

Managing Today's Fertility Patient

Aimee Raupp, LAc

I recently received an email from one of my fertility patients:

"Got my lab results back. FSH is 11, AMH is 0.7. My doctor said these numbers aren't good. I guess I'm infertile. Just as a thought. Just set up an appointment to speak with an adoption agency."

Here's the back story: she's 33, recently married and has been trying to conceive, without success, for six months. From a Traditional Chinese Medicine perspective she has Liver blood deficiency and Kidney *Qi* deficiency. Her menstrual cycle comes every 28 days with some spotting a few days before her period begins, the flow is light in amount and pale red in color. She's regularly ovulating at mid-cycle with minimal cervical mucus. Yes, there are definitely some 'kinks in her system' that need to be worked out, however from a TCM perspective (and my clinical knowledge) there's no reason she can't conceive once balance is restored in her body. But, from a Western medical perspective, she is getting a different "story." As her doctors have told her, based on her FSH (follicle-stimulating hormone) and her AMH (anti-mullerian hormone) her ovarian reserve is "diminished" and her chances of "natural" conception are low. And, so this patient has now lost a bit of faith in her body's ability to conceive.

How do we manage this situation in our clinics?

Sure, this Western medical information is useful. And, in some cases the Western medical information can be extremely useful. However, I see it also do a lot of harm clinically. The means of identifying a woman based on her lab work and her ovarian reserve is emotionally damaging, often it blocks the heart *qi*, induces fear thereby negatively affecting the kidney energy and as I see it—it hurts the uterus. And, as we know, all of these emotional damages can definitely affect a woman's ability to conceive. For the TCM practitioner, treating fertility patients in the Western medical paradigm adds another layer to what we are treating - one that is wrapped in fear and anxiety. I know there are some TCM practitioners out there who will not treat fertility patients who are also undergoing Western medical fertility treatments, but I am not one of them.

I, of course, prefer at least three to six months of working with them using acupuncture, Chinese herbs, nutritional and dietary modifications before they decide to pursue or revisit Western medical treatments. But, often women come in so anxious and worried about their ability to conceive—because of what their doctors have told them about their age and fertility, or because of what they have read on the Internet about fertility or because one or more of their friends had a hard time conceiving—whatever the case may be, asking them to devote more time to a proper TCM treatment protocol typically induces a lot more stress. To me, I still take on those cases as I feel the work I do with them can still benefit them, wherever they may be in their fertility journey.

Unwrapping the deeper layer of emotional turmoil that affects our fertility patients has to become part of our treatment protocol. Most all of us would admit there's an element of "talk therapy" to our medicine. We actually take the time to hear our patients and to support them emotionally. This, I feel is an imperative piece for us all to take into account when we are treating any patient,

particularly those given diagnoses that instill fear and cause them to doubt their bodies.

In my latest book, *Yes You Can Get Pregnant: Natural Ways To Improve Your Fertility Now & Into Your 40's*, I spend a good amount of time discussing the emotional component to fertility and the effects that emotions such as anxiety and fear have on one's ability to conceive. My primary goal in my book, and in my clinic is to restore my patients' faith in his or her body. The mantra throughout my book is: you have the power to change your health and improve your fertility.

I feel it is part of our job to remind our patients of that. We are facilitators on their journey towards optimal health and the emotional component weaved into a patient's Western medical diagnosis is very real and very threatening to the patient's outcome. Factoring in the negative repercussions that our clients are experiencing from their Western medical diagnosis, the media and their peers is a very big part of the clinical picture we are treating. And, instilling hope and encouragement in such clients is an imperative piece to our treatment protocols.

Often, I tell stories of other patients who maybe had a similar FSH or a patient who struggled with getting pregnant and then eventually did conceive and carry to term. I share all of the hopeful and inspiring stories and I challenge my patients to see the good in all they are experiencing. I create a safe space for them to talk through their fears and their anxieties. I let them know that I am a part of their team and the emotional support I offer is a tremendous piece to their healing process. I encourage all of us to offer such support in our clinics and to continuously recognize the importance of rebuilding our patients' faith in their bodies and in their health. As I always tell my patients—it is my job to see your wellness, not your illness.

NOVEMBER 2014