

# FROM HEARTBREAK TO HOPE

## EMOTIONAL ASPECTS OF INFERTILITY

**D**esire to have a child is so deeply rooted in our society that inability to bear children burden the couple not only on the physical and financial aspect but also on emotional front. As if the diagnosis and the treatment weren't difficult enough, the emotional turmoil surrounding infertility – while perfectly normal is yet another source of anxiety and stress. Most couples experience the struggle in much the same way. It's a big challenge for the concerned physicians who are treating the couple as well as for relatives and friends to help them cope with their emotional problems during this difficult period.

### **What is the definition of infertility?**

A couple can be considered as infertile only when after one year of regular, unprotected intercourse they fail to achieve pregnancy.

Initial state of denial or shock – Most couples have tried to conceive on their own over a period of months or even years, the ultimate diagnosis of infertility usually brings disbelief or shock for them. According to Dr (Mrs) Poonam Nayar, PhD, Consultant Psychologist at Akanksha IVF Centre in New Delhi, the first question that arises in their mind is "How could I be infertile when there is no other health problem?". This is usually followed by feeling of anger and depression. They may feel angry at their partner, at friends and family members, at God or even at medical profession for not caring enough or not finding an immediate solution of their problem. Many individuals and couples may find it exceedingly difficult to discuss their problem openly with others. Seeing other people conceiving effortlessly and moving on with their lives brings the sense of isolation.

### **Who is to be blamed?**

In our Indian society, mostly the woman is blamed first but everyone should know the fact that infertility is a problem of a couple, not of an individual. In general population, infertility affects 20% couples. Among

infertile couples, the problem lies in male partner in 40%-50% cases, in 30%-40% of cases female partner can have some cause and in 20%-30% cases both can suffer from some problem. 15% couples can have more than one cause of infertility, so series of tests and investigations are required and it may take a few months to find out the exact cause of infertility. And above all this, some couples suffer from unexplained infertility where no cause can be found out even after all investigations. During this time some people lose their patience and change their doctors frequently in order to get immediate results.

### **How does infertility affect couple's relationship.**

Strain on marriage is the greatest stress of infertility. These people mainly go through anger, isolation, depression and guilt. When anger is directed at one partner it can be especially destructive for the relationship.

### **Stress during Infertility**

Researches have now begun to consider the hormonal changes that occur in human body during stress. There are studies which correlate stress with infertility. The prolonged and difficult period of treatment may result in stress that may have an adverse effect on fertility. Yoga or any other form of de-stressing exercises are very beneficial during infertility treatment.

### **When do you need help of Professional Counsellor?**

- Loss of interest in normal activities

- Depression that doesn't seem to go away, Suicidal thoughts
- Strained interpersonal relationships (with partner, family, friends and/or colleagues)
- Not thinking about anything other than your infertility
- High levels of anxiety
- Change in sleep patterns (difficulty falling asleep or staying asleep, early morning awakening, sleeping more than usual)
- Change in appetite or weight (increase or decrease)
- Increased use of drugs or alcohol
- Social isolation, persistent feeling of guilt, anger or worthlessness

### **What should be done**

Ideally the treatment should be done in a fully equipped infertility centre where along with thorough check-up, adequate counselling can be provided to the couples. The treating physician and staff must provide support to these couples, although the efforts can be quite time consuming but a patient conversation with such couple help them understand the magnitude of their problem and time required for the treatment.

However, a Clinical Psychologist and Counsellor can help a couple when they are:

- Trying to decide between alternative treatment possibilities
- At a treatment crossroad
- Exploring other family-building options
- Considering third-party assistance (gamete donation, surrogacy)
- Having difficulty communicating or if you are in conflict with others about what direction to take



### **New Rays of Hope**

With the advent of ART (Assisted Reproductive Technologies) a new hope has arisen for many couples who had earlier limited parenting options. IUI, IVF, ICSI, Sperm & Egg donations, Surgical sperm recovery, Surrogacy services and Pre – implantation genetic diagnosis has now opened new doors for them. But again the financial aspect, limited success rates, medical risks and many legal and ethical issues with different techniques, need to be discussed openly with patients.

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