

When to Give Up Infertility Treatment?

Editorial

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Infertility is a worldwide phenomenon. In recent times, Women prefer to study and build a career. They marry late and many women are 30+ years by the time they decide to conceive. Some couples in first few years after marriage, believe in DINK syndrome (Double income no kids). Suddenly they realize the need to have a child. In some cultures infertility is considered a social stigma. The woman suffers the most if she is infertile. Infertile couples may feel loss of self-esteem, sexual distress (stress), depression, guilt, anxiety, frustration, emotional distress and marital problems. The treatment of infertility can have physical, economic and emotional effects on infertile couples. Some modalities of treatment (IVF, ICSI) are complex and stressful. The woman continues infertility treatment so that family circle and society do not consider her as infertile. Many infertile women go into depression or commit suicide because they cannot withstand the taunts from in laws and relatives. Some times it results in divorce. Infertile couple does not seek parenthood with the same intensity. Male is more ambivalent and undergoes treatment only to satisfy his wife. The male does not suffer as much social pressure as his female spouse. This results in prolonged treatment for infertility. They are happy if treatment is successful. But when the couple fails in conceiving when they have spent so much money and time, they develop psychological problems. There is general agreement among health care providers about when to investigate a couple for infertility. Three years after normal sexual activity in young women and 6-12 months in elderly women is generally accepted for initiating treatment. Unfortunately, there is no agreement about the time to give up. There are not many documented studies on the issue of, "when to give up treatment?" There are many studies on social and emotional aspects due to infertility. The decision to give up infertility treatment is stressful and difficult and cause lot of anxiety.

In India and in many other cultures, there are many players involved in the treatment of infertility. These players are:

- Friends and relatives of infertile couple
- Religious leaders, soothsayers, astrologers
- Quacks

- Family physician
- Obstetrician & Gynecologist
- Infertility expert

Since several players are involved, it is necessary to decide when each player should give up efforts in time and refer the case to next in hierarchy. Normally, there should be no place for quacks in infertility treatment. Unfortunately, quacks still thrive because of the gullible people.

Normally, it should be left to the infertile couple to decide when to give up or change the health care provider. Health care provider must counsel the couple about the chances. Some ART experts feel that they will continue treatment till the couple decides to discontinue. Healthcare providers are reluctant to advise to "give up" because miracles do occur and the woman conceives when hope of conception is given up by medical fraternity.

Friends and relatives advise the infertile couple about various postures and timing of coitus, consumption of some food articles or visit some religious places. This may be alright for a short time. But friends and relatives should not pursue for long and certainly not if the woman is 35 years+.

Fertility issue is high jacked by religious leaders, astrologers and soothsayers. They advise various rituals and ceremonies. They charge high fees. Some cases of unexplained infertility do conceive because there may be release of anxiety and tension. These leaders must realize that they should not pursue when there is some organic fault in the couple.

Most family physicians do not participate in infertility treatment except to advise to whom to go. However, there are some family physicians who advise the infertile couple on basic treatment like BBT chart, timing of coitus or IUI. Family physician must not continue for more than 4-6 months in young couples and should advise elderly (35+) couples to go to specialist without delay.

I sent questionnaire to about 400 members of medical fraternity

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Received: February 16, 2016

Published: February 18, 2016

Citation: Rohit Bhatt (2016) When to Give Up Infertility Treatment?. *Int J Reprod Fertil Sex Health*. 3(1e), 1-2. doi: <http://dx.doi.org/10.19070/2377-1887-160002e>

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(some family physicians, ob.Gyn experts and infertility experts)

I asked them their opinion about “When to discontinue a particular regime of infertility treatment.” The results are summarized in the following table.

Procedure	Average	Range
Induction of ovulation	4-6 attempts with each regime	12-16 attempts
IUI	4-6 attempts	3-8 attempts
AID	4 attempts	3-10 attempts
Tubal surgery	6-12 months	6-24 months
IVF	4-6 attempts	4 till patient says No

Most infertile couples are not able to afford IVF treatment and give up early. We believe that health care providers and family should not pursue too long with their regime if there is no success in reasonable time. Other options like adoption and surrogacy must be considered. Counseling plays a very important part in infertility treatment.