Midlands Family Medicine



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Education

Female Infertility

What is infertility?

Infertility is usually defined as not being able to get pregnant after trying for at least 1 year. Women who are able to get pregnant but then have repeat miscarriages are also said to be infertile. Infertility is a problem for 1 of every 6 couples. It can be caused by problems in a man's or woman's reproductive system. Problems in the woman's body are responsible for about half of the cases of infertility.

How does it occur?

Often the reason a woman is infertile is that her ovaries are not releasing eggs. For example, when a woman gets older, the ability of the ovaries to produce and release healthy eggs declines, especially after age 35. Other things that may affect the eggs and the release of eggs (ovulation) are:

- hormone problems
- overweight or underweight
- smoking
- too much stress
- unhealthy diet
- ovarian tumors or cysts
- intense exercise, such as long distance running, which causes loss of body fat
- abuse of alcohol or drugs
- tumors in the pituitary gland
- chronic illness, such as diabetes, or other illness
- some medicines.

A woman who is not ovulating normally may have irregular or missed menstrual periods.

When an egg is released, it must pass through a fallopian tube to the uterus. A man's sperm must join with (fertilize) the egg along the way. The fertilized egg just then attach to the inside of the uterus. An abnormal or damaged fallopian tube or uterus can be another cause of infertility. These female organs may be damaged by:

- an infection, such as a sexually transmitted disease
- a birth defect in the female organs
- growths in the uterus, such as polyps or fibroids
- scar tissue from surgery (called adhesions)
- endometriosis (tissue from the uterus growing outside the uterus)
- DES syndrome, which you may have if your mother took the medicine DES when she was pregnant with you.

You may have problems with your cervix that make it hard for the sperm to reach and fertilize the egg, such as:

- cervical stenosis (a cervix that is very narrow or closed)
- abnormal cervical mucus
- cervicitis, which is inflammation or infection of the cervix.

In rare cases, a woman's body is allergic to sperm and destroys it.

Some rare genetic problems also cause infertility. Thirty percent of infertility cases have no known cause.

How is it diagnosed?

You and your partner will have thorough physical exams. You will be asked about:

- your sexual history, including previous pregnancy, miscarriage, or abortion
- your medical and family history
- your diet and exercise habits
- stress
- your use of drugs, alcohol, and tobacco
- your sexual intercourse practices, such as how often you have sex and whether you use lubricants.

You may need to find out if you are ovulating each month. Your health care provider can tell you how to take and chart your body temperature each morning. Your temperature will rise after ovulation. You can buy kits at the drugstore that can help predict ovulation. Blood tests and an ultrasound of the ovaries can also be used to see if you are ovulating.

Other tests that may be done are:

- urine and blood tests to check for infections and a hormone imbalance
- tests of samples of cervical mucus and tissue from the lining of your uterus
- tests of your partner's semen to check the number and quality of sperm in the semen.

You may have the following procedures to check for a blockage in your tubes or uterus, scar tissue, or endometriosis:

- hysteroscopy (putting a scope into the vagina and through the cervix to examine the inside of the uterus)
- laparoscopy (inserting a scope into your abdomen through a small cut to examine the organs in your abdomen)
- hysterosalpingogram (x-ray of the uterus and fallopian tubes after injection of a dye through the cervix and into the uterus and fallopian tubes).

How is it treated?

Your provider will try to find the cause of the infertility and, if a cause is found, treat the cause. The treatment may include medicine (usually hormones or antibiotics) or surgery. Sometimes a combination of treatments for both partners is necessary. Examples of treatments for women are:

- Taking hormones for a hormone imbalance, endometriosis, or short menstrual cycle.
- Quitting smoking if you are a smoker.
- Stopping use of alcohol or drugs.
- Taking drugs to stimulate ovulation. (Sometimes with this treatment you may become pregnant with more than 1 baby.)
- Having surgery to remove blockage or scar tissue from the fallopian tubes, uterus, cervix, or pelvis.
- Having surgery to remove polyps or fibroids from the uterus.

If your partner's sperm count is low, intrauterine (artificial) insemination may be an option. Semen is collected at several different times and stored until there are enough sperm. The semen is then placed in your uterus or fallopian tubes during the most fertile time of your menstrual cycle. Another choice is to use sperm donated by another man.

Assisted reproductive technology (ART) is another option. It involves several different methods for removing eggs

from your body, mixing them with sperm in the lab, and putting the embryos back into your body. The most effective ART is in vitro fertilization. It is often done when a man's sperm count is low or your fallopian tubes are blocked. ART can be expensive and time-consuming, but it has made it possible for many couples to have children.

About two-thirds of couples who are treated for infertility are able to have a baby, but looking for and treating causes of infertility can be stressful for a couple. It can put unusual strain on your relationship. Counseling may help you get through hard times.

How can I help prevent infertility?

You may not be able to prevent infertility resulting from genetic problems or an illness. However, you can do the following to reduce the risk of infertility:

- Prevent sexually transmitted diseases by using latex or polyurethane condoms. Also, have just 1 sexual partner who is not sexually active with anyone else.
- Limit the amount of alcohol you drink to no more than 1 or 2 drinks a week.
- Avoid the use of street drugs (such as heroin) and overuse of prescription and nonprescription drugs.
- Do not smoke.
- Maintain good personal hygiene and health practices.
- Do not use lubricant during sexual intercourse because it can make it harder for the sperm to reach the egg.

Contact your health care provider about any signs of infection or hormonal change, such as:

- · unusual discharge from the vagina
- abdominal pain or swelling
- fever
- abnormal bleeding
- a change in your menstrual periods
- discomfort during intercourse
- sores and itching in the vagina or rectal area.

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