



Fertility and Your Weight: The Facts

Article By: Heather Lindsey



Extra pounds can interfere with healthy hormone levels, inhibiting conception. But the good news is dropping just 5 to 10 percent of your body weight can increase your chances of having a baby.

Before Erin Anderson, 36, got married in August 2006, her doctor told her that if she and her husband wanted to start a family, losing weight might help her conceive.

“At first, I thought it might be counterproductive to [lose] weight only to gain it back while pregnant,” says Erin, who lives in Tewksbury, MA. But after a year and a half of trying to have a baby, she decided to join Weight Watchers and to start exercising.

In June 2008, after losing 33 pounds — more than 10 percent of her body weight — Erin became pregnant. She’s certain her success was largely due to her weight loss and suspects that while she was heavier, she may not have been ovulating every month.

The impact of extra weight

About one in eight couples of childbearing age in the United States has trouble conceiving.¹ While a variety of treatments are now available to help women get pregnant, your doctor may also recommend losing weight if your body mass index (BMI) is in the overweight to obese range. Calculate your [BMI here](#).

If you have a healthy BMI of 20 to 25, you generally have about a 15 to 20 percent chance of getting pregnant in any particular month if you’re under the age of 35, says Scott Roseff, MD, director of the Palm Beach Center for Reproductive Medicine in Wellington, FL. However, as you gain weight and enter the obese category (BMI greater than or equal to 30), this rate can significantly decline.

Extra weight can interfere with the healthy production of hormones needed for conception, explains Dr. Roseff. Excess fat tissue can cause you to produce too much estrogen throughout your menstrual cycle, inhibiting fertility. Being overweight can also impact other hormones that cause menstrual irregularities and prevent ovulation.

Additionally, fat tissue may increase cholesterol and abnormal lipids levels, discouraging healthy blood flow to the uterine lining. This can prevent a fertilized egg from implanting in the uterine wall or can make keeping a pregnancy difficult, Dr. Roseff explains.

Even infertility treatments can be negatively impacted by excess weight. For example, studies indicate that obesity can negatively impact embryo quality in women under 35 undergoing IVF.^{2,3}

Polycystic ovarian syndrome

Another factor to consider if you are having problems conceiving is whether you have polycystic ovary syndrome (PCOS), a condition that is characterized by many signs and symptoms one of which can include insulin resistance. In response, there is often disruption in healthy hormone levels that interferes with ovulation and egg quality.

A genetic predisposition plays a role in developing the illness, but weight gain can also trigger it, says Dr. Roseff. About half of women with PCOS are overweight.⁴

Women who are overweight but do not have PCOS can also experience insulin resistance and related fertility problems, adds Laurence Jacobs, MD, who practices in the Chicago area with Fertility Centers of Illinois.

Boosting fertility

Whether or not you have PCOS, shedding pounds can often help you conceive if you're overweight. As little as 5 percent to 10 percent weight loss will significantly improve pregnancy rates for women,⁵ whether they are trying to conceive on their own or receiving fertility treatments, adds Dr. Jacobs.

Increasing intake of complex carbohydrates such as whole grains, fruits and vegetables, and limiting refined carbohydrates such as white bread, cookies and cake, can improve fertility by balancing hormones and normalizing blood sugar and insulin levels, says Dr. Jacobs. Medications such as metformin can also help you process insulin better, as does exercise.

The Centers for Disease Control recommends 150 minutes weekly of moderate-intensity aerobic exercise such as brisk walking or 75 minutes weekly of vigorous-intensity exercise such as jogging in addition to two days of muscle-strengthening activity.

If you have concerns about your weight and fertility, Dr. Jacobs suggests consulting a reproductive endocrinologist who can not only provide fertility testing but also recommend various weight loss and fitness programs, nutritionists and psychological counseling.

"You want a doctor who is interested in the weight-loss process and who can put you in touch with resources and doesn't just tell you to lose weight," he concludes.

FOOTNOTES

¹ Data from Resolve: the National Infertility Association.

² Cano F, Garcia-Velasco JA, Millet A, Remohí J, Simón C, Pellicer A. Oocyte quality in polycystic ovaries revisited: identification of a particular subgroup of women. *J Assist Reprod Genet.* 1997;14;254-261.

³ Metwally M, Cutting R, Tipton A, Skull J, Ledger WL, Li TC. Effect of increased body mass index on oocyte and embryo quality in IVF patients. *Reprod Biomed.* 2007;15;532-538.

⁴ Data from the Polycystic Ovarian Syndrome Association.

⁵ Balen AH, Anderson RA; Policy & Practice Committee of the BFS. Impact of obesity on female reproductive health: British Fertility Society, Policy and Practice Guidelines. *Hum Fertil (Camb).* 2007; 10(4):195-206.