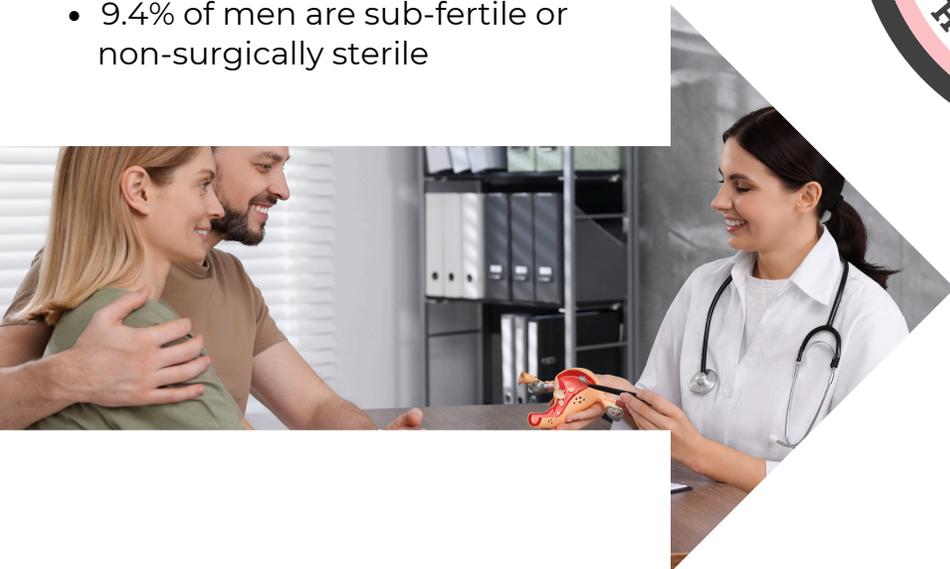


The High Toll of Assisted Reproductive Technologies (ART)

INFERTILITY IS NOT UNCOMMON

- 12.1% of women have difficulty conceiving children due to impaired fertility
- 9.4% of men are sub-fertile or non-surgically sterile



**OPPOSE
IVF
INSURANCE
MANDATE**

H.F. 1758 + S.F. 1961

PUSHED INTO ART

Couples facing infertility are often directed towards assisted reproductive technology (ART) like in vitro fertilization (IVF). These practices pose ethical concerns in addition to the many health risks experienced by both the woman and the child.

EXPENSIVE

One cycle costs \$15,000 to \$30,000, and most couples need to complete three cycles in order to achieve pregnancy—totaling \$45,000 to \$120,000.

Why should insurance companies and all of us who share the financial burden of something with poor outcomes and that is at odds with religious beliefs?

HIGH DEATH TOLL

Fertility clinics destroy more embryonic life each year than Planned Parenthood.

Due to the eugenics practices at fertility clinics, embryos who are deemed the “wrong” sex or “not high quality” are often discarded. Alternatively, some couples may opt to freeze their embryos indefinitely or donate them to science. This results in 92 to 97% of IVF babies not being born alive.

UNHEALTHY

ART practices are not a healthy option for the mother or the child. Lasting impacts may endure.

Children produced through IVF are more likely to be born premature, have low birth weight, and have increased blood pressure. Women who engage ART are at higher risk for ectopic pregnancies, Ovarian Hyperstimulation Syndrome, blood torsion, and more.

ENABLES SURROGACY CONTRACTS

Surrogacy arrangements cannot take place without IVF. Surrogacy commercializes reproduction, which raises concerns about the commodification of women’s bodies. It often exploits low-income women, involves coercion, and poses health risks.

To protect women and children from being bought and sold, Support H.F. 2219: Surrogacy Abuse Prevention Act



Restorative Reproductive Medicine (RRM): A BETTER PATH FORWARD

THE NEED

One in five married women ages 15-49 experiences infertility after one year of trying to conceive. Unfortunately, many women lack knowledge about Restorative Reproductive Medicine (RRM), as most doctors prioritize hormonal contraception or IVF without considering alternatives.



WHY ENGAGE RRM?

Supportive Approach

RRM values a woman's cycle and fertility as health markers, promoting care that is preventative and restorative.

Treats Root Causes

RRM addresses issues like hormonal imbalances, endometriosis, and PCOS to restore health.

Personalized Care

RRM provides treatments tailored to each woman's unique biology and needs. It is not "one size fits all."

Support Legislation to Expand Awareness of RRM

Many couples are not told about options through RRM. But what if we could change that? **We are encouraging the Minnesota Department of Health and Title X funded facilities to include information about RRM in their existing health programs**, including in their materials related to family planning services, maternal and child health programs, and women's health initiatives.

The type of information that will be made more widely available includes:

- Fertility-awareness based methods like the Creighton, Billings Models, or symptothermal
- Research, protocols, and training resources for medical professionals
- Education around hormonal health
- Information about NaProTECHNOLOGY, such as laparoscopic surgery
- Information about reproductive health conditions, including male-factor infertility



Women and couples deserve care that prioritizes health, dignity, and their natural reproductive goals. Restorative Reproductive Medicine is the pro-women, pro-child solution. RRM respects life and dignity, avoiding the unethical dilemmas of IVF and surrogacy. Let's support RRM for a healthier future.



**Urge Legislators to
oppose IVF mandates
and support RRM!**



MINNESOTA CATHOLIC CONFERENCE

To learn more about the impact of ART:
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