



and its unique genetic concerns. One of its main objectives is to provide accessible and affordable options for carrier testing for Jewish genetic diseases that could affect offspring, so that couples can ensure the health of their children as much as possible before getting pregnant.

Rose, who championed the cause of genetic screenings as an active member of the Student Medical Ethics Society while she was at Stern, says that based on her experience, approximately one in three Ashkenazi Jewish individuals who undergoes screening is identified as a carrier for at least one Jewish genetic disease. One in 100 couples will be a carrier couple.

“For those couples who are carriers, it’s much better to know prior to conception so that they may take proactive steps, like undergoing preimplantation genetic diagnosis,” said Rose. “When a couple finds out that they are both carriers when they are already pregnant, very difficult decisions, many of which run counter to one’s own ethical and religious beliefs, need to be made in a short time. I hate to think of all the times this heartache could have been avoided.”

As evidence of the program’s commitment to serving the Jewish population’s specific needs as they arise, Rose pointed to the increase in Sephardic patients who have come in for preconception screening. Because they have different genetic concerns than those of Ashkenazi Jews, PJGH is working on a pilot program geared specifically toward screening and educating Sephardic Jews.

But Rose said she is not the first stop for a couple who is experiencing trouble conceiving. “Instead, the first professional that a couple facing infertility should see is a reproductive endocrinologist, who will most likely send the couple to a genetic counselor like me as part of a comprehensive workup,” she said. “I can then look for, and hopefully rule out, potential genetic issues that can affect fertility.”

In addition to her busy work schedule, Rose mentors YU students

