



Preconception Counseling

Patients frequently consult their Ob/Gyn about their fertility potential. Many do so before attempting pregnancy, while others do so after trying on their own. Researchers estimate that approximately 85% of couples will conceive on their own after one year. Couples unable to achieve pregnancy after twelve months of timed intercourse are considered to be “infertile”. The following is a summary of what you and your partner can do as you are attempting pregnancy.

Timing of Intercourse

Women who have regular menstrual periods at monthly intervals marked by premenstrual symptoms (PMS) and menstrual cramps are almost always ovulating. The majority of women with a 28 day cycle will ovulate on approximately day #14 (day #1 is the first day of your period).

However, many women have cycles which are sometimes shorter or longer, and therefore may ovulate on days other than day #14. The optimal timing of intercourse is approximately every other day, days #10-18 of the cycle. However, many women will need to expand this range, especially if they have irregular cycles.

One should begin charting their menstrual cycle to establish a pattern and help determine when they are ovulating. Cervical mucus (vaginal discharge) also changes around ovulation and becomes more watery. Noting this change is another tool to help you determine the time of ovulation.

There are several means to confirm ovulation but often these are unnecessary for the couple initially attempting pregnancy. These include basal body temperature charts, ovulation kits, blood tests, and cervical mucus evaluation.

Age

There Many women are concerned about the impact their age will have on their ability to conceive and have a healthy baby. Fertility rates do decline gradually as one ages, and the likelihood of a miscarriage increases. Chromosomal abnormalities such as Down syndrome also increase with age. Older women are also more likely to have more medical problems which may impact their pregnancy, or develop problems specifically associated with pregnancy (preeclampsia or diabetes). However, many women over age 35 have uncomplicated pregnancies that produce healthy babies!





What should I do to prepare ?

It is important to maintain a healthy lifestyle when attempting pregnancy. Avoiding tobacco, limiting alcohol, and avoiding drugs are very important. Caffeine intake should be limited to one or two beverages per day. Maintaining a normal body weight also increases fertility and decreases complications associated with pregnancy. Following a regular exercise program and eating a balanced diet is also beneficial. It is advisable to begin a prenatal vitamin when one is attempting pregnancy. One should ingest 0.4 mg of folic acid per day to prevent birth defects of the spinal cord.

Do I require any testing before getting pregnant?

Unless you suffer from any major medical problems, preconception testing is somewhat limited. Available testing includes HIV, rubella, varicella (chicken pox), cystic fibrosis, sickle cell, and hepatitis B and C. If someone is found to be at risk for rubella, hepatitis B, or chicken pox, vaccination is possible prior to attempting pregnancy.

Certain genetic testing may be considered for certain cultures prior to conception. For example, African Americans are at higher risk for Sickle Cell anemia, Caucasians are increased risk for Cystic Fibrosis, and Ashkenazi Jews are at higher risk for Gaucher's Syndrome and Tay Sachs Disease.

When do I consult the doctor if I'm having trouble getting pregnant?

If you have been trying unsuccessfully for 12 months (6 months if you are 35 or older), you should consult your OB/GYN provider.

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