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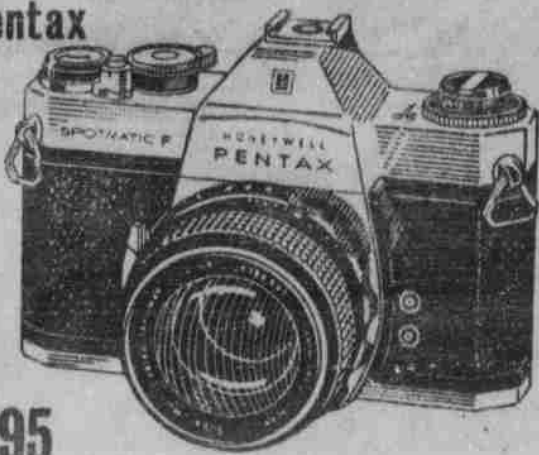
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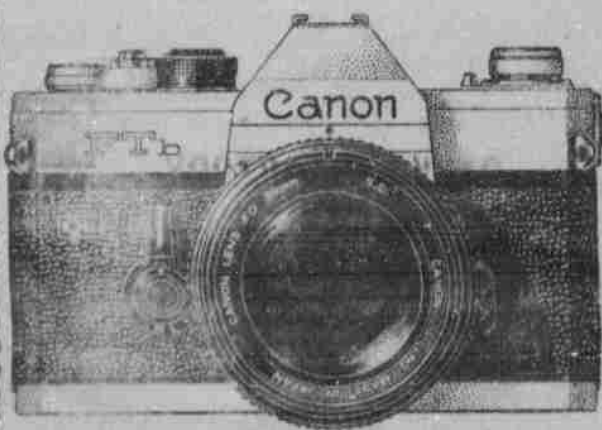
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Doctor at Symposium:

## 'Malformed children not wanted'

"Getting up to bat in the World Series with everything depending on you, then striking out and having everyone in society boo," is similar to the feeling experienced by the parents of a severely malformed child, according to Dr. M. Neil Macintyre.

Macintyre spoke on Curious Chromosomes, Congenital Catastrophes and Constructive Counseling, Monday night at the School of Life Sciences Inaugural Symposium. The symposium, which ends today, featured speakers from the United States, Great Britain and Canada.

Macintyre refuted the idea often presented in "such reputed medical journals as the Ladies Home Journal" that "the greatest thing in the world is having a mongoloid child," who will somehow "strengthen the family, bring it together and make wonderful contributions."

He stressed the devastating emotional impact malformed children have on their families, the need for family supportive counseling and the current lack of such counseling.

### Parents hate child

In his own counseling experience, Macintyre said he has found that a couple with a malformed child reacts to the child by first hating it, then feeling guilty and eventually going into a deep depression.

"It is not unnatural or unusual for couples in this situation to want the baby to die," he said.

Empathy for the child is not an essential factor, Macintyre said. Couples with a malformed child display an equilibrium destroying reaction pattern, he explained. Communication between the partners is broken down, an underlying feeling of blame surfaces and a negative feeling toward sex adds to the anxiety of the situation, he said.

Sexual rehabilitation is an absolute must in these situations, he said. Sexuality in our society, which "tends to freeze our women and make our men strong and silent," is "adequate at best" even in normal circumstances, he said.

Having a malformed child is a "devastating, destructive blow to our own ego," he said. "What will people think of me for producing that" is the reaction common to almost all people with malformed children, he said.

Macintyre criticized attitudes which assume that the family "will be able to handle the situation" and that "everything will work out all right."

### 'Can't handle it'

"I have yet to meet anyone who can handle it," he said.

Counseling in this area of human suffering is not well understood by medical and other disciplines, and is long overdue, he said.

"Most people don't think about malformed children enough to know what it means to be the parent of one," he said.

One in 600 babies born is a mongoloid, Macintyre said, but people are usually not aware of this because 95% of these children are never seen. Some die young, others are institutionalized and parents are less likely to take their malformed children out in public than they are their normal children, he said.

In counseling, which is essentially psychotherapy, Macintyre said, the parents are helped to "face the facts and take it from there."

### Need another child

In many cases, the parents desire and need another child, he said. Adoption doesn't solve the problem, he continued.

The average time most couples spend in counseling is six months, Macintyre said.

State government should be involved in financing counseling for those who can't afford it, he said.

### Prenatal analysis

Macintyre stressed the advantages of prenatal chromosome analysis, the process of drawing amniotic fluid and from it determining by chromosome examination whether or not a child is defective.

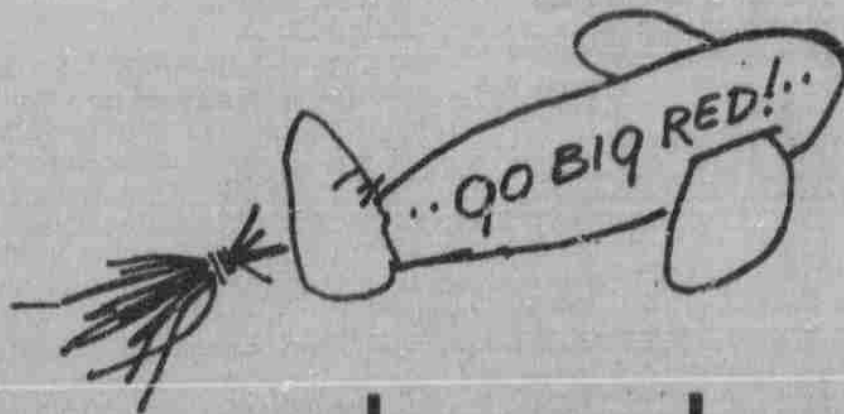
In 1965, Macintyre and another scientist independently succeeded in performing the first human prenatal chromosome analysis from cultured fetal cells.

He criticized persons who "put analysis down and put it in a bad light because they think it always leads to abortion."

In reality, Macintyre said, testing saves the lives of normal babies who otherwise would be aborted by parents fearing the possibility of having a defective child.

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