

# The Emotional-Psychological Consequences of Infertility and Its Treatment

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### Abstract

Infertility is a major public health concern accounting for 10%-15% all over the world. In Bangladesh about 24.51 million patients receive infertility advice or treatment. The emotional consequences of an infertility diagnosis can be devastating. One study in Taiwan diagnosed anxiety in 23% and major depression in 17% of the women seeking assisted reproductive infertility treatment. The aim of this case presentation is to addressing the psychological consequences of infertility and its treatment. The findings of this case study are: 1. Understanding the reactions of infertility (mental engagement; psychological turmoil). 2. Consequences of therapy process (reduced self-esteem; feelings of failure, economic burden). 3. Emotional-affective reactions to therapy process (fear, anxiety and worry; fatigue and helplessness; grief and depression; hopelessness). This case study revealed that infertile women seeking treatment face several psychological-emotional problems with devastating effects on the mental health and well-being of the infertile individuals and couples, while the infertility is often treated as a biomedical issue with less attention on the mental-emotional, social and cultural aspects.

**Key words:** Infertility, Treatment-seeking, Psychological, Consequences.

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### Introduction

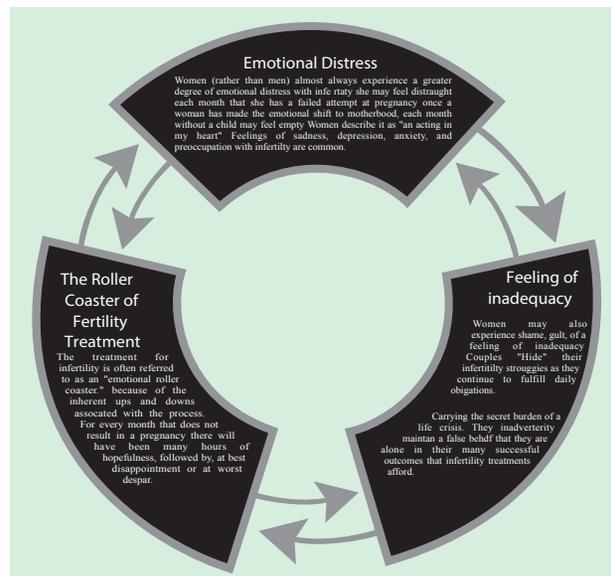
Infertility is a life time crisis with a wide range of socio-cultural, emotional, physical and financial problems<sup>1,2</sup>. Most infertile people on the globe live in developing countries and having children in these settings is often the only way for women to enhance their status in the community<sup>3</sup>. The emotional consequences of infertility can be devastating. In Bangladesh about 3 million couples are infertile<sup>4</sup>. The overall prevalence of psychological problems of the infertile couples is estimated to be 25-60%, which is caused by a complexity of factors such as gender, the cause and duration of infertility, treatment methods, and culture<sup>2,5&6</sup>.

### Case Report

A couple Mr. A (Age 35 years) and Mrs. B (Age 32 years) consulted with doctors with the complaint of non conception even after having active sexual life and non use of contraceptives. They married for 10 years. The couple did not have a positive family history of infertility in their respective families and had no consanguinity. They were physically healthy and following an apparently healthy life style. They were residents of urban area and did not report a consistent exposure to any specific pollutants.

At a secondary care centre after all evaluation they were diagnosed as a case of unexplained infertility and female partner was treated by ovulation inducing drugs for 6 months without any monitoring but no positive result. As a result of failed treatment she became worry, helpless and depressed. Her husband eternally loves and supports her and her family was also supportive. After one year of initial treatment the couple had undergone treatments for infertility from a renowned tertiary center in Bangladesh. Where they were treated by ovulation inducing drugs with monitoring and IUI for two times four months apart, but were not successful. Now she became more depressed and felt loneliness and guilt. She expressed, "I fear that I can never have a child and ask Almighty, don't disappoint me in this way". This time she experienced sadness due to express worries by the family members and bitter reactions of their community. They were become so psychologically depressed that they decided not to take any treatment. After two years again they had undergone treatment for infertility at "Fertility Center" from a neighbor country and IVF was done. Two weeks after embryo transfer they came back to home and biochemical pregnancy test was positive, but TVS showing "Blighted Ovum". After two weeks a repeat TVS was done and showed the same result. The event was heart breaking and D & C was done. This time they were losing control over their emotions and actions. She declared her feeling in this way: "I was so distracted while driving home that I had an accident and actually cried. I was frustrated and asked almighty "I'm really tried. What should I do?" Already they had spent a lot for treatment purpose and become economically looser, took loan from their relatives.

After six months again the couple had undergone second IVF cycle at the same fertility center and unfortunately again the result was negative. This time they completely depressed and can't bear no more. They kept themselves isolated from the community. She expressed, "My home is silent from morning to night so that sometimes I am talking to myself in the fear of not becoming dumb"



Discussion

Reproduction is one of the highest values and when the childbearing seems impossible, probable psychological crisis sets in<sup>7</sup>. In my case couple had experienced some psychological consequences due to both infertility and medical interventions like psychological turmoil, fear and anxiety and worry, grief and depression, but consequences like mental engagement, loneliness, guilt, and regret were only reported as infertility consequences. The consequences like difficulty in self-control, reduced self-esteem, feelings of failure and helplessness, and hopelessness were experienced following treatment process. A similar result was shown by Grill et al in their study<sup>2</sup>. In a cross-sectional study of 585 couples who had been reported in women's using hormone injections, 53% reported discomfort on the treatment that failed, and 44% expressed anxiety while being treated. Two of the most common negative feelings were hopelessness and impatience. 49% of respondents reported they felt uncomfortable when they were around pregnant women or couples with children<sup>8</sup>. The dramatic advances in the ART have acted as a double-edged sword, itself causing mental, social, moral, financial and legal concerns. In this case the stresses stem from the unaffordability of the infertility treatment costs. In an Iranian study it is shown that participants were concerned about how to cover the costs<sup>9</sup>.

Cognitive and emotional reactions of infertility and its therapy process

Emotional Distress

Women (rather than men) almost always experience a greater degree of emotional distress with infertility. She may feel distraught each month that she has a failed attempt at pregnancy. Once a woman has made the emotional shift to motherhood, each month without a child may feel empty. Women describe it as "an aching in my heart." Feelings of sadness, depression, anxiety, and preoccupation with infertility are common<sup>10</sup>.

### Feeling of Inadequacy

Women may also experience shame, guilt, or a feeling of inadequacy. Couples "hide" their infertility struggles as they continue to fulfill daily obligations, carrying the secret burden of a life crisis. They inadvertently maintain a false belief that they are alone in their struggle. They also may not hear of the many successful outcomes that infertility treatments afford<sup>10</sup>.

### The Roller Coaster of Fertility Treatment

The treatment for infertility is often referred to as an "emotional roller coaster," because of the inherent ups and downs associated with the process. For every month that does not result in a pregnancy there will have been many hours of hopefulness, followed by, at best, disappointment or, at worst, despair<sup>10</sup>.

In conclusion, this case study revealed that infertile couple with their journey to achieve a baby faces psychological-emotional problems that immense service itself and was of service delivery, affects the physical and mental health of the couple specially the women part.

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