

Frequently Asked Questions

About the NFM Conception Program

Do I really have to give up cigarettes, alcohol & coffee?

Yes. The preconception health care period is a time of focus on detoxification and preparation. Most women would be aware that these substances are not recommended during pregnancy - however, the effects of either parent indulging in this preconception period is just, if not even more, detrimental, as so many significant events happen very early in the pregnancy.

Toxins such as alcohol, cigarettes and caffeine have been shown to have a significant impact on both male and female fertility, as well as on the health of the pregnancy and baby. Toxic effects to any cell which is in a process of division (such as sperm, eggs and foetal cells) will be carried through to the whole organism.

As the sperm and eggs need to generate/mature in a toxin free environment, these substances should be avoided for at least four months before a conception is attempted. Most of our patients find that the increased well being and energy they experience on our program more than compensates for the stimulatory effects for which they have previously relied on these substances and habits. Where there is a need for further support, we suggest consulting with our hypnotherapist.

Why do I have to wait 4 months before trying again?

To ensure the health of your sperm and eggs is optimal before conception. As eggs and sperm take approximately 3 - 4 months to generate and mature, the full advantages of preconception health care can not be experienced if conception occurs before this time. If there are additional risk factors such as increased age, or previous history of problems, or the use of assisted reproductive technology, it is even more important to complete your preconception health care before conception. The four month time period is a general, *minimum* guideline. Occasionally a longer time is required if there are particular health issues which need to have the chance to fully respond to treatment.

Can I do IVF or use fertility drugs at the same time?

In most cases, we recommend the NFM Conception Program as your first option (rather than your last, or concurrent option). If it is at all possible to have a natural and healthy conception, pregnancy, birth and baby, then this is obviously the better path to take for all concerned. There are also some practical reasons for this:

- the fertility drugs used on assisted reproductive programs interfere with and override the more gentle remedies we use, and are incompatible with preconception preparation
- preconception health care can significantly improve your chances with assisted reproductive technology procedures (if you end up taking this option afterwards). A recent study from the UK shows a greater than doubled effective rate for IVF conceptions which are preceded by preconception health care
- even seemingly intractable fertility problems are often overcome or improved while you are on the NFM Conception Program, and IVF may be rendered unnecessary
- taking the time out to do both preconception health care and natural therapy for any fertility problems can end up being time saved in the long run. Even if you are an older prospective parent the time you spend in the short term by boosting your health can be worth it in the long term because the chances of the first attempt being successful are higher
- preconception health care can help to reduce the risks which are increased for those on assisted reproductive programs (IVF etc) such as miscarriage, poor foetal or infant health problems, perinatal death.

Assisted reproductive technologies and the NFM Conception Program are not necessarily incompatible. If there is a need for IVF/ICSI or any other technology, your NFM naturopath can continue to support you through this, with a modified program, thereby further increasing the possibilities of success and decreasing the health risks involved. This can be useful for those patients whose fertility problems are not amendable to natural therapy (such as severely blocked tubes), or if conception is not achieved after some months of trying on the NFM program. Much depends on your particular circumstances. Whichever route you take, your NFM naturopath can assist you with reviewing your options and supporting you with the decisions you make. The Jocelyn Centre has longstanding relationships with many Sydney IVF clinics with referrals occurring in both directions.

But can you help if I have serious problem...?

Low sperm count:	Generally responds well to natural treatments.
Low % of motile sperm:	Causes are identified and addressed. In most cases, responds very well to natural treatments.
Poor sperm morphology:	Reasons are sought and resolved. Sperm morphology is frequently improved during the course of the program.
Irregular cycles:	Responds very well to natural treatments.
Hostile mucus:	The underlying immune, nutritional and hormonal imbalances are addressed and the problem can usually be resolved.
Sperm antibodies:	Investigations are made into the type. Response varies depending on the type and amount. Generally very successful, when occurring in the female.
Endometriosis:	Depends on severity, however generally a successful long term treatment and often used in conjunction with surgery.
Ovarian cyst:	Depends on the type, many spontaneously resolve although some require surgery. Natural treatments are conducive to resolution.
PCOS:	Polycystic Ovarian Syndrome responds well to nutritional and herbal medicine.
Fibroids:	May not be a barrier to conception, depending on position and size, although the underlying hormonal issues are considered and addressed. Surgery may be necessary in some cases.
PID: initial	Pelvic Inflammatory Disease – causative agents identified and treated during the stages of the program.
Both tubes blocked:	A serious challenge to natural fertility treatment, although mild tubal damage can often be addressed successfully. In more severe cases, the Conception Program is offered as a complement to reproductive technology.
Candida/thrush:	Responds well to natural treatment.
Stress:	Different techniques are used to reduce the inevitable stress of infertility.
Miscarriage:	Identification of risk factors is undertaken, including additional pathology tests where miscarriage is recurrent. Preconception health care can successfully address most causes, and rates are greatly reduced.

What if I'm taking other medications?

Fertility drugs interfere with any attempt to address hormonal or reproductive health issues through natural remedies, and are inappropriate while preconception health care is undertaken (though can be accommodated, if necessary, at a later stage). Other medical drugs may or may not cause problems, and can be assessed individually. Where effective natural treatments are available, it is often possible to replace these, with your medical doctor's cooperation. Similarly, there may be a less invasive pharmaceutical medication which can be used as an alternative.

Can I do the Conception Program even if I'm not infertile?

Absolutely. In fact, the NFM Conception Program has an integral aim to educate and make accessible all the concepts of preconception health care, as a standard approach for any couple planning a family.

Increasing numbers of our patients come to us without any particular health problem, but with the recognition that boosting their health is going to have long term benefits for their children and themselves. We live in an increasingly toxic world, and redressing this issue prior to conception is making sense to more and more couples. It is one of the many things we do as conscious act of parenting.

The practice of preconception health care is becoming more commonplace throughout both orthodox and natural medicine, as a sensible response to our society's increasing fertility problems.

What are the chances for older prospective parents?

Age obviously cannot be reduced by the Conception Program, but the biological ageing factors that affect ovarian and testicular activity are able to be addressed to a degree. Many people well into their 40s use the NFM Conception Program to boost their reproductive health and improve their chances of pregnancy. We see a large number of older prospective parents, and many conceive and go on to deliver healthy babies. The Conception Program can be particularly appropriate if you are older, as it not only increases the chance of a conception – it also minimises the chances of problems associated with age such as foetal abnormalities and higher incidence of miscarriage.

Although you may be in a hurry to conceive due to your age, it can be well worth the wait for the effects of preconception health care to take place, as this can save you much time and disappointment in the longer run by decreasing the chances of problems with your baby's gestation, birth and general health.

Many of the increased risks associated with older parents have been shown to be associated with the greater toxic exposures and nutritional deficiencies associated with a longer life. There are also several nutritional remedies which support the mitochondrial function in the eggs and sperm (the energy store house). Even genetic and chromosomal problems have been shown to respond positively to nutritional supplementation and detoxification.

However, older parents do need to be aware of their reduced chances and be realistic about their commitments. You can discuss your individual circumstances with one of our naturopaths at your introductory consultation.

What if my infertility is not a diagnosed problem?

This is a common situation for couples we see. With no evidence of particular reproductive health problems, there seems to be 'no reason' for a lack of conception. Often this is caused by a combination of various minor nutritional deficiencies and sub clinical health issues in both partners which can prevent a healthy conception occurring. These cases are often quite straightforward to resolve through the conception program. Our doctors also test for a range of infections not typically tested in Australia and our naturopaths test for toxic levels of heavy metals with urine/hair analyses. Sometimes this can throw light on hidden issues which we can address through an appropriate combination of natural and orthodox therapies.

How long do I try to conceive before realising that there may be a fertility problem?

A lack of conception after six months of trying (during fertile times of the woman's cycle) might indicate some sort of problem, although the medical diagnosis of infertility is only made after one year.

Even without the diagnosis of a specific fertility problem, the NFM Conception Program can still improve your chances of conception.

And even if there is no concern with fertility problems, all prospective parents can benefit from the significant advantages of preconception health care.

Can I choose the gender of my child?

The NFM Program does give an option for sex selection in some cases. A combination of methods taught to you on the program greatly increases the chances in favour of the desired gender, but cannot be guaranteed. This option is not realistic for couples experiencing fertility problems, as the aim then is for any conception at all, regardless of gender, and by practicing sex selection you may reduce your chances of conceiving.

Please refer to the introduction section of this booklet for more information on sex selection.

I'm single – can I do the Conception Program?

Although there are obvious advantages to having both prospective parents undertake the NFM Conception Program, we understand that this is not always possible. Where a sperm donor is being used, it will still be very helpful for the prospective mother to carry out preconception health care. We have also worked with sperm and egg donors, where appropriate.

But I have a very good diet already...

The modern diet is generally lacking in essential nutrients. This is because of many factors in modern farming and food preparation methods resulting in low nutritional levels in the foods we consume. When this is combined with a modern preference for prepackaged, processed and chemical laden products there is a gradual and detrimental decline in overall health, including reproductive health.

Even if you are already careful to eat in a healthy manner, you may be unaware of many specifically helpful dietary requirements for good reproductive health, and healthy children. It is also virtually impossible to receive the level of nutrients you need from diet alone, even if your food is organic and nutritious, due to the rising toxicity of our environment, which increases our requirements.

For example, in the 1983 Australian Dietary Survey it was found that 74-83% of females of reproductive age did not receive the RDA (recommended dietary allowance) for zinc. Zinc is essential for the hormonal health of both men and women, production of normal sperm, the proper development of the foetus and a healthy pregnancy. Unfortunately it is present in fewer and fewer foods (due to farming and processing methods) and, as a front-line antioxidant, depleted by increased levels of toxic exposure.

Amongst a multitude of other significant findings, it has been shown that prenatal multivitamin and mineral supplements can reduce the incidence of pre-term delivery, low birth weight, infant morbidity and mortality, while antioxidant vitamin supplementation has been demonstrated to decrease the incidence of pre-eclampsia. Whilst it is now well known that folic acid supplementation can significantly reduce the risk of spina bifida in your baby, most other nutrients have also been shown to be essential for foetal development and prevention of miscarriage.

Even when the diet is purely organic, with properly purified water and with an absence of unhealthy substances, this is not enough to ensure our optimal reproductive health. Supplementation is still needed as well as adequate treatments for the stored and current impact of environmental toxins on nutritional status.

Does my partner have to do the program?

Yes, if at all possible. Whilst it is essential for the woman to be involved, as she needs to monitor her cycle, it is also becoming more and more apparent that the prospective father is at least as responsible for conception, foetal health and avoidance of miscarriage. This is because sperm are even more vulnerable than eggs to the effects of toxicity and nutritional deficiency. This is the case whether you are coming simply for preconception health care or you are also addressing fertility problems. Often, infertility is the result of a matrix of smaller reproductive health issues in both the male and female. It is not usually all due to one issue in one partner. We aim to resolve enough of these issues to a satisfactory level, before you try for a conception. Having both of you on the program therefore doubles the chance of resolution of these issues simply because you are both undergoing treatment. It also means both of you have done the preconception health care and therefore have optimally healthy eggs and sperm to further enhance the chances of a healthy conception, pregnancy, birth and baby.

If only the prospective mother comes, she has less chance of success on her own. Often, in orthodox approaches, it is the female who experiences most (if not all) of the treatment procedures. But this is very different with the NFM Conception Program, where both prospective parents are equally responsible and involved from the very beginning. Many of our patients come to experience this as an opportunity for the increased involvement of prospective fathers in parenthood, and as an early adjustment to the new kind of teamwork that is demanded of a relationship when parenting begins.

If your partner is not able to come, we can still offer you many benefits and this does not mean it isn't worth doing the program. It just won't necessarily be as effective.

Will I lose weight on the Conception Program?

Most people who follow our dietary recommendations will lose weight – if they are presently overweight. Both over and under weight problems can adversely affect fertility, and weight loss (or gain) can be an important part of therapy.

Do I need to avoid conception during preconception health care?

You will be practicing natural contraception during preconception health care, to avoid conceiving before your preparation is complete, so that your pregnancy and baby can fully benefit. Back-up contraception, such as condoms, can be used at times you identify as possibly fertile. This method has been shown to be greater than 99% effective if used correctly. However, if a conception did occur, there will be, in most cases, no detrimental effects. If your naturopath needs to use remedies which are better avoided during pregnancy, she will inform you, and you can take particular care to avoid conception.

If you have any further questions about the NFM Conception Program, please call our staff or book in for a (free) half hour introductory consultation where a naturopath can answer your specific questions.

Natural Fertility Management Pty Ltd
The Jocelyn Centre

www.fertility.com.au