

# Benedikt Schwan

## "Ohnekind" / "Withoutchild"

Heyne Verlag / Random House Germany, 2020

Excerpts from three chapters.

### **What is the book about?**

More and more men cannot father children, but hardly anyone speaks about it. Journalist Benedikt Schwan is 41 years old when he realizes that he is sterile. With extraordinary openness, he describes what the unfulfilled desire to have children means for him, his masculinity and the relationship to his wife. Dealing with the diagnosis of infertility pushes Schwan to his emotional edge. But he realizes: The problem doesn't concern him alone. The fact that more and more people want a child but cannot conceive is also a social problem. Schwan embarks on a long, adventurous journey to find out if he can still become a father after all. Among others, he meets an Israeli scientist who is investigating the reasons for the infertility epidemic among men, a Fundamentalist Mormon who has fathered the most children in all of North America, and a young man in Japan who has completely given up his traditional male role. Schwan's report is touching and comforting - at the same time, it is also an appeal to finally get the topic of male infertility out in the open.

### **Who is it for?**

There are not many options men have when it comes to coping with infertility. Unlike women, they are often silent about their condition and do not organize themselves in self-help groups. Needless to say, this book is meant for them. But it is also intended for their partners and relatives as well as being a biographical non-fiction book that wants to inform and advise on this highly relevant social topic. What options do sterile men have to become fathers after all? What are the pros & cons of each option? What are the risks? What is the current state of research and what are the consequences of childlessness for our society, let alone our world? These and many more are the questions are answered in the book.

### **What's the market?**

Books on the topic of male infertility are basically non-existent in English speaking market. The fact that the book has the personal perspective of a victim of this epidemic makes it very special. Experts in the US, for example Dr. Marc Goldstein at

Weill Cornell in New York, Dr. Mike Eisenberg at Stanford Health or Dr. Renee A. Reijo Pera at Cal Poly have commented that there is a big need for such a work. Infertility is also sadly a growing trend, especially among males. Information is sorely lacking.

**Who's the author?**

Benedikt Schwan, born in 1975, has been writing about the newest technology, science, research and media as a journalist for more than 20 years. His byline has appeared in many of the most renowned German on- and offline publications like "Spiegel", "Zeit", "Focus", "Welt" or "Süddeutsche Zeitung". He's also a radio broadcaster and podcaster.

# 1. Fertility Clinic

## At the Doctor's Office.

"What have I gotten myself into?" I shout quietly into the room, but nobody answers. A feeling of powerlessness washes over me. Although I'm inclined to say that those jerk-off booths at the fertility clinic look quite cozy.

In front of me, just behind the door, I notice: a daybed made of black vinyl leather, on which, with a skillfulness not to be underestimated, a scratchy paper foil has been draped, where I will later wipe my fingers off on; a sink and toilet niche separated by a plastic wall with a urinal from a renowned German sanitary brand, because this room is for men only; lastly, a radiator built into a rustic wood cover, which evaporates slightly musty air. Finally, behind the seating area there is a rigidly tilted window that takes a lot of effort to close. Then again, I really do not need any street noise now.

The DVD player doesn't really work. The first porn video that starts playing stars an unsightly blonde woman. My penis doesn't react to this at all, so I change the disk. The choice is limited. I only find one more film, apparently from Brazil, with several women with balloon bottoms on the cover, who kneel down peacefully in front of a man in a black muscle shirt. Okay, I can work with this. A cybersex session via FaceTime had previously been cordially declined by my wife, which I don't blame her for, given the current time - it's shortly after 8 am. "I'm afraid you're on your own," she had commented with a laugh.

I just seem to be unable to put that damn DVD disk into the player. The old one comes out, but the new one doesn't want to stick in. The slot-in mechanism keeps spitting it out. With a fully exposed bottom, a minimally erect penis and pants under my knees I try to clean the disk. It must have been maltreated by hundreds of my fellow sufferers. Finally I get that stupid machine to work and the film starts. I fast-forward to what I imagine to be the best scenes. Just a bit more than fifteen minutes later I finally have filled my cup with a few milliliters of sperm.

"Usually I get more out of it," I try to amuse the friendly nurse who's around 30, as I leave the room and hand in the sample. She smiles for a second and tells me this is more than enough for the test. "Well then, *allet schicki*", all swell, I say in a Berlin accent of which my wife always says it sounds a bit faux.

The waiting room of the fertility clinic, where I sit a few hours later, feels like the saddest four walls in Berlin, maybe Germany, maybe even Western Europe. Two rows of chairs are lined up opposite each other. Towards the window there is a tray with brochures and magazines, bad coffee from a big thermos bottle and some cookies.

On a screen I see advertising for the miracle methods the doctors seem to offer here. I read something about sperm that does not want to move fast enough, but they seem to be able to speed them up quite a bit. Details of the human reproductive system are explained to me, which I never knew about and perhaps never wanted to. For example, I have never really been interested in problems of the cervical mucus which seems to be a very important fluid. But, as the group pictures of the smiling doctors and their patients with happy children on their laps signal: Everything's going to be great. All swell.

During my approximately one hour waiting time, couples enter the room again and again, their faces are marked by a strange mixture of hopefulness and deep tiredness. All of these people greet me friendly, as if we belonged to a sad community of fate. I can see you, these looks tell me, and you can see me. I know how I feel, you know how I feel.

From time to time a notion of arrogance takes over in my mind, because I somehow feel like I don't belong here at all. I don't need all this, I don't want to be one of those people who need to hang onto the last shred of hope. If it doesn't work with the kid, it just doesn't work.

Finally, a woman with three children enters the room. Some people just can't get enough, I almost yell at her. I just think it. Who knows what circumstances might have led her to be here at the fertility clinic today.

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When I finally sit across from the doctor, I notice a feeling of gravity overcoming me. The man seems like a nice guy though, a little older than me.

We talk, which I'm quite fond of, about a few films set in his field of expertise, including the genomics fairy tale *Gattaca* from the Nineties, a science fiction film that is well worth seeing. It revolves around a genetically controlled, nightmarish society.

"If we're not careful, we'll get there," he remarks. Then he magically pulls up my spermogram on his flat screen. The doctor moves his index finger easily over the trackpad.

"Yes, mhh," he says after a couple of seconds and thoughtfully rubs his smoothly shaved chin. "It looks like there's nothing in there."

I feel the blood rush to my head and my heartbeat accelerate. I quickly regain my composure and in my best journalist's voice, usually reserved for my investigative endgame, I say: "What do you mean?"

The specialist explains something about sperm formation in the testicles and the hormones responsible for this. "According to our blood test results, your body is trying to produce sperm. This is also indicated by your hormones. But it just doesn't work. There are no sperm cells in your ejaculate."

All this is followed by a half hour long discussion, which I will barely remember afterwards, during which the doctor tries to communicate the possible causes for my sterility, i.e. my infertility or inability to father a child. "It is most likely genetic." I ask if it is possible that I have been sterile since birth. That is quite possible, he replies.

At this point in my life I am forty-one years old. I remember the many attempts of the last six months to finally get my wife pregnant - and the years before that, in which I had never succeeded to father a child, even if I had been thankful for that at the time.

Next comes an explanation of the possible procedures that could be conducted to remedy my condition. I am confronted with concepts I have never heard before. "We have a very good urologist here," the doctor says. "It would all be performed with you being under general anesthetic, of course."

As the doctor, a trained gynecologist by the way, continues to explain, it is possible to surgically extract sperm from the testicles, at least if some is present. The chances of this would not be so bad, he says. These sperm cells would then be tested for viability, and after the egg has been collected from my wife, fertilization in a test tube would follow. We say goodbye, and he wishes me all the best. He says that I should bring my wife with me for the next visit. As I stand on the street in the chill of this winter day, everything feels numb.

### **Water Damage.**

An extremely clever and really handsome craftsperson from Berlin-Pankow – with a finely twirled moustache and a jumpsuit without a single crease even after 20 minutes of intense chemical mold cleaning - once explained to me that there is nothing worse for a building than water. "It attacks the substance. It doesn't get nastier unless your place burns down."

A few months after my visit to the fertility clinic - having initially pushed the problem into the furthest corner of my head, as it is my mentally unhealthy way - my iPhone rings, showing an extremely unpleasant number. It is the janitor of our residential complex in Berlin-Mitte, where my office is also located. When he calls, something bad has happened. It would never occur to him to just chat briefly on the phone or

message anything positive that way, even though I had just recently given him a nice tip. Following an old Berlin tradition, he only makes friendly conversation in person, if at all.

Without even a mumbled "Hello, how are you?" he breaks the news to me or rather my neighbor's dishwasher hose breaks through the ceiling of my office kitchen. "You have water damage on the ceiling." And there's probably a leak in the storeroom, too.

One can hardly describe the feeling that washes over you when you see your own worldly possessions threatened. When I saw pictures of the last hurricane in New Orleans, with all those people who had to leave their belongings because of the water, I teared up. Now I'm quick to believe I am in a similar situation. The janitor is not making any effort on the phone to calm me down. Water comes in, has nowhere to go and wants to pass through everything that is mine, I say to myself.

When I arrive at the office, it turns out that the situation is not quite as dark as the janitor had implied using his grave voice. Yes, there are stains on the kitchen ceiling, yes, it drips in the storeroom. But the main burden of the damage – the neighbor's hot water hose of the dishwasher above me had indeed burst while he was sleeping the sleep of the just – hit the accounting office below me. When I later visit the tenant there, she looks at me angrily, although my office was only a kind of water conduit and I am completely innocent. The house here apparently isn't cared for enough, which also applies to the maintenance of kitchen hoses including their fittings. Nobody seems to feel responsible for that stuff.

When the renovation company ordered by our property management firm finally arrives to inspect the damage and to take the first countermeasures, they too discover that most of the water flowed directly into the accounting office below me, while almost a whole bucket was held back by the ceiling lamp hanging in my storage room. The expensive designer piece I had installed there is suitable for damp rooms, but this is quite an achievement. An electrician with a friendly Silesian accent, who is later called to check for electrical damage, can hardly hide his amazement: This thing survived the water even without one blown fuse. The lamp is still working fine. These were obviously the best 300 Euros I have spent in the last couple of years.

That evening after the water damage incident I intently listen to my dog eating his food. I am soothed by the sound he makes as he takes bites out of his dry dog chow. It gives off a pleasant, almost sonorous tone when the little dachshund is munching. You want to listen to it like a baby is listening to their Mommy breathing.

Our four-legged friend seems so freed from all the problems of humanity, which somehow calms me down. I let myself fall into my already slightly worn armchair in

our apartment and let out a big sigh. I ask myself why fate seems to be playing such cruel jokes on me. It will take weeks until my office will be in working order again. Karma, maybe? Have I done anything really bad lately to deserve this?

The water damage to my office also lets something else resurface which I had tried to ignore. My sterility. It is suddenly there again like an 18-ton truck from Lithuania in the rear-view mirror, ignoring the speed limit, trying to overtake you on a road in the back country.

My wife had received the news of my situation with great equanimity and almost loving stoa. She even joked that now she would not be the one to blame. "I'll do whatever I have to do," she had said to me when I saw her after my doctor's visit, her voice firm, her gaze unbroken.

At this time, we have been married for ten years. She is the person who never annoys me when we are together, to whom I can entrust everything that happens in my world, even if it's just a fleeting thought. She has never been bothered by my mood swings, hairstyle experiments - at thirty-nine I absolutely had to prove to myself one more time that I can grow long hair - or my sometimes very distinguished taste in clothes. Or even my weight fluctuations.

Every creative idea I ever had, she took part in with no less than full enthusiasm. There is no person who ever believes in me more.

I know how incredibly lucky I am to have her. Despite all the relationship-inherent quarrels that one encounters when living together for so long, which often enough feed off my own egoism and the urge to force my surroundings into a form of inhuman perfectionism.

I have always told her that if we ever were to split up, the life of her successor wouldn't be easy since I know there could never be anything better than what I have with her.

### **Let's Talk About Kids.**

I have always liked children and always wanted to have some of my own, at least "one day". Even though for a long time, I didn't understand how my fellow humans were even able to take on so much responsibility for another creature descending from them. I always had to think of my own childhood and my own suffering in it. I was seized by the fear that I might make the same mistakes that I later accused my parents of.

But as I grew older, I became more and more aware that I was doing something in connection with children for which the English language has found the wonderful verb "to overthink". I brood too much, think too much, worry too much. If all people were like me, the human race would have died out long ago. That might have been one of the reasons why my desire to have children developed so late in life. On my wife's side, children were also not an issue for a long time, because she devoted herself to her education and career.

In addition, it was only when I was about thirty-five years old that I understood that fathers and mothers are fallible humans, indeed must be fallible. A deep bond of understanding has brought me back to my father ever since. In spite of the problems we had with each other, he is making serious efforts to establish a good connection - today perhaps even more so than before - and has always made me feel loved and supported. I owe my perfectionism to my mother, which has always brought me forward in my professional life, and thanks to her I know what goodness of heart and creative self-abandonment are. Accordingly, I don't seem to have been brought up in such a bad way, even though I would never have admitted this previously, especially to my parents.

I always pondered about what my children would look like. I got healthy teeth, but they could be whiter. My eyes are pretty close together, as an optician once told me. I don't like the double chin I still show when I shave off my beard. I know that this is all childish navel-gazing, but this never seems to go away, even after 40 years of age.

In my dreams I imagine a son who has the same dark brown eyes as me (or my wife's blue ones) in combination with dark to medium blonde hair, as I was allowed to have (with some grey corners on the edges by now). My son would probably lose his hair in his twenties, as my father did – the Schwan family baldness always seems to skip a generation.

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I'm not the type for suicide. Okay, it's known to happen that while wrestling with an editor who's driving me crazy, I jokingly tell my wife that I'm going "into the sea now". That only happens when we're in Norway, which we chose as our second home years ago out of love for the weather and the landscape. But because of something like sterility? Kill myself? The worst thing about this situation is that it feels so terribly real. I can't just close it down like an e-mail or chat window or let it go to voice mail like an unwanted phone call.

It is my physical condition, my defect, my imperfection, my blemish. And it is particularly idiotic that I am only now, at forty-one years old, getting to know this - or



better: taking note of it. How far removed can you be from real life if you are wanting to have children at this stage in life? I would be almost sixty when my first child went to university.

A neighbour in Norway, a hands-on Swedish tunnel building guy, once hinted to me that he envied me for not having children. He himself got his first ones too early and against his will, the later ones seem to have been a bonus. I never had this way of dealing so casually with having children. And now my situation is, in a biblical sense, completely screwed up. I will not go and multiply. I'm ending the evolutionary line with me. This may sound like a self-determined step, but it is simply evolutionary-biological suicide.

When I see parents with children on the street, I lately feel a kind of envy and anger at myself that I have not been able to procreate like they did. How hard can this be? For me - very much indeed.

It is of course also a form of longing for an ideal that many of us pursue when having kids. Children then serve, one can unfortunately observe this directly in the trendy neighborhoods of Berlin, Hamburg and Munich, as a form of perfection of the self. They are, especially for my generation, that little piece of perfect life that we are still missing, besides a fancy car, a fancy apartment and a fancy job. It's strange.

And who knows, maybe I was "lucky". For example, what if the kid doesn't "turn out" the way one hoped for? I once read a researcher's estimate that about one percent of all children have sociopathic traits. Surprisingly, depending on the statistics, that's about the same percentage as there are children with bipolar disorders or autism, even though the latter is now significantly overrepresented in the media. Sociopathic children cannot feel empathy - and, what is worse, they seek sadistic thrills and let their anger run wild. The idea that a four-year-old stands next to his parents' bed with a knife to stab them can become real in this context. Sounds like a horror movie, but I've read about it in a US magazine. Or what if the child has a disability? At our age, this is a risk not to be underestimated since we are both over 40.

But these are all purely superficial thoughts. Only when you have become a parent yourself can you even assess what you have gotten yourself into. My best friend Tim, a little older than me, brings me back down to earth when I walk with him to pick up his daughter. It's nice being a dad, it's sometimes annoying, it's - just normal, he says. But it is exactly this normality that I will never experience. What does that tell me?

## **The Beginning of my Journey.**

Maybe that's what I am trying to find out with this book. But it's much more than that. It is an attempt to make myself realize what I want to do in the first place and to learn to cope with my condition. On this adventurous journey which my research will quickly develop into, I will get to know many different perspectives. I will soon realize that not everything is about my personal sterility or the fate of other men who are also affected. I will get to know a social problem that could cause whole societies to break down.

I will go to Japan to see what a dying country feels like, and to Canada to see what it means to have fathered 149 children as a man. In Israel, I will meet a researcher who is concerned about the future of humanity and who is above all a father himself. In Münster, Germany, I will get to know the first approaches to deal with my own medical problem in a very concrete way. In Norway I will be shown what a truly child-friendly society could look like, and in Berlin I will find out whether adoption could be an alternative for us.

A lot of things keep popping into my head. How come we're having fewer and fewer children? What can we do about it? How much should we do about it? How do other men deal with their sterility? How do they cope with all this pressure? And how do their partners feel about it? These are all questions to which I would like to find answers. I want to know if a sterile man is still a "real man". If you yourself answer "no" to this question, you already have a clear reason why male infertility is such a taboo. I want to open it up.

One more thing in advance: I really don't want to coax anyone into jumping into bed with each other and have children right now, right away, because he or she *can do* it. There are enough people who consider a life without children to be a very meaningful existence and who also consider it good and sensible in a social context. However, if someone is capable of having children but decides against them, he or she should also consider people who are infertile and who will possibly remain so for the rest of their lives. It could be a motivation to seize opportunities that may only exist once in our existence. After all, one should not have lived as if one had something to regret.

## 6. Canada: Visit to the Founding Father

### Welcome to the Clan.

If you want to find out what you really want, there is a nifty method I've been practicing for years. First, you should think about it intently. Then, you should talk to somebody who has the exact thing you potentially want.

In the case of Winston Blackmore, this method could hardly be surpassed in its radicality. The man is a preacher for a secessionist group of the Fundamentalist Church of Jesus Christ of Latter-day Saints, or FLDS for short. He took about twenty-five wives according to his religious rite and has fathered 149 children at the moment I am meeting him. Polygamy is the custom of the fundamentalist Mormons in western Canada, because it is their faith. I had read about Blackmore a few years back and at first, I couldn't believe that such a person really existed. Now I just want to know what it feels like to be at the other end of this scale – there's me at one end with zero children, then there is Blackmore with his offspring in the three digits.

If you want to get to the magical Creston Valley to meet the man with the most children in North America, you have a pretty big trip ahead of you if you come from Berlin, as I did. First off, you will fly to the west of Canada, whereby one has the choice between Vancouver and Calgary. I choose Vancouver in British Columbia.

Arriving at Vancouver airport, you then get into one of those jerking and twitching propeller planes, hoping that your flight in the month of March will not be cancelled or have to be diverted due to a snowstorm over the Rocky Mountains, which the ground crew likes to threaten even shortly before take-off.

About an hour and a half out of Vancouver by plane you will reach a small town called Cranbrook, whose airport is standing freely in the landscape as if aliens had just dropped it from the sky. Cranbrook is again located around 100 kilometers from Creston. So get yourself ready for that rental car.

Luckily, my Korean subcompact is available right away.

The Creston Valley is a beautiful place. It is an open, often sun-flooded area, surrounded by high mountains, where all kinds of agriculture and fruit growing is done. (Also cannabis, which was legalized in Canada under liberal Prime Minister Justin Trudeau). There are countless stands with fresh produce right on the streets, a small town center that looks like what a German like me imagines Redneck Country to be like, and trucks, trucks, trucks and trucks that clatter along the main road day

and night. Here it seems to be good manners to put an exhaust amplifier on your pickup truck – because, why not?

### **Mormon Mixture.**

On my first afternoon in Creston, I meet Mary Jayne Blackmore in Bountiful, as the fundamentalist Mormons have christened their settlement, although the place name isn't officially on any map. The brunette, open-faced woman is the second eldest daughter of Winston Blackmore, the man I'm dying to meet, and co-director of the school that the fundamentalist Mormons run here. The road to meet her is rocky - literally. At times, I fear that my rental will get a broken axle. The path leads up and down and through mudpiles, until you arrive at a section of Creston that even the native inhabitants of the town hardly ever visit. "Bountiful? No, I've never been there", they say.

Finally, the Mormon school is right in front of me. I park my little Korean in a pothole. I wave to Mary Jayne who I already know from Facebook. She briefly introduces me to her brother, headmaster of the school, farmer and businessman. Then our conversation begins. Mary Jayne doesn't give out the impression that she suffered mental problems due to the fact that she's one of currently 149 children of Winston Blackmore. On the contrary, she is a nice, thoroughly liberal-feminist woman in her thirties - and, confusingly, not even a believing Mormon anymore. She's more of a spiritual person, she says.

Something is quite peculiar here and it is made clear by a statistic Mary Jayne shows me. A good 60 percent of the pupils of this school are children of Blackmore, the rest are his grandchildren or the children of close relatives. There is currently a large concentration of teenage children, as Mary Jayne reports. She can't help but grin a bit. Dealing with them isn't easy.

She promises to arrange a meeting with her father. I try not to let my nervousness show. Since if this meeting doesn't work out, my trip would have been completely in vain. I leave the school for Creston's "Downtown". On the way back I have to pass by groups of children (presumably from Blackmore) on horses and quads, which apparently make for most beloved leisure activities around these parts. The children don't look poor, but some of them look quite similar - everything else would be strange coming from this narrow hereditary line. Everything feels like being in an agricultural community, kind of hippie-like. One can imagine that it's not a bad place to grow up here, a somewhat simple but nice life.

The next morning, me, kid number 92 and Winston Blackmore are sitting in a white GMC truck with well worn-out buttons for the A/C, which Blackmore constantly switches to 31 degrees Celsius because it's too cold for him. The boyish girl named Annika needs to go to the orthodontist in Cranbrook. And since there is no one else available to drive her in this weather - it snowed during the night and is quite slippery - her father has taken over this job. And I get to go along, which gives me and Blackmore finally some time to talk. Mary Jayne really delivered.

My nervousness gives way to professional tension as we drive through the deep valley between Creston and Cranbrook, always having to avoid slippery spots. Kid number 92 listens attentively to our conversation and is silent, but helps her father from time to time to operate his mobile phone when another call comes in from one of Blackmore's drivers. Annika wears a trucker's cap with a built-in flashlight and looks like she has a passion for farming and animal care.

Blackmore himself is not a large man, more on the broad side of things. He looks like a well-fed, stocky cowboy, with a dirty baseball cap and a farmer's smell. He's a hands-on kind of guy.

And he is charming - you can really imagine that he can wrap women around his finger. He himself is happy that the "ladies" seem to like him, as he says. His number of children makes this quite clear.

Currently they span seemingly every age group, from infants to guys and girls in their mid-thirties. He has electricians among his children, plumbers or carpenters. Basically, he could rebuild the world with only his family, it seems, should doom's day arrive. (Which is not an uncommon occurrence in the Mormon faith: Blackmore has, according to one report, donated money tens of times for an impending apocalypse, and before the millennium, the fundamentalists were so afraid that they fathered a few extra children and increased their already big crisis stock of preserves).

One of his daughters is the family historian and keeps the calendar up to date with all the birthdays. Blackmore himself is not on Facebook, but the kids are romping around in several WhatsApp groups. After all, you have to keep up with the times, even in a Mormon household.

Kid number 92 is fifteen now, so over the last decade and a half Blackmore has been extremely productive in terms of reproduction. This was the period after he and his clan broke away from Warren Jeffs' sect. Jeffs is the prophet of the FLDS, now incarcerated in the US for child abuse.

What has remained in Bountiful now is the Blackmore Clan in Creston, and a little bit of what's left of the FLDS. The fundamentalist Mormons originally came to Canada because they hoped for more freedom here than in the US - and by God, it worked. For years Blackmore was able to have more than twenty women at once and to live more or less openly as a polygamist. And he still does so today.

It is hard to figure out how many of the original FLDSers, who follow the guide of Warren Jeffs, are still around, because they are closed off people. While you can visit the Blackmore family, if you ask nicely, the "Warrenites", as Blackmore calls them, are hiding behind self-erected walls. Picket fences to be exact.

Blackmore, in talking to me, seems to wonder why he waited so long to separate from the FLDS - their leader Jeffs says he had thrown Blackmore out for insubordination - because the step was highly successful. Now Blackmore is the boss himself and actually his own prophet in a way. That seems to feel good, even though I can't spot a halo hovering over Blackmore.

Jeffs had told him that within five years of being kicked out, he would be lonely, childless and without a dime to his name. Apparently, that didn't happen. (Although at the time of my visit, Blackmore is in a tough battle with the tax authorities of the state of British Columbia. It pertains to over two million Canadian Dollars emerging from the division of the Mormon empire. Blackmore has to sell properties and/or file for bankruptcy with some of his individual companies, he says.)

### **Go Forth and Multiply!**

Blackmore doesn't really want to explain the religious background of his large number of children. Whenever I ask him questions about it, he simply changes the subject.

As far as I understand this cryptic religion, the fundamentalist Mormons believe that there are many, many souls out there, waiting to be born. And since the Mormons, in turn, hold themselves to be the last and only true religion, they want to be the ones who bring these children into the world. And polygamy is a great method to do just that.

A close companion of Joseph Smith, founder of Mormonism (1805 - 1844), once said that it's important to avoid for the desired souls to go into the bodies of Hottentotts. (Possibly a reason why black people were discriminated against by the Mormons for a long time).

Blackmore's father and grandfather both died early, just over fifty years old, of leukemia and pneumonia respectively. He himself is sixty-two at the time of our meeting and is apparently happy to have reached such age.

For Blackmore, children are not a burden, but an asset. This may of course also have to do with the fact that he has a sufficient number of women to do the job of parenting for him. He's said to have had up to 25 wives at a time. Currently the number seem to have fallen below twenty. (Numbers are only rumored, even Mary Jayne remains mute after repeated requests for comment.) In fact, according to Canadian law, Blackmore isn't even legally married. Before God and the country he is - drum roll please - officially divorced.

I want to know how his relationships work in practice. How does he meet up with his partners, is it all a big merry go round? Group sex at least doesn't exist among fundamentalist Mormons, or so he says. I have heard something different from Canadian journalists, though. Whatever happens in the bedroom: the Blackmore clan doesn't like to talk about it. I at least imagine it to be quite interesting. Radical religious groups are often also radical when it comes to sex.

Concerning politics, Blackmore aptly reports that he is actually more of a Democrat than a Republican and even a "liberal". He flies his sports plane all the way to Vancouver and had a good friend who later turned out to be gay. The mainstream Mormons are still struggling with the topic of homosexuality, it doesn't seem to fit into their idea of man. Blackmore admits that he struggled with it himself, but then noticed that his homosexual buddy accepted him as a friend without ifs or buts despite his own otherness in terms of polygamy.

Blackmore and his family have their own little world, but it still interacts with the outside. They sell fruit and vegetables, milk and cheese, raise cows, export wood or process it themselves in their own little sawmill to make fence posts, which are then sent to Calgary and elsewhere in the country.

How it could even be possible to pay enough attention to all the children Blackmore has is a mystery to me. Mary Jayne says that her father is managing this better than before, especially as he ages. He used to have much less time for his children. But if you have enough brothers and sisters in your own age cohort - the children apparently came every nine months or less, some even around the same time - as much as mothers and "sister mothers", as the wives of polygamous Mormons call themselves in relation to the children, you may not notice it any further. And every morning, from Monday to Sunday, the younger children are allowed to have breakfast with Blackmore. It's a ritual that is probably meant to ensure that the contact doesn't totally break off. But the fact that there is a fierce competition for his attention

cannot be ignored. How else could it work? There are simply not enough hours in the day.

\*

In any case, Blackmore does not give the impression of being out of reach for his children, on the contrary. And he visibly enjoys it when they gather around him, as I could see in a television report that was broadcast a few years ago.

It really is a world of its own. I am myself fighting to father at least one child, and Blackmore is now at number 150, who is in their mother's womb right now. He doesn't really know yet whether this will really be the end of his long and productive procreation, but he still wanted to reach that round number.

Before heading back to Creston, we are going to have a meal at a fast-food chain. I eat Poutine, the Canadian national dish from Quebec, Blackmore eats a chicken salad, because of his weight, he says. Kid number 92 chooses fries with chicken nuggets. We drink water, and Blackmore tells me that on his last trip to Europe he only drank bottled water because he didn't trust the water quality from the tap.

On the way to my hotel we pass a truck that has had an accident and has been parked on a wood distribution site which Blackmore has a business relationship with. The Mormon preacher offers to provide the driver with a free tire. I am not sure if this is a demonstration of his goodness of heart that's just intended for me. What is clear, however, is that this job does not count towards Blackmore's 150 hours of community service, which he has to complete as part of a recent conviction for polygamy - which is, yes, also banned in Canada, just like in the US. The Canadian state had to appoint several public prosecutors until the verdict was handed down. Blackmore got a lucky break again, being sentenced to only house arrest, which suited him just fine. A journalist from British Columbia, who has accompanied him in the media for years, is still upset about this. Religious freedom is a precious commodity in North America.

Blackmore is working on a book himself and hopes to get help from me so that it can also be published in Europe. Let's see, I say evasively. He can imagine going on a book tour, speaking in front of people about his experience. He says he's never had a problem with that before. And indeed, his daughter Mary Jayne was right: the man with the most children in North America can talk your ear off. In any case, in the end I don't know whether I'm dealing with the most charming man in Canada or a hateful anti-feminist. Neither his family nor he make the impression of the latter. And in the end he says he doesn't know anyone who lives a better life than him. Maybe just as good, but never better, he adds.



If I was a fundamentalist Mormon myself, I'd probably have a problem. I couldn't perform my duties as a sterile man. Blackmore knows of such cases and thinks that it would then be possible, for example, to accept a widow with her children - preferably as a second wife. I will think about it, I say, although the thought of conversion to Mormonism is as foreign to me as planet Mars.

### **The Fruit of his Loins.**

On the flight back to Vancouver I first meet a venture capitalist who wants to grow cannabis in the Creston Valley (but surprisingly hadn't heard of Winston Blackmore yet), who is the father of a daughter and would like to have more children if his wife would play along. Afterwards I get into conversation with a catholic engineer for a consulting company that cleans up mining dirt. He worked for the former uranium mining company Wismut in Saxony, among others, and has, impressively, fathered six children himself - after four boys, two girls were conceived. The polygamist Mormons seem to radiate out inspiration to travelers when it comes to the joy of having children.

I spend a few more days in Vancouver to do further research, because this is where the local newspaper *Vancouver Sun* is based. Its columnist, Daphne Bramham, knows more about Blackmore than practically anybody else. She is mainly interested in the matter for feminist reasons, but is also worried about the many children. For a long time the fundamentalist Mormons practiced to wed minors, even though Blackmore says that this is long gone.

Life in the sect is harsh, if you want to get out of it, at least that's how it was under Warren Jeffs. He personally threw many of his competitors out of the FLDS and then married their wives, including the adoption of their children. Blackmore today is much, much more moderate; he is a kind of soft version of the dreaded jailed prophet. You can already see this from the fact that daughter Mary Jayne, despite her areligiousness, was not rejected from the community and even works in the clan's school. At the same time, the rate of polygamy within the group as a whole, which is so important for the fundamentalist Mormons, seems to be falling. Some have no more than two wives, some only one. The tradition could even die out in Bountiful, although it is a central element of this strange faith.

What I take with me from my journey is mostly this: I've thought too much about having children without acting. Family is everything to the Mormons, but to me, mostly nothing apparently. You can condemn their way of life and laugh at this craziness, which probably only religiosity can bring out in people. But, damn it, how satisfying it must be to be able to rebuild your world just by the fruit of your own loins?

And here he is, Winston Blackmore, a not too tall stocky cowboy, driving his old white Chevy truck to Cranbrook through ice and watery mud, with his kid number 92 in the back seat, as if it is the most normal thing in the world. I can't suppress a certain envy. No, I wouldn't want to have fathered more than a hundred children. But two or three of them would have enriched the life of my wife and I. I would have liked to have been just as carefree as Blackmore in my younger years when it comes to children. With him, they're just part of life.

Our European-Western world, which tries to plan life meticulously, is a curse in this sense. Our absurd emphasis on security prevents us from following our own destiny. Because: Life can be simple and complicated at the same time. We must let it happen instead of constantly trying to prevent it.

## 15. Get Yourself Some Help

### The Process.

In the following chapter, I will describe what happens, when you, as a sterile man, have finally decided to try out possible treatment options open to you. *Nota bene:* This is not a medical consultation, and my explanations do not claim to be complete. Instead I will be giving you some initial tips and suggestions so that you may not be completely clueless when you take your first steps. There's a lot of misinformation out there and people tend to not ask the right questions. I want to encourage you to do that. Above all, you should not be ashamed of what's going on with you. Many men are like you.

There are many myths and imponderables when it comes to your manhood (here I explicitly include your testicles, ie. the scrotum). Most of us don't like to be touched there unwantedly, also not by doctors, and the thought of medical procedures freaks us out. As male fertility expert Professor Schlatt from the University of Münster told me: There is a reason why andrology as a discipline is scientifically less advanced than others - men don't like to participate in lab work as guinea pigs. Which, to be honest, I can fully understand.

The whole process usually begins with you getting the diagnosis of being infertile. Sounds strange, but many men nowadays learn this information at an amazingly late stage in life. In addition, a functional disturbance – hormonal or otherwise physiological - may have occurred in your body without you taking notice. Your overall health situation should also not be ignored. For example, it has been observed that particularly active (competitive) athletes can have just as much trouble conceiving children as people who are on the verge of starvation. This body of ours that we carry around is very adaptable and always takes care of what is necessary - and that is, in case of doubt, keeping its system alive, while turning off a lot of unnecessary processes. So the sperm production can certainly be reduced by the brain to save energy, as science tells us.

There are also crystal-clear behavior patterns that affect your fertility. These are not so much the usual clichés like too tight trousers, wrong underwear or being an overly active cyclist while using an all too firm saddle. Even a mobile phone worn too close to the testicles does little or nothing (don't do it anyway). What has been scientifically proven is the negative effect of smoking on fertility, both in men and women. I myself remember with shame that I used to smoke a little bit while attending music clubs as a youth - do I have to have any pangs of conscience because

of that? Anyway, just stop doing it, for yourself, your environment and your offspring. (Your wife or girlfriend should of course do the same.)

Furthermore, no external testosterone (for muscle building and similar cosmetic purposes) should be taken unless it is medically prescribed, i.e. necessary. It has a clearly negative effect on sperm production. Also reduce your alcohol consumption (which can never hurt for many other reasons) and check your weight. Too much on the ribs or in the belly can have negative hormonal effects, which in turn is not conducive to sperm production either. You should also rethink your sex and masturbation behavior. Although the body's ability to produce sperm cells is hardly affected by frequent ejaculation, the filling level of the epididymis decreases with frequent ejaculation - and thus the amount of sperm in each ejaculate.

The average sperm quantity of western men is between forty and 300 million sperm cells per milliliter. However, some heroes of manhood may have 1.2 billion sperm cells flowing through their spermatic duct in a single ejaculation.

The pure testicular mass also has an influence on the number of sperm per ejaculation. It is known that certain great apes have comparatively small testicles because they have to produce fewer sperm. Their social structure with few males, who have a large "harem" of females, makes it unnecessary for their sperm to prevail in terms of quantity, because competing males do not get too close to their female mates so easily.

I once read a statistic which stated that a normal man produces more than 500 billion sperm cells in his life - an average of one billion of them per month. That sounds like an impressive performance by our body - even if it seems disproportionate at first glance, from a purely logistical and mathematical point of view. Why are there so many sperm cells at all? Considering the fact that a woman has only two million follicles at birth, from which less than 500 will mature into eggs that can be fertilized in her lifetime until the climacteric, this seems like biological overkill. But this is not the case.

The numerical ratio has to do with evolution - and the competition between sperm cells for the egg. The more sperm cells make their way towards the egg, the greater the chance that fertilization will actually occur. If some of the swimmers are not up to the task, e.g. malformed (morphology) or too immobile (motility), there are still some who can do the job - at least that's how it should be. So those numerous sperm cells ensure our survival. It's very bad indeed, when there are no sperm cells at all, too few of them, or some which don't make it into the ejaculate.

## **Detect Sterility.**

We have learned that most infertile men do not know that they are sterile for a considerable period of their lives. Almost always it only comes out when procreation does not work. There are no mass examinations of the sperm quality of men at a young age (which I would urgently argue for). In Germany, there was a time until the 90s where we had compulsory military service at age 18. With it there came a medical examination. A resolute medical officer would literally grab us by the balls to detect syndromes such as Klinefelter, which makes men sterile. (There are indeed men who walk around with that condition until a very old age and it has never been diagnosed in them.)

That means in most cases, you will only learn about your infertility when you are unsuccessfully trying to make a baby. If that happens, you will probably – that's still how it goes - initially assume that the problem is on the female side, which of course could be true. In Saudi Arabia there are said to be some "princes" who first try out eight to ten women before they realize that the difficulty is with them. Accordingly, you and your partner will go to a fertility clinic, and there they will examine you and your partner to see who really has the biological problem.

Then you'll see what's what. If only the sperm quality or sperm concentration are not adequate, it may be possible to do something hormonal, i.e. with medication. You will receive various therapy options from your doctor. Ask him or her what exactly is going on. Do not be shy, however unpleasant the subject may be to you. Only correct information gets you to your goal.

But make sure that you really get a specialist. These are often urologists with a specialization in andrology, i.e. the study of male reproduction. Calling himself or herself an andrologist is an additional title that requires additional training. In addition to urologists, the title is also given to endocrinologists (who help you with hormonal problems) and dermatologists (the subject of sperm was once treated by dermatologists, believe it or not).

In quite a few fertility clinics, only gynecologists are employed. They then outsource the work on men to external practices. Make sure that the doctor is a consummate professional. Internet portals with doctor's ratings can help you here, but asking around among friends is often not a bad idea. (If you don't want to address your situation head on, ask for a good urologist who is mainly concerned with the treatment of men).

If, as in my case, azoospermia is diagnosed, the causes will be investigated. The chances of getting answers are not always high. But it's worth a try. They'll take your

blood and run a genetic analysis for specific factors. Your hormones will be checked. There will also be a direct testicular exam. If your spermatic ducts are missing (due to cystic fibrosis) or if there is some other condition that causes sperm to form but prevents sperm from being released into the ejaculate, there are relatively simple procedures, all of which involve needles to extract sperm from the body.

So it is still possible that your sperm cells get into the epididymis, but not from there into the ejaculate. In this case, PESA, the percutaneous epididymal sperm aspiration, would be considered. In this procedure, sperm cells are aspirated from the epididymis. However, the epididymis is then destroyed.

If, on the other hand, you are not a candidate for PESA and there are no abnormalities in genetic analysis and testicular examination and yet there are no sperm cells in the sperm, you are unfortunately none the wiser. It is possible that there are hormonal therapy approaches that at least lead to an increase in the number of sperm in the testicles, which increases the chances of success of direct sperm extraction.

Such a treatment can take half a year. With a lot of luck, it can even happen that suddenly there are sperm cells in the ejaculate again. If this is not the case, which is likely, you will eventually be faced with the decision of whether to have sperm taken directly from the testicles. There are three common methods for this: the TESE the M-TESE and the TESA.

TESA is, at least according to a 2006 study by Ron Hauser and colleagues from the Institute for the Study of Fertility at the Tel Aviv Sourasky Medical Center, which is associated with the University of Tel Aviv, the worst method of all three. Testicular Sperm Aspiration involves the retrieval of sperm from the testicles using negative pressure and a needle, which can also be performed by non-surgeons without the assistance of an anesthetist. However, both the quantity and the motility of the sperm cells extracted this way are often below average. In addition, they do not hold up as well during freezing. Since your doctor is almost completely blind when trying to extract, you may be lucky or not.

Therefore often only the TESE, alternatively also the so-called M-TESE with microscopic analysis, is proposed. The TESE - short for testicular sperm extraction - is a process that came out of biopsies, i.e. the examination of tumor tissue. It had been found that testicular tissue extractions also included sperm cells that could be used for artificial insemination.

In Münster, the head physician of the andrology department, Prof. Dr. med. Sabine Kliesch, has been relying on M-TESE for over ten years. She had become acquainted

with the procedure in the United States and initially operated it in parallel to TESE. It turned out that the yield of sperm you could get with M-TESE was on average 20 percent higher. The advantage of M-TESE is that it is a targeted procedure. While in the case of TESE, tissue is simply removed from various quadrants of the testis in order to check later in the laboratory whether one has "hit" the testicular tubules (tubuli seminiferi) in which the sperm are located. In the case of M-TESE the surgeon can see what he or she is doing through an operating microscope.

The M-TESE lasts about two hours and takes place under anaesthesia, as Kliesch explains to me, firstly because this is more comfortable for the patient, and secondly because the man has to lie completely still. The testicle is first exposed surgically to open up a window for the operating microscope. The surgeon and his or her assistant then search for the testicular tubules and make the necessary incisions. Whether sperm cells are actually found is still unclear at this stage - they must first be isolated from the tissue, which is a task for the laboratory, which uses mechanical methods and enzymes to achieve this.

According to Kliesch, the probability of discovering sperm in a typical azoospermia, as in my case, is about 50 percent - in men with Klinefelter's syndrome it is lower and depends on age. One always hopes to extract as many sperm cells as possible - but it is quite possible that only five, ten or twenty are found. Those are incredible small numbers, if you remember how much sperm cells are in a regular ejaculate. These lucky sperm cells are then used for artificial insemination, the rest is frozen for a possible later pregnancy of the partner.

The hormonal effects of M-TESE have not yet been conclusively researched. One must be aware of this. By cutting out testicular tissue, those areas that produce testosterone can also be "caught". Then a (possibly lifelong) administration of testosterone would be necessary. In Münster, Kliesch and her team are currently working on a study that will use interviews with former patients to find out how often this actually occurs.

Basically, it is important to find an experienced surgeon; many urologists with small practices just do the normal TESE, but are not always extremely skilled in performing them. Therefore, you have to ask them point-blank. At Kliesch's practice in Münster an M-TESE is performed three to five times a week - often even more frequently. Many patients - also from abroad - travel to Westphalia only for the M-TESE and then have the artificial insemination carried out in their own local fertility clinic.

ICSI, a form of in vitro fertilisation (IVF), must then be carried out. With this so-called intracytoplasmic sperm injection, the sperm is injected directly into the egg cells - with a micro needle. This means that the lonely sperm cell does not have to find

its own way to the egg, which it would have to do in the simpler IVF. Here, the eggs and sperm are combined in a test tube - the fastest sperm cell wins. This is the same as natural selection. The sperm cells collected by (M-)TESE, on the other hand, are not yet ready to take part in this evolutionary race (they twitch but are not yet fully developed), so ICSI is the safer bet.

*At this point the German original offers a section where the reader is provided with further hands-on information in regards to costs and expenses as well as insurance coverage for fertility treatments. The English version could provide such a section as well, with adaptations to the specifics of each country where the book will be published in. (USA/UK/Canada/Australia...)*

### **Let's Get to Work.**

If you have decided to be treated for your sterility, your rule should be: don't wait, just do it. This is also what the fertility expert Stefan Schlatt says. There are two reasons for this. Firstly, fertility also decreases in men with increasing age, and the chances that (M-)TESE, ICSI & Co. will have a positive result decrease.

Sure, men can become Dads even when they're eighty. However, this is associated with health risks for the baby due to the poorer sperm quality - a field that has only been researched to a limited extent. Apart from that: Would you like to be a father who should more likely be a grandfather? As life-affirming as being a late-stage Dad may be, it is not pleasant for children when their father can hardly keep up with them.

Secondly, your wife is not likely to get any younger either. As she approaches the big four-oh, you need to pick up an extra spurt of speed. The younger and healthier she is, the easier in vitro fertilization will be. And the hormone treatment may not have to be as drastic as with an older woman.

Apart from this, pregnancy itself does not become easier with increasing age, complications and miscarriages are more likely to occur. Schlatt, the scientist from Westphalia, has one central advice here: If we all fathered our children in our mid-twenties, we would probably not need much at all of the increasingly used reproductive medicine. For this to happen, however, Western society would have to be a lot less hostile to children. And unfortunately, this won't change quickly, even though our survival as a society literally depends on it.



Finally, some practical information about the procedure itself, which I have taken from a leaflet my doctor gave me. This concerns a "simple" TESE, which many urologists perform directly in their practice. This procedure is also always done while being under an anesthetic - so you will have to be seen by an anesthetist. Either the anesthesia is local, i.e. limited to the patient's privates, or a light general anesthetic is given. All this serves to avoid pain. I would probably prefer general anesthesia so that I would not have to look at the operation.

Before the procedure, the patient must fast from midnight the previous day, this applies to both solid and liquid food as well as to any tobacco addiction. Eating and drinking again is allowed only four hours after the procedure. Most doctors will ask you to remove your pubic hair from the scrotum onwards before the surgery. I am sure that this can also be done at the practice, if you feel uncomfortable shaving yourself.

A TESE is a serious operation. Accordingly, you should have someone to pick you up after it; the usual anesthetic and intervention-related restrictions (no driving, no operating heavy machinery) apply here at least on the day of the operation. It is also to be expected that there will be a longer period of waking up and observation after the procedure, which may last one or two hours. Therefore, please take the day off on the day of the operation.

On the following day you will be asked to visit the practice again. Your urologist will then check whether everything is OK and discuss the first results with you. About a week after the operation, the stitches will be removed in the practice if no self-dissolving sutures have been used.

In summary: A TESE isn't that hard. At least as long as you've decided to have it done. But remember: It's always just the beginning of a long process that, with luck, will lead to fatherhood.