

The Mental Health Effects of Assisted Reproductive Technology

Shae Malham OMS-II and Kristin Z. Black, PhD, MPH

DeBusk College of Osteopathic Medicine, Lincoln Memorial University, Knoxville, TN 37932



Abstract

In this research project, I explored how mental health and undergoing ART are intertwined. Through a literature review, published researched about mental health and its relation to ART was reviewed to find key information regarding the mental health effects of ART. Following the literature review, interviews were conducted with seven women to gain a better understanding of their lived experiences undergoing ART treatments. The purpose of this study was to learn more about the lived experiences of women who go through fertility treatments and how the journey through infertility and trying to conceive a child influences their mental health during subsequent pregnancies and beyond.

Introduction

- Assisted Reproductive Technology (ART) is defined as reproductive assistance that handles either eggs or embryos to increase fertility rates (CDC, 2019c)
- Infertility is defined as “not being able to get pregnant (conceive) after one year (or longer) of unprotected sex” (CDC, 2021a)
- Infertility affects approximately 9% of married women between the ages of 15 and 49 within the United States (CDC, 2019b)
- In vitro fertilization (IVF) is and has been the most popular and successful ART treatment since its first successful embryo transfer in 1978
- Another common example of ART treatments includes intrauterine insemination (IUI)
- Study Purpose:** Through this research project, I conducted a literature review and interviews with women who have previously been through ART treatments, with the goal of learning more about the mental health effects of fertility treatments on women

Methods

- Key information regarding the mental health effects of ART was reviewed through a literature review of published research about mental health and its relation to ART
- Interviews were conducted with 7 women to gain a better understanding of their lived experiences undergoing ART treatments
- The interviews were one-on-one and lasted anywhere from 30 minutes or one hour
- The interviews were all conducted virtually via Webex
- The data were transcribed and analyzed using an array of qualitative tools, including memoing and identification of key topics
- The key findings were summarized and developed into four main themes

Findings

Continued failure with ART or miscarriages increased depressive symptoms and negatively influences women’s pregnancy journey

- “Why would I get to take this baby home? I’ve never gotten to take one home.” (Participant 1)
- “A rollercoaster I would say that there are long periods of time where I feel okay. And then there are still like mentally, like, I definitely have post- traumatic stress from infant loss that carried into my next pregnancy.” (Participant 3)

Cost associated with ART treatments increased stress experienced by the women and their partners

- “I think like, not only like the mental side, but also, the cost side of it can be mentally draining as well. Like, how are you going to pay for it every month? And, I mean, I did IUI, and it isn't as expensive as IVF but when you're planning down the road this is what I might have to do and 99% of insurance probably don't cover it.” (Participant 2)

Despite negative emotional and physical experiences with ART treatments, all women declared they would use ART treatment again

“Yes, I definitely think I would. I think it all depends on your doctor. Like, if you have a really good doctor that is up front with you from the very beginning and is there to support you then, yes.” (Participant 2)

The ART treatment journey can be isolating

- “I kept to myself, and it's a very isolating thing to go through” (Participant 3)
- “Because when it happened to me, I felt like 1 in a million with no one to talk to and no one who understood.” (Participant 3)

Discussion

- Change needs to occur in current medical insurance coverage to include ART treatments to reduce monetary stress placed on the women and their partners/spouses
- Failed ART treatments can lead to feelings of fear and uncertainty with a positive pregnancy test. These feelings need to be address prior to ART treatment
- When discussing their experience with ART, the women also included suggestions for those considering ART treatment such as finding Facebook support groups and a mental health specialist outside of their partner/spouse prior to and during treatment to help with the negative emotions that could arise during ART treatment

Limitations: This research study was conducted during COVID-19. This did not allow for many in-person interviews; as well as limited my ability to interview as many woman as I had originally wished. Safety precautions were in place to ensure that health was the number one priority throughout the interview and recruiting process.

References

- Centers for Disease Control and Prevention. (2021, April 13a). *Infertility*. Centers for Disease Control and Prevention. Retrieved December 13, 2021, from <https://www.cdc.gov/reproductivehealth/infertility/index.htm>.
- Centers for Disease Control and Prevention. (2019, December 2b). *FastStats - infertility*. Centers for Disease Control and Prevention. Retrieved December 13, 2021, from <https://www.cdc.gov/nchs/fastats/infertility.htm>.
- Centers for Disease Control and Prevention. (2019, October 8c). *What is assisted reproductive technology?* Centers for Disease Control and Prevention. Retrieved January 13, 2022, from <https://www.cdc.gov/art/whatis.html>

Acknowledgements

I would like to thank the women who chose to share with me their story regarding their experience with Assisted Reproductive Technology. I would also like to thank Dr. Kristin Black for mentoring me through this research project. Lastly, I would like to thank the Undergraduate Research and Creative Activity Committee at East Carolina University for choosing to fund the research project.