Quick Facts for Couples about Fertility Care

These quick facts are for couples who are planning to get pregnant, and have some questions about fertility issues. Information sheets on <u>underlined</u> <u>topics</u> are available on the Fertility Care web site.

Fertility is a couples issue

Natural conception takes a man and a woman. This is true whether it happens in one night, or it takes a few months of trying. Even if it requires fertility evaluation or medical intervention, both male and female partners must be ready to participate.

Single women or same sex couples may seek medical intervention to conceive, but partners and families still play a role in care and support.

Timing is important

For couples who are trying to conceive, understanding a women's reproductive cycle, or menstrual cycle, is important. A man can produce sperm any time, but a woman has a "fertile window" of only a few days in every month when she is able to get pregnant. Once the couple can identify the fertile window (which is not the same for everyone) timing intercourse for those days will increase chances of natural conception. There are a few other things couples can do to optimize natural fertility, such as control their weight, stop smoking, and reduce coffee and alcohol consumption.

When to suspect a problem

When a couple has had well-timed, unprotected sex for 12 months or more without getting pregnant, they may be diagnosed with a fertility problem. That means the man or woman, or both, has a physical problem preventing them from conceiving.

Doctors may recommend a fertility evaluation after 12 months, or earlier if the woman is over 35 years old, or if the man or woman (or both) have other known or suspected <u>causes of infertility</u>.

What is fertility evaluation?

The purpose of the <u>fertility evaluation</u> (for men and women) is to identify the cause of a fertility problem. It involves a physical exam, a medical history, and lab tests of semen, blood and urine. Tests for the most common causes of infertility are done first. It may be possible to diagnose the cause of fertility problems right away, or a specialist may recommend more tests.

Fertility treatment

Available <u>fertility treatments</u> depend on a couple's unique fertility evaluation and diagnosis. There may be several possible options for treatment, or options may be very limited. Couples may decide not to have any treatment, or they may go through a number of treatments and then decide the "next level" of treatment is something they don't want.

It can be useful to gather information about the <u>pros and cons of treatment options</u> in advance, in order to take some of the pressure off decision making later on.

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Fertility treatments may include:

Ovulation induction: a woman is given medication to temporarily enhance ovulation

Intrauterine insemination (IUI): office procedure (done by a gynecologist or fertility specialist) in which sperm is prepared and placed directly into a woman's uterus. This may be done with donated sperm.

In vitro fertilization (IVF): eggs and sperm are combined in a laboratory dish, and the fertilized egg is then placed directly into a woman's uterus. This may be done with donated sperm or eggs.

Cost of fertility care

Most costs associated with fertility evaluation are covered by public health insurance, but fertility treatments are not covered. Whatever fertility treatment you choose, there will be some out-of-pocket costs, such as:

- from \$500 per treatment for IUI to \$6000 per treatment for IVF. Sometimes more than one treatment is required. You will have to pay the physician or clinic for fertility treatments.

 Before you request a treatment, make sure to ask about the cost, and what payment options are available. Full payment may be required in advance.
- Medications Fertility medications are not covered by public insurance. If you have private insurance, talk to the insurer to find out what is covered. Not all insurers cover fertility medications, or there may be a cap or annual

- maximum. If your prescriptions are not covered, ask your insurance provider about flex options.
- Travel/Time off You may want to ask your doctor how much time off work will be required once treatment starts, how often travel or time away from home is required, and if there are options for treatment closer to home.

<u>Costs of fertility treatment</u> can be used as a medical deduction on your income tax – so keep all receipts.

Next steps

If you have a concern about your fertility, talk to your family doctor or nurse practitioner. If you don't meet the definition of infertility, he/she might suggest that you keep trying to conceive naturally.

If a fertility problem is suspected, he/she can begin the process by taking a medical history and physical exam, and ordering some tests. Your initial discussions will help your doctor to know whether to refer you to a gynecologist or urologist, or directly to a fertility specialist. You should get a referral without too much delay.

Other resources

For more information and links to valuable resources, visit the Fertility Care Pathway website at http://www.sasksurgery.ca/patient/fertilitycare.html