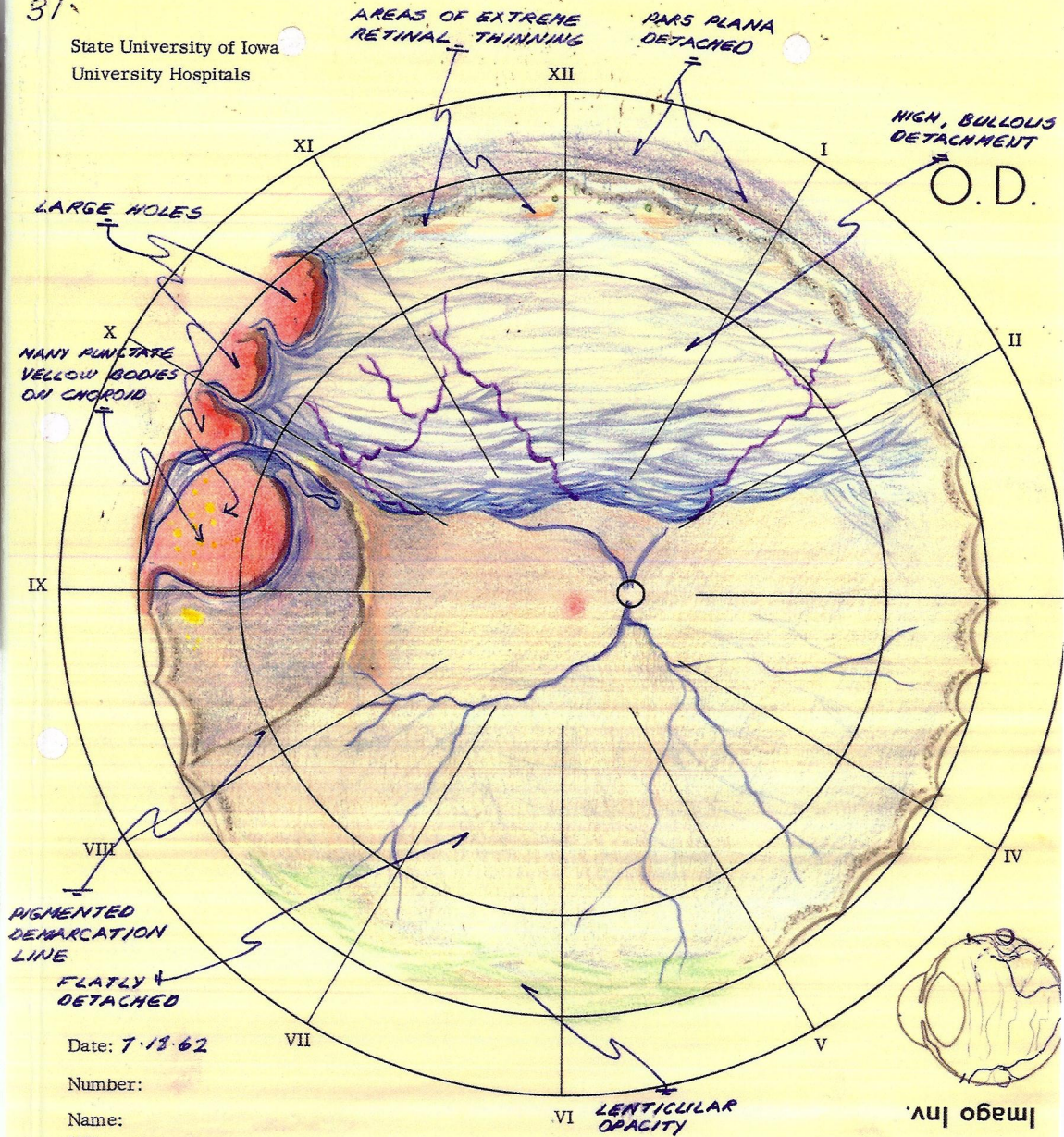


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# The Examined Life

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# Rolling the Dice

*Francie Arenson Dickman*

I have two children. Two little girls. Both are eight years old, born on the same day in September, both are in second grade, and both prefer Spongebob Squarepants to Hannah Montana. That is where their similarities end. One has blond hair and blue eyes. One has brown hair and brown eyes. One is laid back. She'll slip anywhere from a class to a stage to a roller coaster without a look back. The other slips nowhere. She likes to observe the classroom or the roller coaster with me at her side before she'll venture forth. And she'd never get near a stage. One picks jelly beans, the other grabs chocolate bars; one's bedroom shelves are strewn with homemade volcanoes, magnets, and frogs (yes, there is a kit to grow your own frog); the other's are arranged meticulously with books and journals and stationery. One's closet is lined with skirts and trendy tops; the other's is stacked with sweatpants and jeans.

"It's a wonder they are even related, let alone twins," one's teacher, Mr. Paulsen, said to me at conferences this fall. This was during the "describe your daughter at home" portion of the discussion, which I inevitably answered by comparison (despite the cautionary notes, like warnings from the Surgeon General, against using comparisons with multiples—as doing so may be harmful to your children's identities and self-esteem). With twins, comparisons are inevitable.

So, I laughed in agreement with Mr. Paulsen, but I refrained from suggesting to him that maybe my children are not related at all. I pictured Mr. Paulsen's reaction to such a comment. I figured he would probably look at me like I was a loony-tune, and I'd end up trying to explain. "You see, sir, while both my children came out of my body, they both started in a petri dish, the same dish, and a doctor, Dr. Kaye (or perhaps one of his lab workers), put them there. So, the chance of a mix-up, while I realize it's remote, does exist."

Talk about too much information at the parent-teacher conference! It's awkward conversation with just about anyone, so I keep it to myself. I tuck this thought away with the other ruminations I have about my daughters—from insignificant

tendencies to their very existences. Ruminations that, I imagine, mothers of non-fertility-induced children most likely do not share.

It took me three years to get pregnant. This stretch of time was—as any woman who wants children and is told she probably can't have them will tell you—bleak. I'd wake up with a ball of depression in my belly. I'd panic at the sounds and sights of other people's babies. I worked as a lawyer by day and worried the rest of the time that I was destined only to be a lawyer and never a mother. I also changed my diet. I tried meditation. I quit caffeine. I researched adoption. I saw a shrink. And I stuck myself, night after night, with the dreaded needles.

Three times we—I guess I should use *we* rather than *I*, because my husband Kenny went through this with me, although he'd never had an issue with adoption and never had to stick himself with the needles—went through the *in vitro* fertilization or IVF process. The first two rounds got off to great beginnings. I produced fantastic amounts of eggs for Dr. Kaye and his folks to work with, to fertilize into embryos that would then be implanted in my uterus.

“Things are looking good.” This was how the nurses described my scenario during the periodic status phone calls. For our first try, I ended up with something like seven great embryos, and they implanted three. For the second, I had eight embryos, and they implanted four. But neither attempt was to any avail.

During the third round, the news was different.

“Not so good,” the lab reported on the day that I'd had the surgery to extract the eggs. They told me that I had only five eggs to fertilize. The day after that, they called to say that only four of them had become viable embryos. A few days later, the day of implantation, the day we were to wake up at four thirty in the morning to drive to the hospital, the phone rang at four in the morning. It was the doctor. Only two embryos were left. “One is so-so,” he said, “and one is exceptional.”

“Nonetheless,” he continued, “because you have so few, I have to ask, do you still want to go ahead with the transfer?”

“Yes,” I heard myself say.

“Fine, very well,” he said in his strong Australian accent. Then he paused. I heard his deep exhale before he added, “You realize that you are really rolling the dice?”

“Yes,” I said again. I said yes even though I knew the odds were terrible and even though I knew that our insurance covered only three rounds of IVF. After that, if this one didn't work, we were on our own, out-of-pocket. And at twenty grand a try, we'd need pretty deep pockets—pockets we didn't have—if we wanted to continue.

But I'd gone this far. The night before, in preparation for implantation, my noble husband had given me a shot in the rear end with a needle the length of the Golden Gate Bridge. Almost as awful, at the shrink's recommendation I'd been



dragging myself three days a week to yoga—this deep breathing, pose-holding stuff that clashed with my runner’s temperament and made me feel horribly self-conscious but was said to do wonders for the womb. I wasn’t turning back.

“You’re sure?” This time it was Kenny asking.

I looked up at him and said into the phone, “Let’s just do it.”

So, Dr. Kaye did. A few hours later, through a clear, thin tube attached to a microscope lens, I watched along over a monitor as he steadily guided the two miniscule embryos, one so-so, the other exceptional, through my body.

When the tube reached the right spot in my uterus, the lab tech (who was watching the procedure on a monitor in the next room) announced over a microphone, “Okay, now.”

Dr. Kaye said, “Fine.”

My eyes glued themselves to the monitor, since I knew from my earlier attempts that any second now, a flicker of what seemed like light would appear, marking the arrival of the embryos into my womb. But nothing happened.

Instead, I heard Dr. Kaye say, “But first...” He handed the tube to the nurse at his side, and he reached into the breast pocket of his lab coat. I lifted my head off the table and stared in confusion. I decided he was going to pull out a Kleenex and sneeze. Certain such a blast would blow away my two measly embryos, I began to panic. Later, Kenny told me he’d thought the doctor had stopped to check a pager.

“He wouldn’t check his pager in the middle of a transfer,” I said.

“Well,” Kenny answered, “he wouldn’t blow his nose, either.”

But he would and he did pull out a yarmulke—navy blue velvet, embroidered along the border with silver. Right then and there, with my breath suspended and my embryos hanging in the balance, Dr. Kaye unfolded the head covering, hugged it to his heart, and began to say a prayer. It was a Jewish prayer, the Sh’ma, the holiest of holy. He spoke like he worked, quick and sure. Then he traded the yarmulke for the test tube, and with a tear in my eye, I saw the flash of light, and it was done.

And now, eight years later, here they are, lying on my couch with the stomach flu. One so-so, the other exceptional. Obviously, I don’t know which one is which, but on days like these (and never do I dare articulate this aloud), I can’t help but have my suspicions. One went back to school in a day; the other laid around the house for three. One rode out the bouts of nausea without a whimper; the other kvetched the entire time.

“It’s a miracle I’m alive,” I told Kenny when he returned from his three-day business trip that coincided, naturally, with the stomach flu run.

“You are so wrong, Mom,” my daughter, the sassy and—at that moment—the so-so one, said. “It’s a wonder *we* are.”

As both of my daughters took Kenny's hands and proceeded to show him their battle souvenirs—like bottles of Gatorade on their nightstands and even a vomit stain on the carpet (as a housekeeper, I myself am only so-so)—I couldn't help but think how right she was.