TAHAREINU
MEDICAL SOLUTIONS FOR COUPLES

Your Medical Frontline
Taharat Hamishpacha and
Reproductive Health

Tishrei 5782 September 2021

BS"D

Dear Friends,
With the new year's beginning, we join you in hope and Tefillah for a year of growth, health, and healing.

At Tahareinu, we are pleased to be starting the new year in our new and expanded office in Israel, an auspicious symbol of growth and expansion.

We are looking forward to serving even more people, spreading even more awareness, and empowering even more couples in the areas of OB/GYN, Tahara, and fertility.

In keeping with our mission, our guidance is based on the latest innovations purveyed by professionals from around the world.

Most recently, we've been focusing on Recurrent Pregnancy Loss, specifically with Rabbi Melber's attendance and presentation at the World Congress on Recurrent Pregnancy Loss.

We hope you find the highlights shared here both enlightening and empowering.

Wishing each one of our readers a year filled with health and happiness.

Rabbi Yitzchok Melber

Rabbi Melber presents at The World Congress on Recurrent Pregnancy Loss (WCRPL)

On September 12-13, Rabbi Melber joined prestigious doctors and experts on RPL from around the world.

In addition to discovering innovations and solutions, he also presented on the topic of secondary RPL – and the need to treat couples struggling with miscarriage even after several children.

In general, as the medical community moves toward the patient-centered and shared

decision making models, doctors are more receptive to accommodating patients' preferences.

However, in Rabbi Melber's experience, Jewish couples with several children who have been seeking medical assistance after RPL were treated with condescension and even disdain.

In several clinics in Europe, in fact, couples with more than one live child cannot seek treatment for RPL.

In his lecture, Rabbi Melber stressed the need for doctors to leave their biases and values outside the treatment room, and understand the Orthodox Jewish community's emphasis on large families. The emotional pain of an Orthodox couple with several children who are failing to have more, he explained, may be similar to a secular couple with only one child.

"This is not a quality of life issue," he said. "This is life itself."

His message was well-received and the doctors in attendance appreciated the insight but from Rabbi Melber, both a community insider and an RPL expert.

As always, Tahareinu staff is available to guide couples experiencing RPL with the latest solutions. Please be aware that many factors can change over time, so it is important to evaluate whether there are any new health indications.

Highlights from The World Congress on Recurrent Pregnancy Loss (WCRPL)

Dr. Lee Shulman

Professor of Obstetrics and Gynecology
Chicago, Illinois

Dr. Shulman weighed on the debate over whether progesterone should be used in the first trimester following a miscarriage. He stressed the clear evidence of its efficacy.

There's also no need to do bloodwork to discover the progesterone levels prior to its administration, as there is no risk and progesterone can simply be used directly.

He also clarified that the FDA never approved Duphaston (dydrogesterone), the most effective form of progesterone, due to lack of evidence. However, it has been used by

tens of millions of people effectively and should be obtained by couples even in the US.

Dr. William Kutteh

Director, Fertility Associates of Memphis

Dr. Kutteh presented a new algorithm for investigating RPL which results in an astounding increase in clarity.

As opposed to the standard workup recommended by the American Society of Reproductive Medicine (ASRM), which results in only 60% explained miscarriages, Dr. Kutteh's more comprehensive method turns out an impressive 90%.

Because we know that couples dealing with unexplained RPL experience an inordinate amount of guilt, self-blame, and depression, it is crucial for the emotional wellbeing to investigate the cause of miscarriage as deeply as possible.

One of the biggest differentiators of this algorithm is more genetic testing on both the fetus and the parents.

The ASRM guidelines, over a decade old, are outdated in today's cutting-edge medical world.

Dr. Kutteh presented evidence from his very large clinic, with tens of thousands of patients.

Read more about this innovative methodhere.

Dr. Harvey Kliman

Yale School of Medicine

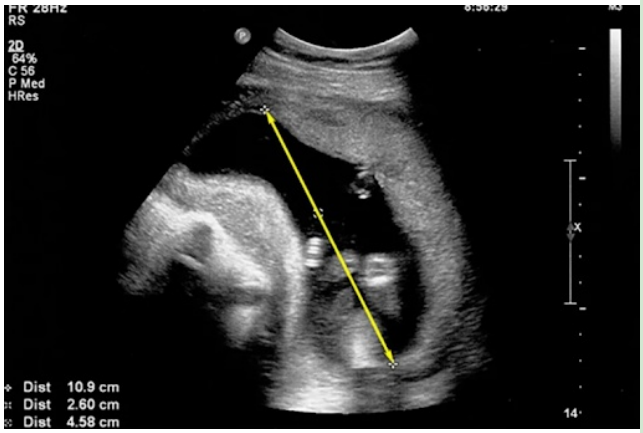
Dr. Kliman focused on unexplained stillbirth, and introduced an innovative theory linking it to placental issues.

He created a precise calculator to be used via ultrasound to monitor placental size and volume throughout pregnancy, so in event of a negative development the baby can be delivered immediately.

This technology is now available free to all providers so they can provide the best care

to post-stillbirth expecting women.

Dr. Kliman compares the placenta's relationship with the fetus with gas to a car. The gas indicator on the dashboard will only light up when the gas is very close to empty. Similarly, often placental issues will only show up at the end of a pregnancy.
Couples from around the world consult with Dr. Kliman both post-stillbirth and in a preventative capacity.



Couples from around the world consult with Dr. Kliman both post-stillbirth and in a preventative capacity.

Dr. Sotirios Sarevelos

Imperial College, UK

Dr. Saravelos expounded on one of the most important tools for RPL treatment: the 3D ultrasound.

This is a non-invasive, no-risk method that is readily available and can increase clarity on several factors, such as the shape of the uterus, hydrosalpinx (a blockage of the fallopian tube), post c-section scarring, adenomyosis, and of course, abnormal growths in the uterus.

Almost all these conditions can be effectively treated, though some are more complex and may require specific procedures.

Dr. William Buckett

IVF Specialist

Montreal, Canada

Dr. Buckett discussed an interesting debate about the investigation of specific forms of thrombophilia (blood clotting issues) in RPL. Although many opine that there is no evidence that this is related to miscarriage or that treatment will improve chances of a successful pregnancy, Dr. Buckett presented updated guidelines from the ESHRE indicating that the two are very much related.

In fact, when he questioned other doctors on the panel about their experience, they concurred that they've seen success with this aspect of RPL.

In Tahareinu, as well, we advise couples after just two miscarriages to start with this because it is a simple and easy fix.

One other topic mentioned a few times by doctors was endometritis (an inflammation of the lining of the uterus).

Although this is a major cause of miscarriages, it reveals no symptoms and therefore goes largely undetected. The only way to diagnose it is through hysteroscopy and biopsy.

If a woman suffered a miscarriage, she should definitely be examined. It can be easily treated with antibiotics. If a woman has a small polyp as well as endometritis, it is then urgent to remove it.

We are excited to announce that Rabbi Melber will be in America from October 17-26.

He will be in Monsey, Brooklyn, and Lakewood, as well as Baltimore in order to attend the ASRM Conference.

He will be meeting with doctors and experts in the tri-state area, as well as delivering exclusive sessions to the Tahareinu course enrollees. Members can reach out to tzvi.goldman@tahareinu.com for more details.

Although American couples can meet with Rabbi Melber via Zoom or phone at any time, they are welcome to schedule an in-person meeting during these dates by reaching out to rabbimelber@tahareinu.com.

Please note that these sessions will be dedicated to issues of infertility and RPL.

As our organization flourishes, our mission at Tahareinu remains the same: Helping couples through the latest innovations in Tahara, OB/GYN, and fertility.
We have made it our mission to travel the world researching the absolute best solutions for common struggles in these areas.

We are looking forward to more in-person conferences returning, and the renewed ability to convey this updated information to our clients.

Tahareinu Hotline and Consultations

Solve your tahara problems, initial infertility, reproductive-area pain or other gynecological issues.

Call the Tahareinu Hotline today.

For ongoing infertility, recurrent pregnancy loss, or reproductive genetic issues, you and your spouse are warmly invited to schedule an in-person, phone or Zoom consultation with our founder and president, Rabbi Yitzchok Melber.

Please **send an email to rabbimelber@tahareinu.com**
Include your first name and location, and briefly describe your issue.

Personal consultations are for more involved reproductive issues. Note the Israel office has reopened for in-person consultations, in line with the country's coronavirus status.

IMPORTANT
Most Tahareinu issues are addressed by our hotline advisors, 13 hours a day, 5 days a week. If you are unsure whether to schedule a consultation, call the hotline first.

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