

Infertility Issues Can Affect Sexual Relationship



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You've been trying for months or even years to have a baby without success. Perhaps you and your partner are reaching your mid or late 30s and have begun to wonder about infertility problems. You've started to have "on demand sex" dictated

by when your egg is most likely to be fertilized, rather than when you're both most interested. As each month passes, you're becoming more concerned. You look longingly at parents with newborns silently wondering, "What's wrong with me, with us?"

The resentment, failure and feelings of inadequacy build, and you worry about being unable to fulfill your biological imperative.

What makes it even worse is the "conception expectation" verbalized by those around you. Each time you go home to see the folks, they ask, "When are we going to see some grandchildren around here?" You have less in common with your friends who regale you with endless stories about day care, the best schools or how much little Harry loved the new "Charlotte's Web" movie. Even your coworkers (who don't want to pry) can't help inquire, "When are you and your honey going to use that parental leave bonus, huh?"

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Olivia and Blake are a professional couple who have been trying to conceive a child for more than five years. Olivia is nearly 37 and conscious of her biological clock. Blake is 41 and has always wanted a child. They have a spacious home in an upscale neighborhood selected for the town's excellent school system. They have it all, except for a family. They're open

to adoption but first want to exhaust the other options. Couples with either female factor infertility, male factor infertility or a combination may go through years of costly diagnostic and assisted reproductive interventions to conceive. But Olivia and Blake were ready to do whatever was necessary.

Sometimes the problem isn't one of infertility but a range of sexual problems or other conditions, including erectile dysfunction, rapid ejaculation (before penetration), painful intercourse, vaginismus, anejaculation (inability to ejaculate despite stimulation) or retrograde ejaculation (where the flow of semen backs up into the bladder due to a structural weakness). Other times there may be a hormonal abnormality or structural problem of the reproductive organs. Certain infections and diseases also can affect fertility.

An evaluation revealed that Olivia had blockages in her Fallopian tubes and that she was a good candidate for in vitro fertilization. IVF involves retrieving mature eggs from a woman, fertilizing them with a viable sperm in a laboratory setting and implanting the embryos in the uterus three to five days after fertilization. To date, more than 3 million babies have been born using IVF and other assisted reproductive technology since the first IVF baby was born in 1978.

Olivia and Blake failed at their first two IVF attempts. As each successive attempt failed, their marital stress and disappointment worsened. At one point they seriously considered giving up and consulted me to manage their anxiety and depression. After their third IVF attempt, they were successful. Olivia gave birth to a strapping 9-pound, 2-ounce baby boy named Luke, meaning "light." So now they have their dream, and all is well, right? Not exactly. Since completing the infertility treatment, they've had no sex.

I'm seeing more and more couples who have gone through IVF successfully, but it has negatively affected their sexual relationship. When they were first trying to conceive, Olivia and Blake agreed, they had more sex than ever. At first it was fun. Sex had a measurable goal, and each month when Olivia would get her pregnancy test, Blake would excitedly wait outside the bathroom to hear the long-awaited results. But soon it became a chore. Sex became robotic, and they've been unable to recapture the romance.

I've treated many hundreds of couples with infertility or sub-fertility concerns.

Out of necessity, sex becomes mechanized and compartmentalized. Partners may unwittingly begin to view themselves and each other as participants in an experiment. Terms such as sperm or egg donor replace words like lover.

Some partners feel a more satisfying degree of intimacy, bonding and a deeper connection after the procedures, especially if there was a successful biological or adoptive outcome. But couples who had a relatively strained sexual relationship before their decision to conceive seem to have difficulty integrating the procreative and intimate elements after fertility treatment is completed.

In my practice, those who maintain an open level of communication and the ability to give and receive love throughout the process do best.

So how can you assure that you'll have a successful outcome on all levels? I suggest you use the following questions as a communication guide. Take turns answering each question. Make sure to listen carefully when your partner speaks, even if it's hard to accept what he or she is saying:

1.) How do you think this infertility experience has affected our sexual relationship?

2.) How satisfied were you with our lovemaking before we were trying to get pregnant? How do you feel about it now?

3.) If we each had a magic wand and could change one thing about our sexual relationship, what would it be? (Make this wish realistic and attainable.)

Remember the meaning of your shared creation after the "procreative" goals are reached and your bundle of joy is on this earth. Any transition requires adjustment. Don't assume that things will just work itself out. Things rarely do without effort.

In the same way you may start to save for your little one's college account at his birth, continue to invest in your loving relationship with deposits of love and tenderness. Reestablish your intimacy equity line so you'll see a steady stream of dividends throughout the lifetime of your relationship.

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The letters reprinted here are from real people, but in order to protect their privacy, some information that might identify the writers has been omitted or changed. Case material used here are composites and not intended to represent any actual couple or individual.

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