocated by Dr. Hilgers are what people really want. Several anecdotal bits of information point to that reality. According to a study conducted by City University, London, couples who conceive through IVF are far less likely to tell their children of their true origin than parents who adopt—perhaps an indication that the parents are not proud of the IVF procedure. Women who use the birth-control pill as a means of

avoiding pregnancy are more than twice as likely to discontinue that approach as women who use the Creighton Model FertilityCare system. And Creighton Model users report higher levels of self-esteem, spiritual well being, and sexual intimacy than do users of the birth-control pill.

with readily available research papers, news headlines, and other resources. Sponsorship for a *single event* like the "Gala Reception" at the group's annual meeting carries a \$225,000 price tag.

In contrast, marketing and publicity resources for the 165 FertilityCare Centers that serve as the primary



Dr. Philip Boyle, an Irish practitioner of NaPro Technology, Dr. Hilgers, and the Epolites at a panel discussion of the health care process.

#### TECHNOLOGY AT A CROSSROADS

The ability to transform NaPro Technology from a closely held, "niche market" approach to women's health care into a widespread, commercially viable alternative to conventional medical approaches depends on many factors.

The various beneficiaries of NaPro Technology, no matter what their medical conditions may have been, share one sentiment that crops up so frequently that it is almost eerie. They all say, in virtually the same words: "Why didn't anyone tell me about this before?"

Like many new products or services, NaPro Technology competes against well-financed options that are already firmly entrenched in the marketplace and in the political arena. The American Society for Reproductive Medicine maintains a fully staffed Office of Public Affairs in Washington, DC, and an elaborate web site stocked

**Conference attendees got more than they bargained for when, at the end of their prepared 30-minute presentation, Stephanie and Anthony made a dramatic announcement.**



source of NaPro Technology services in the United States and around the world are far more modest. The American Academy of FertilityCare Professionals, the education and certification group that supports NaPro Technology and sponsors an annual conference like the one in Omaha last July, is grateful that individual donors step up to provide a morning coffee bar for attendees.

By its very nature, the NaPro Technology approach to medicine and

reproductive health is unlikely ever to generate the kind of massive support infrastructure currently enjoyed by the ART industry. But NaPro Technology advocates are far from discouraged; they are simply seeking out more creative, cost-effective ways of spreading their message.

Last summer, Dr. Hilgers commissioned a new Catholic non-profit communications group composed of former secular news professionals to produce a Video News Release (VNR) to coincide with the annual conference and publication of the medical textbook. The VNR featured the story of the Epolites journey from failed IVF to parenthood with NaPro Technology. An audience tracking service confirmed that the story had aired on newscasts in more than a dozen major markets, reaching an estimated 3 million households, generating new calls and email messages to local NaPro Technology providers.

That same group is now developing a series of education and marketing videos explaining NaPro Technology, as told through the personal experiences of women and couples who have benefited. A feature-length documentary about the history and work of the Pope Paul VI Institute is also under development.

The Institute received hundreds of email messages and phone calls after Dr. Hilgers appeared on "The World Over" with Raymond Arroyo on Eternal Word Television Network (EWTN) last August. "We always know when they replay that show," says Dr. Hilgers of his EWTN appearance. "The next morning our email box is overflowing."

Support for the Pope Paul VI Institute and NaPro Technology within the Catholic Church is apparent on a number of levels. For several years now, the Institute has received a \$50,000 annual contribution from the Vatican—"my check from the Pope," says Dr. Hilgers with a smile. He presented the Holy Father with an advance copy of his new medical textbook last year.

Beyond monetary support, Pope John Paul II has continued to support the work of the Institute in other ways. Cardinal John Francis Stafford, former president of the Pontifical Council of the Laity (and currently director of the



Baby Kenneth with Anne Marie and Gabriel Downes. Kenneth was the first NaPro baby in Ireland, Born on July 29, 1997, in County Mayo.

**Can the secular reproductive-medicine community be persuaded to embrace—or at the very least to acknowledge—this new approach?**



Apostolic Penitentiary in Vatican City) repeatedly reminded attendees of the conference in Omaha he had come "at the explicit request" of the Holy Father to recognize the efforts of Dr. Hilgers and reaffirm the message of *Humanae Vitae*. The cardinal also stunned his audience with a stinging rebuke of contemporary sexual norms, mocking the kind of language heard all too often at the local mall or on MTV. His voice rising, Cardinal Stafford said:

*Humanae Vitae* involves a radical critique of the misuses of technology. Such abuses ravage the creative tiny sparks of life and contaminate the springs of love in communion—life, contaminated, and also, by the misuse of technology, love, and communion, violated. Studies and attitudes toward dating today report on the growing trends toward "hook ups." Railroad cars "hook up." Ships and planes sometimes "hook up" for re-fueling purposes. Now, in a technologically dominated culture, "hook ups" are perceived as human relationships, inspired by a mutual, and seemingly unromantic desire to take care of sexual urges without the complications of love or romance.

In bringing forth NaPro Technology, the Pope Paul VI Institute has reaffirmed the original meaning of technology. It is to be life-giving, in the Greek sense. It is to be creative and life-enhancing. This creative use of technology is in service to human subject, in *service*—not exploiting it, and is a direct response to the appeal of the Pope. It represents a turning point in the century.

#### LINGERING QUESTIONS

History will judge whether or not Cardinal Stafford went overboard with his glowing endorsement of NaPro Technology. But for all its benefits, numerous questions about the approach still remain. Can the secular reproductive-medicine community be persuaded to embrace—or at the very least to *acknowledge*—this new approach as a legitimate alternative to current practices? To date the answer to that question has been No. A spokesman from the American Society of Reproductive Medicine declined comment on the topic, saying, "We tend to just ignore these people." Requests for comment from another ART advocacy group, RESOLVE, were similarly met with silence.

There are other challenges, including the recruitment and training of properly certified physicians. A fellowship program at the Institute, in which doctors come to Omaha to live and train under Dr. Hilgers, has a rocky history. "It's a sacrifice for them," admits Dr. Hilgers when asked about doctors who consider the fellowship program. He explains the difficulties:

Many of them are sympathetic to what we're doing, but they've got thriving practices back home and families to support. It's a tough call. There's also a lot of pressure from their peers to view NaPro Technology as some sort of oddball kind of medicine because they didn't learn about it in med school.

Surprisingly enough, some of the most successful NaPro Technology physicians practicing today live and work outside the United States. Dr. Philip Boyle is a certified Fertility-Care educator and practitioner in Galway, Ireland, who began using NaProTechnology in 1998. Since then

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he has founded more than 30 FertilityCare centers in Ireland and has helped 95 couples achieve 123 conceptions. NaPro Technology practitioners can be found in 13 countries besides the United States, with a total of 165 FertilityCare Centers worldwide located in hospitals, diocesan natural family-planning offices, and stand-alone clinics.

Some members of the Catholic clergy are also playing an increasingly active role in learning about and promoting NaPro Technology. The "Love & Life Unlimited" conferences sponsored by the Pope Paul VI Institute are designed to give priests, deacons, and lay religious leaders an opportunity to "ponder, promote, and proclaim" the Catholic vision of marriage and sexuality.

Father Edward J. Richard is the aca-

demic dean at Kendrick Glennon Seminary in St. Louis, who serves as a member of the Love & Life Unlimited faculty. "Once the priests come and find out what this is all about, they can return to their parishes with a real grasp of what the Church teaches about sexuality," he says. "It also affirms and enforces the beauty and meaning of their own calling and commitment to celibacy."

As NaPro Technology advocates work to bring this new reproductive science into the lives of mainstream Catholics, the most crucial unknown is whether women and couples will actually take the time to explore all the options available to them—including NaPro Technology—as they address their own reproductive-health issues.

Ultimately, answers to these and other questions about the long-term

success of NaPro Technology depend upon the *merits* of this new women's health science. Does it work? Is it better? If NaPro Technology is in fact a superior health care alternative, grassroots demand for it from both Catholic and non-Catholic consumers, and in the marketplace of scientific and medical ideas will be the driving force.

Only then, as an aging but visionary Pontiff said so many years ago, would couples enjoy the "wise and healthy direction, such as they have a right to expect." ■

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