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Infertility: understanding the emotions involved

In today's world, it's not uncommon for couples to plan their families meticulously, considering all factors and waiting until the time is just right to have a baby. One assumption in this planning is that the couple is fertile and that they will conceive shortly after they stop using birth control. For some couples, however, such is not the case.

Infertility is defined as a couple's inability to achieve conception after a year of unprotected intercourse (six months if the woman is over the age of 35) or the inability to carry a pregnancy to a live birth.

Physical factors affecting fertility

Many couples who experience infertility will have specific problems that cause their inability to conceive. In 40 per cent of cases, the problem is traced to the male; in another 40 per cent, the problem is identified with the female. In 10 per cent, both partners

causes.

Some of the factors that may affect a woman's inability to conceive include:

• **Abnormal ovulation.** Approximately 40 per cent of women who experience infertility have problems with their ovaries. This could be indicated by irregular or absent menstrual cycles, which can result from a hormonal imbalance. In these situations, consult with your doctor before trying to conceive. In many cases, this can be treated successfully with medications.

share the problem. The remaining 10 per cent is due to unknown

- **Blocked fallopian tubes.** Blocked or damaged fallopian tubes may impact fertility by interfering with the egg and sperm uniting, or with proper embryo development and implantation in the uterus. Often, there are no symptoms and the blockage is only discovered during an infertility evaluation. Treatment may require specialized surgery.
- Endometriosis. This is a disease in which tissue from the uterus implants on the ovaries and other pelvic organs. Symptoms may include heavy, painful or long menstrual periods. Several forms of treatment are available, involving both medications and surgery.
- Cervical problems. Cervical problems may be related to the cervical environment, such as the consistency of the mucus as well as the anatomy. Both may impede conception.

Male factors affecting the couple's ability to conceive successfully include problems related to inadequate sperm count or abnormalities relating to the size, shape and movement of sperm. About 30 per cent to 50 per cent of male infertility relates to the presence of a varicocele, or varicose veins within the scrotum, which affects sperm quality and quantity. Testicular injuries, hormonal imbalances and other diseases such as diabetes mellitus, central nervous system problems and pituitary tumours can also affect fertility.

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Fertility also decreases as age increases, especially in women. For women, maximum fertility occurs between the ages of 15 and 24. One out of three women who wait until their mid-30s to have children experience problems with fertility, which rises to one out of every two women who wait until their 40s.

Personal factors affecting infertility

Personal and lifestyle factors may impact fertility in both females and males. These may include:

- **Diet and exercise.** Proper diet and exercise are important for optimal reproductive functioning in both men and women. Women who are significantly under- or overweight may have difficulty getting pregnant.
- **Smoking.** Smoking may affect sperm count in men and may increase the risk of miscarriage in women. It may also contribute to premature birth and low-birth-weight babies.
- Alcohol. Alcohol consumption may affect sperm counts in men and may increase the risk of birth defects in babies.
- Medications. Some medications may play a role in sperm count and sex drive.
- **Drugs.** Drugs, such as marijuana and anabolic steroids, may affect sperm counts in men. Cocaine use by mothers may increase the risk of kidney problems in babies.
- Caffeine. Caffeine may impact a woman's fertility and may increase her risk of miscarriage.
- Lubricants. Lubricant products used during intercourse may affect sperm quality.

Emotional aspects of infertility

Individuals and couples experience a roller coaster of emotions—always hopeful that this month will be "the month." The experience of discovering that one is unable to bear a child involves a number of emotional stages, including denial, anger, bargaining, guilt and depression. These emotions may occur in any order, and you may find yourself revisiting them even once you believe you have passed into the next phase. Each member of the couple may experience these emotions differently and at different times, causing the potential for increased conflict between them.

As time passes, and the couple continues to be unable to conceive, people generally experience grief and, finally, acceptance, as they let go of the hope of having a child of their own. It is then possible for the couple to turn their attention to other arrangements for having a child, such as adoption, or to recreating their relationship as a couple without children.

To help you and your partner deal with the emotions involved, consider the following coping strategies to deal with your infertility:

- Talk to others who have experienced difficulty conceiving. This will help you realize that you are not alone.
- If you have been trying to conceive for more than one year (or six months if you are over the age of 35), consult your doctor immediately.
- Respect that you and your partner will experience infertility differently, for example, you may not experience the same feelings at the same time, or in the same way; or you may respond differently to the thought of being infertile.
- Expect to feel fear, relief and anxiety when you first consult a medical practitioner.
- Approach infertility like a new project. Map out a strategy and timetable.

- Keep the lines of communication open with your partner.
- Remember that it's normal to feel frustrated and angry when things do not go as planned.
- Be kind to yourself and your partner.
- Redirect your focus to a favourite pastime.

It's little wonder that the experience of infertility results in crises in numerous areas of the individual's and couple's lives. Couples do not plan for infertility and when they are faced with it, they must make life-altering decisions to deal with it.

Hope for infertile couples

Every year thousands of couples become parents using procedures and medications.

If a specific problem is causing the infertility, the sooner it's identified; the sooner treatment can begin bringing the couple closer to their goal of having a baby.

It's important to remember that infertility is a medical problem that has far-reaching emotional effects. Addressing both will enable the individuals and couple to deal with the crisis of infertility more effectively. Do not hesitate to seek the help of a therapist or other professional to help you manage the emotional side of infertility, just as you manage the physical side.