



Merrion Fertility Clinic
At the National Maternity Hospital



Helping Your Fertility

and Preparing
for Pregnancy

Helping your Fertility & Preparing for Pregnancy

This leaflet is essential reading for all couples preparing for pregnancy whether that be with or without the assistance of medical treatment at Merrion Fertility Clinic (MFC). The purpose of this leaflet is to help individuals and couples improve their chances of conception and positively prepare for pregnancy.

Couples experiencing fertility problems should be seen together because both partners are affected by decisions surrounding investigations and treatment.

Introduction

1 in 6 Irish couples of reproductive age experience difficulties conceiving a child. 84% of couples will conceive within a year of having regular unprotected intercourse. Of those who do not conceive in the first year, about half will do so in the second year. If you & your partner have been trying to become pregnant for 12 months without success, it is time to take positive action.

If you have an obvious problem, it is recommended that you seek help sooner. Common causes of male and female fertility problems are discussed in our male and female information leaflets. However, all factors need to be taken into account when assessing any couple and so it is important for both partners to be looked at and for both to attend their doctor together.

Support & Counselling

The Merrion Fertility Clinic team aim to support you through your treatment time with us. The unit also offers a confidential counselling service that can be accessed before, during and after treatment. The service can help and provide support to individuals and couples in managing stress & exploring personal issues with regards to their fertility.

Support groups that may be helpful:

Merrion Fertility Clinic

Fertility Ireland

National Infertility Support & Information Group (N.I.S.I.G)

The Human Fertilisation & Embryology Authority

The Endometriosis Society of Ireland



Female

Why you might have trouble conceiving?

- Ovulation (producing eggs).
- Female pelvic diseases (e.g., endometriosis, damaged fallopian tubes, adhesions or fibroids).
- In 20% of couples, no cause will be found (unexplained infertility).

Female Age

- The chances of achieving a pregnancy fall sharply after the age of 35. Fertility is decreased by about half among women in their late 30s compared with women in their early 20s
- By 40, even though a woman may be still having regular periods, the quality of her remaining eggs is reduced and the chances of conception are low. The risk of miscarriage also increased with increasing age.



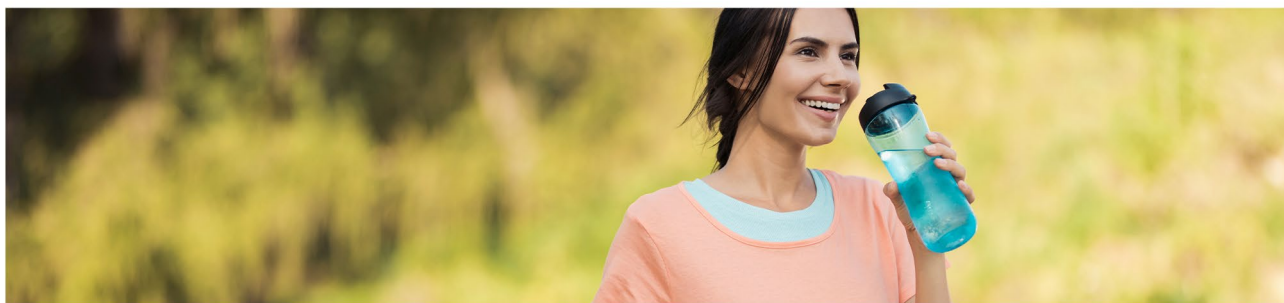
Frequency and Timing of Intercourse

- Women are most fertile on the day of ovulation and the five days leading up to it. Ovulation usually occurs 2 weeks before your next period. Our bodies are not always predictable and ovulation timing can vary from month to month.
- This may seem obvious but if you are not having intercourse around ovulation time, you are not going to conceive.
- If couples are having very frequent intercourse (i.e. 3 times or more per week) there is no need to try to predict ovulation. If sex is less frequent, however, you need to know approximately when you are ovulating.



Frequency and Timing of Intercourse *cont.*

- Accurately predicting when an egg will be released can be challenging. There are many commercial kits and apps available and, while they are helpful to reassure you that it is happening, it is not recommended that you rely on them for timing.
- Women's cervical mucus becomes more profuse and "slippery" just before ovulation and, if you notice this, try to have sex that day or night. If you don't see clear mucus, don't worry – it's not critical.
- Maximise the chance of pregnancy by having regular intercourse, i.e. every day or every second day soon after the period stops and continue to ovulation if your cycle is regular.
- There is no evidence that any sexual positions are better and it is not necessary to stay lying down, elevate your pelvis after sex.
- Some commercial lubricants may make the sperm move slower and decrease their ability to survive. You may want to discuss lubricants with your doctor/ pharmacist since there are a few lubricants that are believed to be safe for use when trying for a baby.
- Some couples experience difficulties with intercourse. Should this be the case you should discuss this further with your fertility doctor.



Diet and Lifestyle

Healthy Diet and Supplementation

- A balanced diet is the most sensible approach to ensuring that essential vitamins & minerals are obtained. However additional folic acid supplements are essential prior to conception. A number of widely available preparations are available for pregnant women which are suitable for pre-conception use. They should contain the required 400mcg of Folic Acid & vitamin D 10mcg.



- Folic Acid taken 3 months prior to conception and up to 12 weeks of pregnancy has been shown to reduce the risk of having a baby born with Spina Bifida. In certain circumstances, a higher dose of Folic Acid may be advised.
- The main function of vitamin D is to regulate the amount of calcium and phosphate in the body. These nutrients are needed to keep bones, teeth and muscles healthy. From October to March, everyone over the age of 5 will rely on dietary sources of vitamin D. Since vitamin D is found only in a small number of foods, it might be difficult to get enough from foods that naturally contain vitamin D and/or fortified foods alone. So everyone, including pregnant women, should consider taking a daily supplement containing 10 micrograms (400IU) of vitamin D.

Body Mass Index (BMI)

- Maintain a healthy weight and BMI. Body Mass Index (BMI) is a calculation based on the weight you carry for your height. An optimal BMI between 19 – 25kg/m² is associated with the best chance of conceiving and also of having a healthy pregnancy. Being significantly underweight or overweight increases risks for mother and baby.
- Women who are not ovulating, or have no periods at all, may find that restoring their weight to the optimal range can restore ovulation and correct disturbances in their menstrual cycle.
- Fertility treatment is only recommended @ MFC when the woman's BMI is between 18.5 – 30kg/m².



Exercise

- Regular moderate exercise e.g. walking or swimming three times weekly is advised..
- Avoid excessive physical activity. Too much vigorous physical activity can inhibit ovulation.



Smoking

- Smoking tobacco has a proven adverse effect on your fertility. Smoking as little as two cigarettes a day has been associated with a reduction in fertility in women and has been shown to significantly reduce the success rates of fertility treatments such as IVF.
- Passive smoking may affect a woman's chance of conceiving too.
- We would encourage you to consult your GP for support in stopping smoking.

Alcohol

- Excess alcohol consumption can affect female fertility, as well as harming the developing foetus. Women should be advised to drink no more than one or two units of alcohol no more than one or two times per week and avoid any episode of intoxication.

Caffeine

- Limit caffeine consumption to 1-3 cups of coffee per day before and during pregnancy.
- High levels of caffeine consumption (5 cups/day) have been associated with decreased fertility.

Medical Problems

If you have any on-going current medical problem, or require medication, it is essential for you to review this and any possible implications for pregnancy with your relevant medical practitioner BEFORE you start trying to conceive. Certain prescriptions, over the counter medications or supplements and other complimentary treatments may not be suitable for conception and pregnancy. Please consult your advising medical or alternative practitioner.

Medical conditions that can put women at risk of fertility problems include:

- Infrequent or no periods.
- Endometriosis.
- Polycystic ovaries.
- Family history of early menopause.
- History of chlamydia, herpes or genital warts.
- Pelvic surgery e.g. for ovarian cysts, fibroids, cone biopsy.
- Abdominal surgery for bowel problems e.g. Crohn's disease, ruptured appendix.



Male

In about one in five couples with fertility problems the cause will be found to be related to sperm problems e.g. low numbers of sperm or poor motility of the sperm. In another 2 out of five couples, sperm problems will contribute to the difficulty but there will be female issues as well. All factors need to be taken into account when assessing any couple and so it is important for both partners to attend their doctor together.



How is male fertility evaluated?

A semen analysis will be the initial step. The semen is normally collected in a sterile container by masturbation. The semen test gives important information about the number, movement and shape (known as morphology) of sperm.

If the semen analysis reveals problems with the sperm count, movement and/or shape, a repeat test is generally arranged to confirm the problem. Illness or medications three months prior to the test can impair sperm ejaculated on the day of examination. If the repeat is abnormal further tests may include:

- *A blood test to check your fertility hormones.*
- *Ultrasound scan of the scrotum to detect any possible blockage.*
- *Genetic tests in some cases which will help assess any potential additional "heritable" risks to your children.*

Results of the relevant selected tests, along with a discussion of your medical history and personal wishes will help the specialist to guide you to the best treatment options.



Improving your Chances

Regular Intercourse

- Long periods of abstinence can decrease the quality of the sperm. Sexual intercourse or ejaculation (two or three times per week) is recommended.
- This may seem obvious but if you are not having intercourse around the time that your partner is ovulating, she is not going to conceive.
- If couples are having very frequent intercourse (i.e. 3 times or more per week) there is no need to try to predict ovulation. If sex is less frequent, however, you need to know the fertile time and have intercourse every day or every second day during this time.
- Some commercial lubricants may make the sperm move slower and decrease their ability to survive. You may want to discuss lubricants with your doctor/ pharmacist since there are a few lubricants that are believed to be safe for use when trying for a baby.
- Some couples experience difficulties with intercourse. Should this be the case you should discuss this further with your fertility doctor.

Healthy Diet and Supplementation

- Obesity has been clearly linked to impaired sperm production. If you are overweight, you should attempt to attain an ideal body weight. Abdominal fat is a risk factor because the female hormone oestrogen can be produced there and this can unbalance the male hormone testosterone.
- Recent studies suggest a beneficial effect of antioxidants on male infertility by protecting sperm from damage. Antioxidants such as vitamins E and C are found in most multi-vitamins. Fruits and vegetables also provide a natural source of antioxidants and should be part of a balanced and healthy diet.
- The main function of vitamin D is to regulate the amount of calcium and phosphate in the body. These nutrients are needed to keep bones, teeth and muscles healthy. From October to March, everyone over the age of 5 will rely on dietary sources of vitamin D. Since vitamin D is found only in a small number of foods, it might be difficult to get enough from foods that naturally contain vitamin D and/or fortified foods alone. So everyone should consider taking a daily supplement containing 10 micrograms (400IU) of vitamin D.



Improving your Chances *(continued)*

Smoking / Recreational drug use

- Smoking is associated with reduced sperm quality, and men who are trying to conceive should consider stopping immediately.
- Recreational drugs, including anabolic steroids and marijuana, are associated with impaired sperm function and should be avoided.

Alcohol

- Avoid excessive alcohol intake which is detrimental to semen quality. Do not regularly drink more than 14 units of alcohol a week.

Keep Cool

- The testes should be a couple of degrees cooler than the rest of the body for maximum sperm production.
- Some studies suggest that wearing tight underwear may raise temperature around the scrotum and cause a decrease in sperm quality.
- Avoid hot baths, heated car seats, saunas or lap tops on the lap.



A man's fertility reflects his general health. Men who live a healthy lifestyle are more likely to produce healthy sperm. Additionally it's also very important to remember that it can take just three months to improve sperm.

