

## CASE STUDY

# Disenfranchised grief: Exploring the impact of infertility on mental health

Erin and Adam are both 38 and have been together since they met in university at the age of 19. They both spent 10 years studying and building their careers. Erin is in human resources management and Adam is an engineer. They started living together from the age of 24 and married at the age of 32. They put starting a family on the backburner to focus on other life goals such as building their careers, paying for their wedding and saving for their first house. Neither of them have had previous pregnancies.

Erin has become increasingly anxious about their age and has finally convinced Adam that they need to start a family before it is too late. Once they agreed to start a family, Erin went off the pill and they were fairly relaxed about the whole thing. However, after 12 months of trying without success, Erin suggested they go to the GP to have tests. Adam felt this was a bit ridiculous but Erin wore him down and he eventually agreed.

Before going to the GP, Erin researched infertility and IVF (in vitro fertilisation) extensively, preparing for the worst. Erin's research indicated that if she needed infertility treatment, it was necessary to have certain blood tests.

At the GP appointment, Erin insisted that he order the blood tests she had read about. The GP agreed, also suggesting a referral to an IVF clinic to see a fertility specialist as Erin and Adam's age could be a concern.

Erin made an appointment with the fertility clinic; however, there was a four month wait for the first appointment. It was the longest four months of Erin's life, especially because the couple weren't having any luck falling pregnant on their own. At the first appointment, the fertility specialist explained that certain factors, including age, diet, exercise, stress and vitamin levels could affect fertility. The specialist prescribed some supplements; ordered a number of tests for them both; and spoke to them about diet and exercise. At that point, the specialist had no other concerns as Erin and Adam didn't really drink alcohol, except on social occasions, and neither of them smoke. Both Erin and Adam were quite healthy and not overweight. The specialist explained the IVF process and prescribed an IVF protocol for their first cycle. In addition, they were asked to make an appointment with the fertility nurse and counsellor within the next month.

One month later, they saw the fertility nurse and counsellor who gave them instructions on how to safely use the prescribed IVF medications and the potential side effects and risks involved. The counsellor provided an extensive counselling session covering previous mental health history and current concerns and expectations around the IVF process and outcomes. As the couple were now approaching their 40<sup>th</sup> birthdays, Erin's anxiety about becoming pregnant was escalating, so they decided to proceed with the first IVF cycle. This is the point that things started to become very difficult. Erin was now quite often moody, feeling bloated, sore and bruised from multiple injections.

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She was also experiencing fatigue and low blood pressure has made her dizzy which caused her to faint twice. She has undertaken two IVF cycles and a number of unsuccessful transfers.

Erin was starting to lose hope of becoming a mother. None of her eggs fertilised at the third cycle. They did fertilise at the fourth cycle; however, the embryos didn't develop to allow for suitable transfer. The fifth cycle was the same as the fourth. Adam and Erin's finances are becoming very strained. Erin has gained weight and she is finding the constant medical appointments, time off work, scans and blood tests; and jabbing her body with needles very draining. Erin and Adam are fighting more, especially when Erin is not feeling 100 per cent. Adam is starting to question whether the strain is worth it, and when he raises this with Erin, it just makes her feel more like a failure. She has begged Adam to try just a few more times.

Shortly after turning 40, and just as they were losing hope, the sixth cycle resulted in a successful transfer. Erin and Adam were both so excited but also hesitant to get too emotionally carried away as they had been told many women can miscarry. As it turned out, they were one of the unlucky ones, with Erin having a miscarriage at seven weeks. Erin was devastated and Adam said they had to sit down and have a really serious discussion about whether it was all worth it. Once again, Erin begged Adam to continue. Adam said they would be short financially for another cycle but he was prepared to take out a bank loan.

At cycle seven, the pregnancy lasted four weeks when Erin miscarried again. It was so painful and sad that Erin couldn't stop crying for days. She has now used all of her annual leave for appointments and recovery from two miscarriages. Adam kept asking Erin how much more she could take.

It's four months later and the couple are now approaching 42. Once more a hopeful Erin begs:

"surely it will work this time". The constant focus on medical appointments, cycles, injections, transfers, hospital stays and time off work has placed increasing strain on their relationship. Even though Erin was at breaking point, and feeling exhausted, she just couldn't give up. Their eighth cycle was another disappointment, when they were once again told that the embryos were not viable. How much more could they take?

"One more time, one more time", Erin pleaded. They were now heavily in debt and had even borrowed money from Adam's parents. Adam agreed to one more cycle on the proviso it would be the last time, regardless of the outcome. However, just as Erin felt there was no hope, they finally had success. Although relieved, Erin constantly thought of her previous miscarriages. She was so scared and wanted to tell her family and friends but they decided to wait until she was at the 15 week mark. At 10 weeks, Erin miscarried.

Erin felt defeated. She had already started to feel a bond on learning of this pregnancy which deepened her sense of grief and loss. Erin was feeling quite alone as she hasn't told any friends about the IVF treatment. Adam has tried to be supportive but is struggling to continue being positive. Despite his feelings, he tells Erin "not to worry, it will happen eventually", But Erin feels like she is losing faith in her ability to ever have a baby. She has started to feel quite low and finds herself crying frequently. Adam suggests she try to distract herself by focussing on work.