

BEING INFERTILE  
IS LIKE JOINING THE WORST CLUB  
IN THE WORLD, BUT A  
CLUB WITH THE BEST MEMBERS.



WELCOME TO THE CLUB!



Before we start, we'd love to give you some useful information to help you as you navigate infertility.

Visit the special page on our website for readers of *The Man's Guide to Infertility*:

**[www.InfertilityMan.com/MansGuide](http://www.InfertilityMan.com/MansGuide)**

- ▶ Download lists and useful printouts that will help as you are experiencing infertility, including a Fertility Calendar, IVF Budget Template and a list of questions to ask your doctor.
- ▶ See funny videos showing the authors through years of infertility.
- ▶ Download IVF Milestone Cards to use through your own fertility treatment.
- ▶ See the cartoons in the book in full colour.
- ▶ Join The Men's Infertility Group to connect with other men who are going through similar experiences.

It can explain why people struggling with infertility may become upset when people say things like “Why don’t you just adopt?” or “Just relax, and it will happen!” The reason is because they are not in the corresponding mindset to receive that advice. Suggesting that they just relax and it will happen is only relevant in Mindset 1 and advice about adopting is only relevant to those in Mindset 6. Of course, the best option for well-meaning people is to provide no advice at all. Advice giving without being asked is insensitive and shows a lack of understanding of what would truly help someone in one of these Infertility Mindsets.

## THE 7 MINDSETS OF INFERTILITY



Understanding the Mindsets of Infertility is useful if:

- ▶ You want to understand your partner’s behaviour, it can help to know which mindset they are in.
- ▶ You are struggling with insensitive things people say, then knowing your current mindset can help you to understand your negative response to unsolicited advice.
- ▶ You want to support someone you care about, taking the time to understand which mindset they are in can help you tailor your response to them.

Understanding these mindsets is important within a couple or baby-making team. What happens when you and your partner are not in the same mindset?

# THE THREE POTENTIAL PITFALLS OF MALE FACTOR INFERTILITY

## FROM JON



*Male Factor Infertility is not often a topic of conversation. It is very difficult for men to find quality information to help them when they are faced with this diagnosis. Even the information that men receive from their doctors might not give them all that they need to make the right choices.*

*As we tried to seek treatment for my azoospermia, we discovered three potential pitfalls where men often make incorrect assumptions and decisions as they seek treatment. I certainly made mistakes with two of them and I almost did with the third. I believe that if I hadn't learned this information before making choices about my treatment, then it would have been unsuccessful. I shake my head in disbelief when I think about how close I came to almost ruining my chance of successfully retrieving sperm.*

### 1. Supplementing Testosterone

Men with low testosterone may mistakenly assume that supplementing testosterone will help with their sperm production. Even doctors may prescribe it, not understanding the potential negative effect on male fertility.



*There are two functions for the testicle: one is to make sperm and one is to make testosterone. And they often go hand in hand, but not always. This is because the sperm making parts of the testicle and the testosterone making parts of the testicle are separate. Often when somebody has severe problems with sperm production they also may have problems with testosterone levels. People try to do the right thing, they think 'I had better try to boost my testosterone', and they supplement with a testosterone medication they may have been prescribed or sourced themselves. That is, in fact, the worst thing they can do for their sperm - taking testosterone actually kills sperm. - Dr Daren Katz*

It helps all members of your team to be clear about when fertility talk is happening and when it is not.

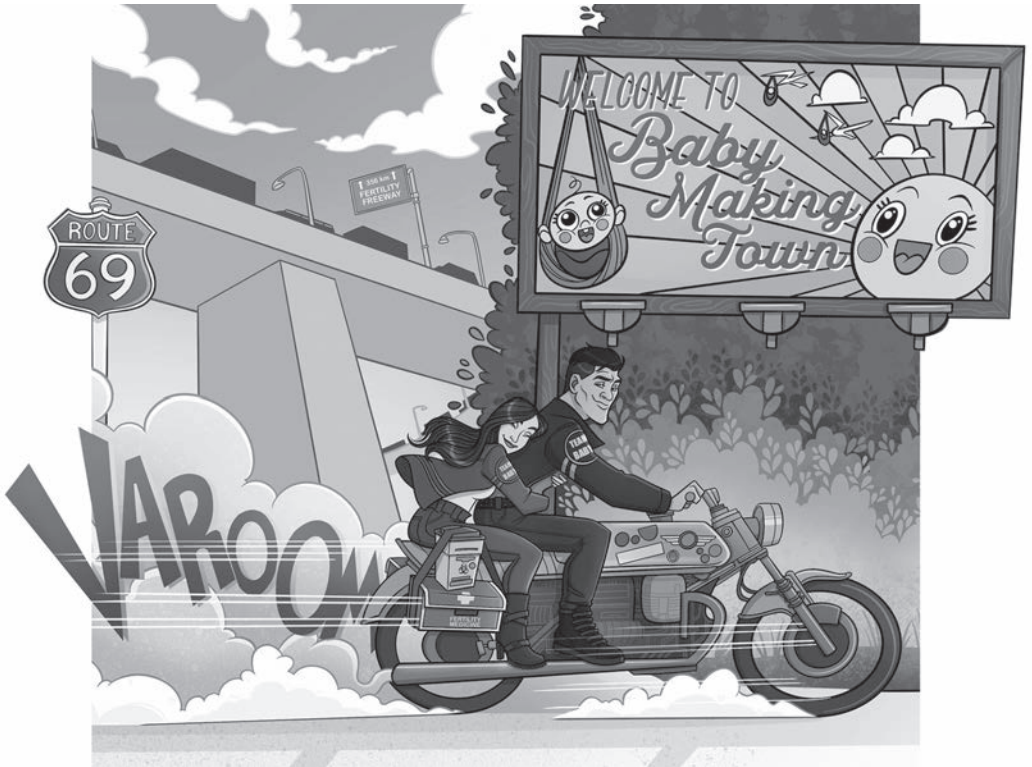
The Baby-Making Meet Up pages in this book include conversation starters and questions to discuss with your partner or Baby-Making Team. You could write the answers to the questions in a journal to clear your own mind and focus on your fertility goals.



---

*We stuck together through all of those years when we were doing IVF, we were stronger together. - Thomas*

---



will go through the pregnancy and birth. The tests and procedures are pretty invasive, complicated and emotionally draining. Whether you have male or female factor infertility, the 'burden of treatment' will be with her. No matter how badly you want to have a child, her physical and emotional wellbeing is of paramount importance.



*IVF takes a huge physical, hormonal and emotional toll on a woman. Sometimes I felt totally ineffective. I questioned my masculinity, my sense of myself as a man, through those rounds of IVF.*

*We have to realise that infertility is difficult for men too. During consultations, I felt the conversations were always directed at my wife. I felt like I had to say, 'I'm*

*here too.' I'd deliberately ask a question just to make my presence felt. - Lucas*

---

This book is to guide you through your fertility journey. It will explain how to provide the best support to your partner or team. Many people have been through the experience of infertility and have come out the other side. And everybody does get to the other side, in one way or another. The aim is to get through the experience while protecting and nurturing your relationships and the mental health of your entire Baby-Making Team.



*My advice for everyone: ask questions, be patient with the process, take it one hurdle at a time. And BOTH partners need to focus on self-care. Inevitably one partner (typically the one with ovaries and a uterus) is doing more tests, procedures, interventions and it's easy for the other partner to put their own needs last.*

*We cannot fill from an empty cup; it's important to take care of both partners' needs in the process. - Dr Lora Shahine*

---