

Log In / Join

what to expect.

Search

Advertisement

Getting Pregnant

Fertility

Ovulation

Preparing for Pregnancy

Pregnancy

First Year

Toddler

Family

Baby Products

Registry

Community

News

Getting Pregnant > Fertility Tests and Treatments

8 Surprising Facts About Fertility



by **Judy Koutsky**
Reviewed on August 20, 2018 ✓

Stocksy



Women have higher infertility rates than men, plus other fertility myths -- busted.

You might think your odds of getting pregnant after 35 are pretty low. Not true! Read on for eight surprising facts (and myths) about fertility:

Advertisement

1. If you're 35 to 40 years old, you're

more likely to get pregnant than you might think.

Some women fear that if they hit 35 and haven't yet become pregnant, they won't ever become a mom -- and for most women, that's simply not true. "It's well known that fertility begins to decrease more quickly after age 35; it's estimated that [10 to 30 percent of women](#) ages 35 to 40 may experience infertility," says Alice Domar, M.D., a specialist in infertility care and the director of Mind/Body Services at Boston IVF in Massachusetts. What that means, she emphasizes, is that 70 to 90 percent of women in that age group [are, in fact, able to conceive](#) a healthy baby within a year.

2. But you're also more likely to miscarry the older you are.

Egg quality goes down over time, decreasing slowly after the age of 25, more steeply after age 35, and then dropping sharply after age 40. For that reason, [miscarriage](#) rates follow the same pattern. But it's not just a woman's age that counts: Sperm quality decreases too, which means the age of your partner also has an impact on fertility and miscarriage. Dr. Domar points to a [British study](#) published in *Human Reproduction* that showed for every five-year increase in a man's age,

there was a significant decrease in his sperm volume and the percentage of normal sperm. She also points to [a British study](#) which found that it took couples significantly longer to conceive when a male partner was older, especially over the age of 45.

Read This Next

Egg Freezing



Freezing Your Eggs



6 Pieces of New Mom Advice I Didn't Follow

passover



Passover Activities for Kids

3. Smoking can add 10 years to your fertility age.

"Smoking can, in effect, add 10 years to [a woman's] reproductive age, so that a 25-year-old smoker is as fertile as a 35-year-old non-smoker," says Dr. Domar.

Alcohol can also impact fertility in both men and women. [Some research has shown](#) that women who drink heavily make take more time to conceive when you smoke and drink, the combined impact on fertility can be drastic, says Dr. Domar. Luckily, within 30 days of quitting smoking, your body begins to repair the damage — and in time your fertility rate improves. Ditto for abstaining from alcohol.

Related Topics

[Fertility Tests and Treatments](#)

[Getting Pregnant](#)

[Getting Pregnant Groups](#)

Advertisement

4. Being overweight — and underweight — is associated with lower fertility rates.

Weight does impact fertility [in both men and women](#). Both being underweight and being obese are associated with lower fertility rates, says Dr. Domar. So if you're trying to conceive, aim for a body mass index (BMI) in the range of 20 to 30. Your doctor can recommend exactly how much you need to gain or lose — but generally if your BMI is below 19, you should try to gain an average of 6 to 8 pounds; if your BMI is over 35, you should aim to lose 10 percent of your body weight.

5. Secondary infertility is actually more common than first-time infertility.

While many people think couples who are trying to conceive are usually

childless, in reality many more couples have trouble conceiving the second time around. "Most studies show that [secondary infertility](#) is more common than primary [infertility], and the reason may simply be that people are older when they try to have a second child," says Dr. Domar. By some estimates, secondary infertility accounts for 60 percent of all infertility cases.

6. Women don't have higher infertility rates than men.

Men and women contribute equally to fertility problems, notes Dr. Domar. "In any couple, it can be a male factor, a female factor, a combination of both, or unexplained infertility," she says. And don't feel like you're alone on your fertility journey. Organizations like [RESOLVE: The National Infertility Association](#) can direct you to counseling, support groups, adoption and artificial reproductive technologies.

7. Caffeine affects fertility.

Lifestyle choices can play a major role in infertility. "Just like cigarette smoking and excess alcohol use, high levels of caffeine are associated with decreases in fertility in both men and women," says Dr. Domar. Excessive levels generally means more than 500 mg per day (there's [about 100mg in one 5 oz](#)

[cup](#)). Since some of the fancy coffees can top 600 mg of caffeine in one cup, it make sense to check the caffeine levels of your favorite beverages. Remember, too, that coffee, tea and soda aren't the only things in your diet which can contain caffeine. Watch out for caffeine in coffee-flavored yogurt and ice cream, chocolate, energy drinks and some medications (including common headache remedies like Excedrin), says Dr. Domar.

8. If you're over 35, see a fertility specialist after six months of trying for a baby.

If you're under age 35 and been trying to conceive for a year, or if you're over the age of 35 and been having unprotected sex for six months, it's a good time to consult with a fertility specialist, suggests Dr. Domar. Both of you should be evaluated. For a woman, that includes a blood test on the third day of her menstrual cycle to assess hormone levels; monitoring to assess if and when ovulation is occurring; a radiological test to look at the health of her uterus and fallopian tubes; and, sometimes, an ultrasound. A man should have his semen analyzed to determine the sperm count, motility and the percentage of normal sperm. Depending on the results of these tests,

Advertisement

more tests may be necessary.

For many couples, a little guidance is the recipe for success. "Most people who see an infertility specialist do conceive a healthy baby, and most do so with simple non-invasive treatments," says Dr. Domar. She explains that while you might only think you'll need high-tech treatments like IVF, there are many other ways an infertility specialist can help. These include learning how to better time lovemaking (often using an ovulation kit), taking a five-day course of inexpensive oral medication, and treating other health issues that may be affecting fertility (like thyroid conditions).



Written by **Judy Koutsky**

Judy Koutsky is the former Editorial Director of KIWI magazine, a green parenting publication. She was also Executive Editor of Parenting.com, AOL Parent and BabyTalk.com. Her work has appeared in over 30 publications. Follow her on twitter [@JudyKoutsky](https://twitter.com/JudyKoutsky).

[View Sources](#) +

What Our Community Is Talking About

S **Should I wait or should I go for IVF?** **22** posts

Last updated 3 days ago

J **IVF Newbie Here- any advice you wish you had before you started?** **30** posts

Last updated 2 months ago

S **Do iui's hurt?** **13** posts

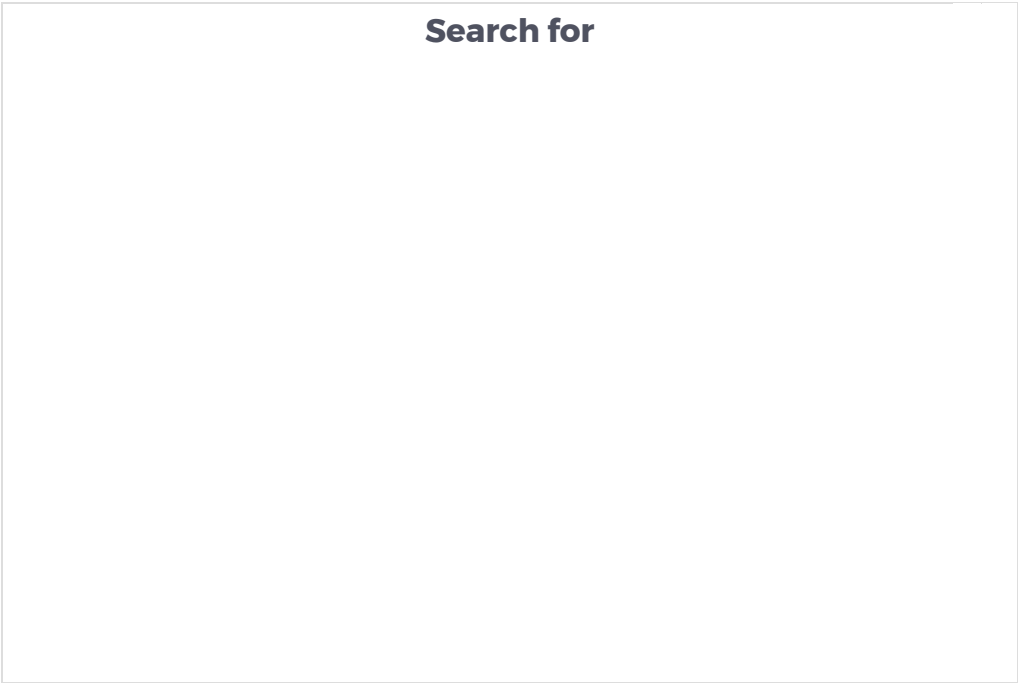
Last updated 2 months ago



There are 20,288 active discussions happening now in our Fertility Treatments community group.

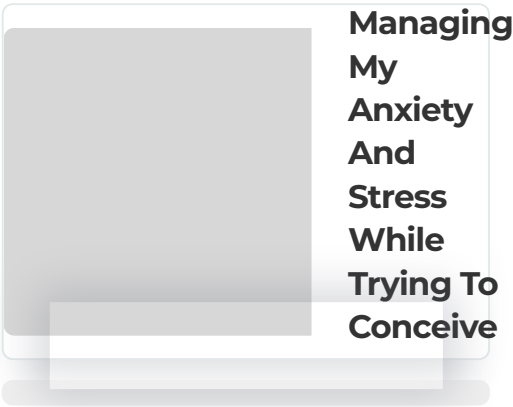
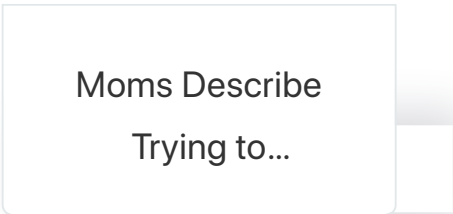
[Join in](#)

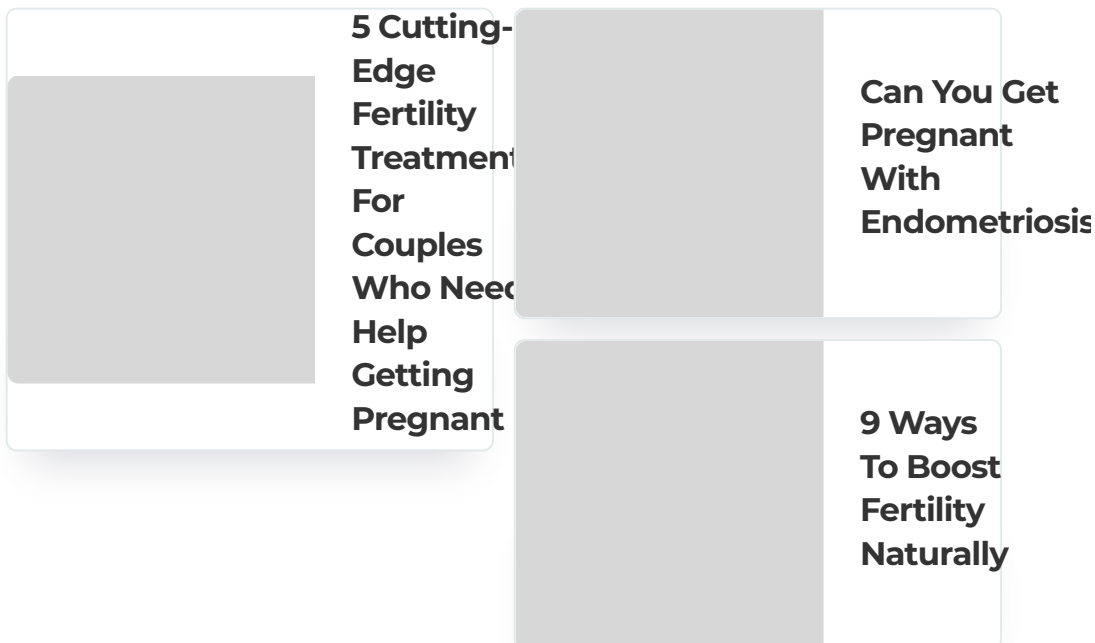
Advertisement



■ Trending On What to Expect

0:46





Follow us on



Find advice, support and good company (and some stuff just for fun).

What to Expect Apps

Popular Topics

About Us

Contact Us

Advertise With Us

About Heidi Murkoff

Accessibility

What to Expect Project

Medical Review Policy

What to Expect Bookstore

Advertising Policy

Do Not Sell My Personal Information

Help

AdChoices



Feedback

The educational health content on What To Expect is reviewed by our medical review board and team of experts to be up-to-date and in line with the latest evidence-based medical information and accepted health guidelines, including the medically reviewed What to Expect books by Heidi Murkoff. This educational content is not medical or diagnostic advice. Use of this site is subject to our terms of use and privacy policy.
© 2021 Everyday Health, Inc

A PROPERTY OF



This site complies with the HONcode standard for trustworthy health information.

