## **Explaining Infertility**

I work extensively with clients struggling with unexplained infertility and usually find basic investigations have been overlooked. This is a list of where to start, a checklist for you to keep track of what has and has not been Investigated.

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## **Unexplained InFertility Checklist**

| Basic Female Blood Tests  | <b>Result / When</b> | Knowledge Is power. Work with a<br>practitioner like me who will help you wor   |  |
|---|----------------------|---|--|
| Menstrual Hormones: FSH, LH and Oestradiol (on day 2/3 of your cycle)       |                      | <ul> <li>out what tests to do and help you to understand the results.</li> <li>When it comes to Blood Tests, do not take 'Normal' for an answer - what is normal for a GP is not necessarily ideal for fertility. Always ask for the actual results.</li> <li>Track and monitor your cycle - BBT chart you can. Really get to know your cycle, It can hold many clues.</li> </ul> |  |
| Progesterone (6/7 days after ovulation or 6/7 days before the period)       |                      |   |  |
| Prolactin   |                      |   |  |
| Vitamin D   |                      |   |  |
| Folate & B12  |                      |   |  |
| Ferritin  |                      |   |  |
| Thyroid: TSH, FreeT4, FreeT3, thyroid antibodies (TGA & TPO)                |                      |   |  |
| Testosterone, DHEA, SHBG  |                      | <ul> <li>28-32 days, 3-5 day bleed, little PMT</li> <li>Fresh, red, free-flowing bleed</li> <li>Little or no pain</li> <li>No spotting, no blobby clots</li> <li>Egg-white cervical mucus pre ovulation</li> </ul>  |  |
| Insulin Resistance  |                      |   |  |
| Basic Structural Tests  |                      |   |  |
| Tubal patency   |                      | If your cycle Isn't like that, try acupunctur   |  |
| Ultrasound (fibroids, polyps, cysts, signs, endometriosis or adhesions)     |                      | A standard NHS semen analysis does no<br>prove sperm Is fertile and long-term<br>Infertility often Involves sperm issues too<br>Male factor fertility can often be improved<br>once the cause can be identified. IVF is r<br>the only solution to male factor infertility -<br>work with someone who understands tha  |  |
| Basic Male Factor Tests   | <b>Result / When</b> |   |  |
| Semen Analysis (inc count, motility, morphology, pH, white blood cells)     |                      |   |  |
| Semen Culture   |                      |   |  |
| If there are varicocele, get them checked by a urologist (not just by a GP) |                      |   |  |
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