Optimizing natural fertility

Health care providers do not normally have concerns about natural fertility until a couple has gone 12 months without conceiving. There are a few things that affect natural fertility:

**Sex**

Intercourse every one or two days is associated with higher rates of conception. Couples trying to conceive may time intercourse for the woman’s fertile period.

**Weight**

Efforts to achieve a normal weight can considerably improve natural fertility. Obesity or being underweight (for men and women) can reduce chances of conceiving naturally.

**Lifestyle**

Couples trying to conceive should care for their general health and nutrition. In particular:

- Stop smoking - There is substantial evidence that smoking reduces fertility in both women and men.
- Alcohol and caffeine consumption, even in moderate amounts, also has an adverse effect.
- A multivitamin that contains folic acid is recommended.
- Be proactive about sexual health and seek treatment for any sexually transmitted disease.

**Timing intercourse**

Timing intercourse means making sure to have sex during the woman’s fertile period.

To identify the fertile period, start by marking the dates of your menstrual cycle on a calendar. The first day of menstruation is Day 1. If possible, keep track of these dates for a few months – you can use a calendar or smartphone app for this purpose.

If you have regular cycles, you can estimate the date of ovulation by counting 14 days before your next menstrual cycle will begin.

When in doubt, one reliable way to identify ovulation is with over-the-counter urine tests that detect changes in reproductive hormones (LH). These are called ovulation predictor kits.

Once you can roughly predict the date of ovulation, time intercourse during the six days leading up to ovulation.

It is not necessary to identify the exact time of ovulation or to have intercourse very frequently during this period – but at least 2 or 3 times.

When the following complications are present, it may be appropriate to initiate assessment before 12 months. Inform your doctor if you know or suspect:

- Sexually transmitted infection, or other pelvic infection. This can cause scar tissue that blocks fallopian tubes.
- Endometriosis – characterized by heavy, painful menstrual periods – is a common cause of damaged fallopian tubes.
- Polycystic Ovarian Syndrome (PCOS) - characterized by missing or irregular menstrual periods, or other signs of hormone imbalance such as excessive acne or facial hair – may require intervention to normalize ovulation.
- Unusual exposure to drugs (such as chemotherapy) or chemicals (such as industrial chemicals).
- Abnormalities of the male or female reproductive organs.