

# Involuntary childlessness more detrimental than originally thought

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Test-tube fertilisation is the reason why more couples than previously now have the chance to become biological parents. However, the path to achieving this can be laborious and, for some, the treatment is unsuccessful. A thesis from the University of Gothenburg, Sweden, indicates that people are more negatively affected than previously reported in studies of involuntary childlessness.

In the thesis, interviews have been conducted with women and men for whom test-tube [fertilisation](#) (known as in vitro fertilisation or IVF) was concluded two years previously without resulting in childbirth. All the men had a diagnosis of severe male factor [infertility](#) and in the interviews, the men and women described their experiences of involuntary childlessness.

The study shows that childlessness amongst women feels like bereavement whilst the men's perception is described as climbing a mountain one step at a time towards the summit to achieve the goal of forming a family. The men often feel frustrated by not knowing the cause of the infertility; the emphasis is often on the woman and a sense of marginalisation can arise. For the men, the driving force is forming a family and they selflessly protect their loved ones by taking on responsibility for the situation.

Furthermore, quality-of-life, wellbeing and health were studied as well as the experience of childlessness in couples who had concluded IVF treatment around five years previously without it resulting in childbirth.

"We then compared this group with couples for whom the treatment had resulted in childbirth, plus a control group of parents without infertility problems who had children of the same age," says Marianne Johansson, researcher and midwife at the Institute of Health and Care Sciences.

Two hundred couples in each group were invited in to complete a questionnaire. Men and women were also studied separately and compared with each other.

The results showed that 77% of those couples concluding public sector IVF treatment after five years were living with children, just under 40% had biological children, usually after a further IVF treatment under private care, and around 35% had adopted children.

Those couples living without children, both men and women, had a significantly poorer quality of life than those for whom IVF treatment had been successful and also in comparison with the couples in the control group.

"They perceived their infertility as central to their lives and above all that quality of life amongst men without children was more negatively affected than had been previously reported in studies of involuntary childlessness," confirms Johansson.

Johansson therefore considers it important that the health service should allow time for supportive discussions following the conclusion of treatment in which the emphasis is on the couple's - the man's and woman's - reactions and thoughts regarding infertility and the future.

"I also believe that the health service should strive to reduce the group in which IVF treatment has not succeeded. In some cases, this can take place by offering the couple a number of further treatments," says Johansson.

Provided by University of Gothenburg

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