

When To Seek Mental Health Support During Conception
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Infertility is an extremely stressful event in one's life. Month after month of failed attempts to conceive takes its toll as one begins to realize all the losses represented by infertility. Common feelings include guilt, anger, hostility and sadness. Loss of self-esteem occurs. Relationships with partners can be strained and your sexual relationship suffers. For many, it is difficult to be around others that are pregnant.

Each individual and couple manage their grief differently. Many are able to find the support they need through friends and family. Others make use of support groups, telephone coaching groups, reading materials-books, articles-and resources offered through various websites. Some are able to depend on their partner as their main support. In addition, the circumstances during which emotions are most difficult can vary. Many find that they are most emotional during procedures and while awaiting the results of a pregnancy test. If there is a break from procedures or attempts to conceive, the stress of attempting to conceive can fade for a time, allowing a return to regular routines and interests.

For some, attempts to conceive become all consuming. As infertility persists, it can be difficult to feel good again even when not doing procedures or waiting for test results. The sadness and uncertainty can persist. It might be difficult to keep from crying at times when it is not appropriate (ie: work, social situations). If you are prone to anxiety, this can intensify in the form of constant worry or panic attacks. Infertility or tests can become the sole focus of life to the exclusion of previous interests. Things that used to bring you pleasure might not anymore. Withdrawal from friends or family can occur. Sleep, energy and appetite changes can occur. Communication difficulties can arise with your partner, so that neither of you is comforted or understood by the other.

Though many of the responses mentioned above are typical reactions to infertility, some overlap with symptoms of depression and anxiety. When they occur to the extent that one feels they are unable to manage them or they contribute to a significant change in functioning, a mental health professional can work with you to determine the best way to help you cope and function as best you can during a most difficult experience.

Working as a psychiatrist, I know that, for most, there is a stigma attached to seeing a mental health professional. It's easy to fall into the mindset of "I must be crazy." Or "The doctor or nurses must really think I am crazy to send me to a counselor." Or "I should be able to manage this on my own." So, let's clarify a few things. First, you are not crazy, not in the true, clinical sense of the term. You might feel out of control (and let's face it, you aren't in control of this situation), but you are not crazy. Second, help can take many different forms. You will not automatically be medicated or hospitalized. You will not be forced into years of therapy to discuss your mother.

It is important for you and your mental health professional to consider the ways in which you have handled stressful situations in the past, including loss or the threat of loss, what your coping

style is, where you find support and connection presently, and whether you have had problems with depression or anxiety in the past. This information will contribute to the development of the best strategy to help you cope. This can include learning tools to deal with anxiety and difficult situations, alternative ways of thinking about the situation, and focusing on the things you can control. Communication skills can help couples learn to work together and not make erroneous assumptions about what the other's thoughts or feelings are. These skills can be learned either in a group setting, individual counseling or couples' counseling. Many find relief from the knowledge that others have had similar experiences.

For some, talk therapies or skills training is not adequate to relieve their distress enough to allow them to function better. In these cases, it might be necessary to consider a medication to allow for optimal control of symptoms and improve function. This is a difficult decision for many reasons. I will take up the topic of psychiatric medications during attempts to conceive in my next article.