

The BABY BOOMER



BY **Rhona Lewis** PHOTOS **Ouria Tadmor**

Dr. Baruch Brooks, recently retired halachic supervisor and embryologist at Shaare Zedek Medical Center's IVF unit and scientific director of Zir Chemed, is one of the first addresses for fertility issues in the Orthodox world. A scientist and Torah scholar, he has merited using his wisdom in Torah and science to **bring the joy of a child's laugh** into the silent lives of hundreds of couples

Mishpacha



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ost people sleep through the night once their kids do, but Dr. Baruch Brooks still wakes up for babies — the unborn ones, the ones he helps bring to life.

Dr. Brooks — who sees himself as a *shaliach*, an extension of the father-mother-G-d triangle needed to create a baby — has spent the last two decades as embryologist and halachic supervisor at Shaare Zedek Medical Center's IVF (in vitro fertilization) clinic. By night he is the scientific director of Zir Chemed, which offers counseling and medical services within a halachic framework to religious couples faced with infertility.

It wasn't easy to reach the decision to leave his position at Shaare Zedek and take early retirement, but maybe now, at least, he'll be able to get the sleep he's been deprived of for years. Dr. Brooks has left his halachically run lab in good hands, and now spends his mornings in kollel. He still counsels couples at night, fusing his vast knowledge of Torah with that of the complex and often confusing dimension of infertility. "I was longing

to get back to serious learning, but knew I still needed to be involved with fertility issues," he says. "Bringing babies into the world has become an essential part of my life."

Here in the unpretentious dining room of his apartment in Jerusalem's Givat Shaul neighborhood, many couples have sat, cried, and hoped, as he professionally but tenderly led them through the maze of options and treatments, any veneer of English reserve vanishing into warm, fatherly concern. His days in the laboratory might be over, but he's still one of the first addresses when it comes to helping couples become parents.

Couples entering the foreign realm of fertility treatments face a confusing search for the right professionals and most effective procedures, accompanied by a palate of emotions from hope to fear to anxiety. For religious couples, there are additional challenges: which procedures are

permitted by Jewish law and which are not? How long should a couple wait before beginning treatment, and where should they go?

Dr. Brooks's wise, competent, and compassionate counsel is often the first stop on the journey.

"A doctor is obligated to give immediate treatment to the patient," Dr. Brooks says, discussing his counseling approach. "As a scientist and halachic mentor, I don't have this obligation, so I'm able to approach the problem differently and look at the issue as a scientific puzzle."

Five at a Time Dr. Brooks sees his role in this realm as a Providential payback for the blessings he's received in his own life — a life that took him from a secular childhood in northeast London, to a deep connection with Torah, and to the miracle of a



Where halachah and science meet. Dr. Brooks shows the Bostoner Rebbe ztz"l around the lab, and consults with Rav Yosef Padwa and Dayan Aharon Dovid Dunner *shlita*



Mishpacha

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large family and the opportunity to move forward in Eretz Yisrael.

Young Barry Brooks's parents raised him in a community that managed to impart strong Jewish traditions while steering clear of Orthodoxy. Education was paramount, and most of his high school graduating class went on to become doctors or other medical professionals. Barry chose the field of academic science, because, as he says, "I didn't want to be like the other Jewish boys."

Despite his academic aspirations, the University of Cambridge didn't accept him, because he was unschooled in Latin. Instead, he applied to the University of Sussex — a hotbed of radicalism even in the 1960s — where he was sure he would succeed in throwing off all shackles of Judaism. But his plans went awry from the very start: he was thrown into Hillel House and the company of Jewish youth. Then in 1967, shortly after his studies began, the Six Day War broke out and his Jewish identity began to fully emerge. "For the first time in my life, I

realized I was a Yid. Israel was being destroyed and it frightened me."

Two months later, he met Roizel, a charming young woman from a religious home who was attending the Brighton College of Education, across the road from the university. "Our decision to marry, coming a short three weeks after our first meeting, shocked both sets of parents," recalls Dr. Brooks. With respect and gratitude to his parents, who had sacrificed so much to put him through university, Barry Brooks delayed his marriage for two years to complete his degree.

After Barry graduated with a degree in biochemistry, the young couple moved to London, where he studied for his doctorate at the Institute of Psychiatry, a world-leading center for psychiatric research. The couple's commitment to Jewish life was growing, and although London in the '70s had little to offer those thirsting for Torah, the Brookses continued in their spiritual path — a journey marred only by waiting for the blessing of a

child. Three years later Faygie was born, and Dr. Brooks was granted a tenured position at the Westminster Medical School of the University of London.

Almost four years later, Faygie was still an only child. In an attempt to tilt the heavenly scales in their favor, the couple became house parents (foster parents, in American parlance) for the Norwood organization, which placed Jewish children suffering from neglect or abuse. Roizel Brooks became a surrogate mother for a challenging group of abused children ranging in age from 5 to 15. The position as house mother must have worked as a *segulah*: within a short while, Roizel became too blessedly ill to continue.

"This was still the early days of ultrasounds," explains Dr. Brooks. "There were two ultrasound machines in the whole of London, and they each took up half a room. At 14 weeks Roizel was told she was carrying twins, possibly triplets. At 16 weeks this was upped to triplets, possibly quadruplets."



“A miracle like five healthy babies can’t happen without doing something deep to a person.” Dr. Brooks with his unexpected blessings



From 17 weeks onward, Roizel was hospitalized at the University College Hospital in London while Dr. Brooks and Faygie moved in with Roizel’s parents. At 30 weeks, Roizel was told that she was carrying quintuplets. She was told that she would have to carry for another four weeks to give the babies any chance of survival. Two days later, Roizel went into labor.

And yet ... against all odds and despite severe respiratory distress, all five babies survived. The two baby girls each weighed 800 grams (1 pound, 12 ounces). The three boys each weighed a kilo (2.2 pounds). To get an understanding of how small this is, Dr. Brooks produces a picture in which a nurse is measuring her thumb against the baby’s arm: they are similar in size.

“A miracle like that cannot happen without it doing something deep to a person,” Dr. Brooks says. “At the time, both Roizel and I decided that we would one day repay Hashem for this miracle. I imagined I’d donate an incubator to the hospital. I never thought that 14 years later, through my work at Shaare Zedek and Zir Chemed, I’d have the opportunity to thank Hashem daily.”

When the quints finally came home at ten weeks old, all the gratitude in the world could not obviate the difficulty inherent in raising them. For the first year, normal life ceased. There was no government social service structure to offer help. The Southgate community, where the family now lived, tried to be helpful, but the burden of work fell on Roizel.

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At three months old, the quints went through 60 diapers a day

“I was attending to the babies 24/7,” says Roizel. “The press was constantly knocking on the door, and while today companies would be vying for us to use their products, we received very little benefit for the exposure we agreed to. Disposable diapers had just hit the market, but they were too expensive. I went through 60 toweling diapers a day.” The babies’ underdeveloped immune systems left them prone to myriad illnesses, and for the first two years, all five were in and out of hospitals.

“Life was a long, dark tunnel and yet I wanted it to be normal,” she continues. That striving for something better and bigger spurred the Brookses to grow further in their commitment to Torah learning. “Isolated from the bigger Jewish communities of Hendon and Golders Green, we decided to hold a minyan in our home on Shabbos, and we always had

bochurim over for Shalosh Seudos. In addition, I started tutoring children with special needs for two hours in the evenings. This kept me sane because it showed me that, however heavy my workload was, my children were normal and healthy. It was my way of giving back to Hashem.”

Finally, when the quints were three, relief came on two fronts. The headmaster of Avigdor Primary School, Rabbi Chaim Warshawsky, arranged for high school girls from neighboring Hendon and Golders Green to come in regularly. And one of these girls put Dr. Brooks in touch with his first mentor, Rabbi Joseph Freilich *ztz”l*, who was already involved in teaching Judaism on university campuses.

“He turned my life around by introducing me to *yeshivishe* learning and true Torah *hashkafah*,” says Dr. Brooks. “Roizel encouraged me

to go from a full day at work straight to Golders Green to my learning program in Yeshivas Dvar Yerushalayim.”

The Move It dawned on Roizel, seeing how happy her husband was while he was learning, that perhaps they should consider a more spiritual existence, a kollel lifestyle in Eretz Yisrael.

“I knew my husband wouldn’t listen to me,” Mrs. Brooks says, “so I asked two of the *bochurim* we regularly hosted to suggest the idea.” This suggestion, coupled with timely visits to London by Rabbi Mendel Weinbach, Rabbi Nachman Bulman *ztz”l*, and Rabbi Naftali Elzas, inspired Dr. Brooks to consider abandoning the financial security of London for Israel. Barely had the decision been made, when Roizel discovered that she was once again expecting. The couple sold their home and invested the money that remained after paying off their mortgage, but no matter how they worked the sums, they realized they would have difficulty making it financially in Israel.

“It took a lot of *bitachon*, but we knew our expenses would be minimal in the closed-in community in Zichron Yaakov where Yeshivas Ohr Somayach had opened a kollel,” says Dr. Brooks. “Roizel left behind a ten-room house for an Amidar apartment with one kitchen cupboard. Bread was delivered two or three times a week, and we had no phone.”

The family remained in Zichron Yaakov, where two more children were born, for two years, until the kollel was closed due to lack of funding. However, full-time learning, especially with his learning partner, Rabbi Dovid Speyer *a”h*, had laid a foundation of solid halachic knowledge for Dr. Brooks.

The family moved to Jerusalem, where Dr. Brooks initially found work at Shaare Zedek with Professor Avraham Avraham, researching and developing the very drugs that he had worked on in London. Four years later, the government subsidy that financed the program ran out.

“Roizel was expecting our 11th child and I had been to interviews at all the universities, when Rabbi Yaakov Strauss, then rabbi of the



“I figured that if someone was calling me at two in the morning, he also knew the time. I was never on vacation”

hospital, told me about plans to open an IVF department.” Agreement to open the unit was contingent on finding a full-time *mashgiach*, not just a religious man with a beard, but a professional who would also be part of the intricate scientific workings of the lab. And so, Dr. Brooks retrained as an embryologist. “My lab experience and PhD, coupled with the halachic knowledge that I had gained through intensive learning, qualified me for the position of *mashgiach*. By December 1990, I realized that my life had been changed. I could finally give back. And that has been my driving force for the last 20 years.”

Supervision Necessary Dr. Brooks’s extensive education, years of research, and hands-on laboratory experience primed him for the responsibility of handling all the biological material in the lab and every aspect of the IVF process. This included preparation of the embryos, their correct labeling (an awesome responsibility with great halachic implications), and ensuring their proper growth until the point of transfer. Extra embryos are frozen in liquid nitrogen at a temperature of -196° Celsius (-320° Fahrenheit) for future use.

Shaare Zedek’s IVF unit was a trailblazer in the area of supervision when no one else thought it was necessary. From a halachic angle, one of the first conditions for technologically induced conception is the quality of supervision over the biological material.

Today, a woman undergoing IVF treatments anywhere in Israel can request an “escort,” a religious woman trained in the intricacies of IVF whose job is to guard the biological material during all medical procedures, so that

no mix-ups occur. These women are trained by the Machon Puah organization, which, like Zir Chemed, gives fertility counseling to religious couples.

In his clinic, Dr. Brooks was responsible for making sure the lab’s functioning didn’t merely minimize errors — but eliminated them. From a Jewish perspective, to create a foolproof lab there must be a scientifically knowledgeable and G-d-fearing *mashgiach*.

Due to the enormous responsibility for every process that took place in the lab, if Dr. Brooks wasn’t there, the lab was locked. Only he and the hospital rabbi had a key. “I was available 24/7 in case an alarm went off. Sometimes, in the middle of Friday nights, I’d have to walk over to the hospital after being alerted by the alarm. Luckily, Givat Shaul is only a 30-minute walk from the hospital. Occasionally, a doctor would want to do a procedure at an odd time — like on Tisha B’Av or Purim, so I had to be available.”

Dr. Brooks explains that in the *frum* world, fertility issues are treated as a medical emergency. “And thanks to today’s technology, many fertility problems are treatable, whether through mild invasion, or through top-of-the-ladder, high-tech procedures,” he says.

But although Dr. Brooks handles biological material whose genetic composition will be determined by his own hand — literally forming the genesis of new life — he’s certainly not playing G-d. “Because fertility treatments today are so successful, I always remind couples that while Hashem has given us the technology to pull aside the curtain, success remains His alone and I am simply a *shaliach*. If I thought that my work depended on my own skill, I would never have a steady hand.”

A Little Knowledge When the IVF unit was set up in 1990, many couples facing infertility began to turn to Dr. Brooks for advice, particularly concerning the halachic aspects of treatment. “Religious couples need to be given information in a context that they can deal with, but there was no one available to offer this to them. I could speak their language, while explaining medically what was happening and leaving them with hope.”

In 1996, when counseling couples at night had become part of his daily schedule for several years, Dr. Brooks officially filled the void experienced by those navigating fertility issues by founding an organization to help Jewish couples in Israel and overseas. Together with Rabbi Nachum Tennenbaum, he established Zir Chemed, the first halachic fertility center. Zir Chemed is unique in that it offers a holistic approach that combines counseling, emotional support, and technical expertise. As the organization’s scientific director, Dr. Brooks travels extensively throughout the US, England, Belgium, France, and Canada fundraising, counseling couples, and explaining the halachic aspects of fertility treatments to rabbis and doctors.

Certainly one of the most rewarding aspects of Dr. Brooks’s work is the relationships he has forged with the rabbinical leaders of Torah Jewry. In Israel, Dr. Brooks often turned to Rav Moshe Halberstam, Rav Meir Bransdorfer, and Rav Chaim Pinchas Scheinberg *zichronam livrachah* for advice on halachic issues. Overseas, he has built relationships with Rav Shmuel Fuerst of Chicago, Rav Shlomo Miller of Toronto, and Dayan Aharon Dovid Dunner of London *shlita*.

He also shared a special relationship with the Bostoner Rebbe *ztz”l* and his *rebbeitzin a”h*. Once, taking them on a tour of the new department, Dr. Brooks shared an insight with them: “Many *baalei teshuvah* feel that the previous years of their lives, before they began learning Torah, are worthless. I now realize how my education, coupled with my time in kollel, prepared me for this position.”

The halachic ramifications of the issues involved, as well as the confidentiality of his patients, limit what he can share about these rabbinic discussions. But with some couples, he says, sometimes it’s more a question of misinformation.

“Once, at eleven o’clock at night, I was counseling a young Yerushalmi couple and when I recommended that they follow a certain procedure, they refused to do so, claiming that it was forbidden. I asked them who their *posek* was and they named Rav Meir Bransdorfer *ztz”l*. I immediately called the Rav on his personal cell phone and explained the situation. The Rav asked that the young husband visit him at midnight. The next morning, the husband called me to tell me that Rav Bransdorfer had instructed him to follow my recommendations exactly. Within two months, the couple was expecting — without having undergone any fertility treatment.”

Sometimes, Dr. Brooks found that apparent fertility problems were caused by a lack of basic knowledge. The couple had not been prepared appropriately for marriage. By removing the doubts and pressure, the laughter of children soon replaced months or years of pain.

And many other times, the pressure of anxious relatives is enough to guarantee that no news is forthcoming. “Some couples who have been married merely a short time and are still waiting for good news are put under such tremendous pressure by their own expectations, family, and society, that problems can be created where there was nothing wrong in the first place. The wife’s hormones are disturbed, and the husband too is affected. Removing this pressure often allows things to begin functioning normally.”

Dr. Brooks says the first thing he tells young couples is that they are normal. Fifteen percent

of couples have some fertility issue, so just knowing they are in the normal range has a calming effect, giving them the wherewithal to face the maze of blood tests and other medical indicators. And because many young women have a limited understanding of their own systems, he gives a crash course in reproductive endocrinology, explaining the basics of treatment and what she can expect. Knowledge means better compliance, and better compliance means better results.

These conversations can take place at ten at night or at two in the morning. During his years on the job, Dr. Brooks has never turned down a couple who needs advice. “I figured that if someone was calling me at two in the morning, he also knew the time. I was never on vacation.”

And he never switched off his cell phone. This past Pesach, the first Yom Tov after his retirement, Dr. Brooks’s married children who had joined their parents commented that they had never seen their father so relaxed.

Toward a Hopeful Future Modern fertility technology has created a situation where the guiding hand of the lab technician can create “designer babies,” screening the biological material prior to implantation. The birth of children with genetic diseases can be avoided by using pre-implantation genetic diagnosis (PGD) as a screening test. In this process, after three days of incubation, the embryo has divided into eight cells. One of these eight cells is removed and studied to check whether it carries the genetic defect. This involves analyzing tiny quantities rapidly and accurately. “Today it takes me one minute to do a biopsy on an embryo that is less than one-tenth of a millimeter in size,” Dr. Brooks states.

Not only that, but now something called “savior babies” are possible. These babies are conceived specifically to aid victims suffering from specific medical conditions. For example, children suffering from fanconi anemia (FA), a genetic disease with an incidence of 1 per 350,000 births, with a higher frequency in Ashkenazi Jews, are likely to

develop leukemia and suffer from bone marrow failure by age 40. Their best chance of survival is a bone marrow transplant. That usually means searching for an appropriate donor — but today, with advances in fertility procedures, sometimes a donor can be custom-created.

A couple with a child diagnosed with FA turned to Shaare Zedek for precisely this purpose. They hope to give birth to a baby who would ultimately be a bone marrow donor for an affected sibling. Ten embryos were tested for the disease. Four were carriers and five weren't. Out of these five, one had human leukocyte antigen (HLA) genetic compatibility and ultimately became a donor. Without getting into the complicated halachic implications regarding the extra embryos, needless to say, Dr. Brooks was in extensive contact with rabbinical authorities worldwide before he performed the biopsies needed to determine the status of the embryos.

No Breaks “As an *ish tzibur*, I have accepted on myself to always be available to help the public,” says Dr. Brooks. Even a stop before Succos to shop for *arba minim* in the Machaneh Yehudah market morphed into an opportunity to help. “I was trying to choose a *lulav*, when the seller told the quite obviously secular American lady next to me, holding what looked more like a lemon than an *esrog*, to ask me — ‘the rabbi’ — for my opinion. Left without a choice, I began a mini-lesson on choosing an *esrog*. Feeling that she had cornered a reliable rabbi, the lady then asked me to help her choose a *lulav*.

“Walking through the market on a search, I was intercepted by a rabbi from London with

a halachic query about a certain medical procedure undergone by one of his congregants. I tried to explain that I wasn't able to talk freely, but the lady had already understood that I was a doctor. When I specified that I was an embryologist, she remarked that she had never met a rabbi who was a clinical embryologist to boot, and that she herself had just enlisted for a fertility procedure. She began to ask my advice on that too. I suggested that she and her husband meet me at my home where I would be more comfortable discussing these personal issues.”

Not all women who enlist Dr. Brooks's assistance are suffering from infertility. Today, he says, women with ten children are willing to undergo treatments in order to bear another child. If the tenacity of these women is so strong, says Dr. Brooks, imagine the dedication of a woman with no children yet.

“Today, with the technology we have and the high success rates, the couple who finds themselves in the web of fertility treatments will stop at nothing. I once asked a doctor who had been treating a woman for 20 years — with no success yet — why he was still seeing her. He replied that if he shut his door to her, she would simply turn to another doctor.” This, he said, is the flip side of the stunning advancements in the field. “Thirty years ago, couples facing infertility resigned themselves to childlessness at a certain point, and dealt with infertility with the tools they had. Today couples are facing the test of never being able to move on.”

Beyond Retirement What lies beyond retirement for Dr. Brooks? Well, there's a kollel schedule, of course. And following a different path of creativity,

Dr. Brooks hopes to produce a film that will capture the guiding Hand behind his life. Encouraged by Rosh Yeshivas Ohr Somayach Rav Mendel Weinbach, Dr. Brooks has been unearthing magazine articles, newspaper clippings, photos, and film footage from the netherworld of paparazzi, where they have lain dormant for over 30 years, for his new project.

The film will offer plenty of viewing of the quints, for Dr. Brooks views his devotion to assisting in the miracle of life as an ode of thanks to the blessing of quintuplets and six additional children that Hashem bestowed on him and his wife. And babies will still be a motif in his life. Since he merited, in an incredible completion of the circle, to repay the debt of gratitude to Hashem through the very area in which he was blessed, Dr. Brooks has no intention of leaving the counseling aspect of his profession.

For the scientist, scholar, and trailblazer, the delicate work and grueling hours carry infinite rewards. He'll never forget the French couple who had eschewed fertility procedures in France because of doubts over whether their halachic issues would be correctly addressed. In 1990, when Shaare Zedek opened its IVF unit with a promise of strict adherence to Jewish law, they flew to Israel with their suppressed hopes and dreams. Dr. Brooks, who had been involved in all the procedures that led to the birth of their long-awaited son, was at the bris. He watched as the new father uncorked a bottle of wine.

“This bottle was given to me under my *chuppah*,” the father explained. “A close friend instructed me to use the wine at my son's bris. I've waited 18 years. Now I'm finally opening it.” ●