POOR DIETARY HABITS

Eating habits are one of the few factors within our control that impact not only our chances of falling pregnant.

⚠️ Risk factor ♂️ Male & Female

About Poor dietary habits

Eating a healthy and varied diet may be a key part of maintaining good overall health. However, there are certain vitamins and food groups that could have a greater impact on reproductive health than others.

Having a healthy body weight and ensuring that food intake is balanced with your physical activity level is an important factor for fertility. Being both underweight and overweight can affect a woman’s chance of conceiving and delivering a healthy, normal weight baby. Interestingly, both the male and female’s body weight will affect fertility.

Being underweight can:
- reduce reproductive function and hormone production in women
- decrease sperm production in males
- increase the chances of having a low birthweight infant, which is associated with poorer health outcomes for the baby

Being overweight can:
- cause irregular menstrual cycles/ovulation problems in women
- decrease sperm production in males

Symptoms
- heartburn
- bloating and upset stomach
- water retention
- lack of energy
- poor sleep

Associated diseases
unhealthy diet is a major risk factor for a number of chronic diseases including:
- type-2 diabetes
- osteoporosis
- anorexia nervosa
- bulimia
- obesity
- cancer

Complications
- being overweight or obese
- tooth decay
- high blood pressure
- high cholesterol
- heart disease and stroke

Risk factors
outside eating
binge eating
single eating
balance diet
menu plane diet

Prevention

From a psychological and cultural perspective, a healthier diet may be difficult to achieve for people with poor eating habits. This may be due to tastes acquired in childhood and preferences for sugary, salty and/or fatty foods.

How it can affect fertility

Female Infertility

In general, a healthy diet for optimal fertility must be balanced. A woman’s diet may ultimately affect her fertility, particularly ovulation. Overall, replacing carbohydrates with animal protein was demonstrated to be detrimental to ovulatory fertility. Adding just one serving of meat was correlated with a 32% higher chance of developing ovulatory infertility, particularly if the meat was chicken or turkey. However, replacing carbohydrates with vegetable protein demonstrated a protective effect. Choosing trans fats in the diet instead of monounsaturated fats has been demonstrated to drastically increase the risk of ovulatory infertility. Consuming trans fats instead of carbohydrates correlated with a 73% increase in risk of ovulatory disorder. The use of multivitamins and supplements also has an effect. Women who take multivitamins may be less likely to experience ovulatory infertility; women who take six or more tablets had the lowest relative risk for infertility followed by women who took three to five, and two or less. Women with high “fertility diet” scores emphasized by a higher monounsaturated to trans-fat ratio, vegetable over animal protein, high-fat over low-fat dairy, a decreased glycemic load, and an increased intake of iron and multivitamins had lower rates of infertility due to ovulation disorders.

Male Infertility

Aspects of a male’s diet may have an impact on his fertility. Consuming a diet rich in carbohydrates, fiber, folate, and lycopene as well as consuming fruit and vegetables correlates with improved semen quality. Consuming lower amounts of both proteins and fats were more beneficial for fertility. Another potential benefit could be antioxidants, which play a pivotal role in the body by scavenging reactive oxygen species (ROS). Reactive oxygen species or ROS are a collection of free radicals and non-radical derivatives of oxygen such as superoxide anion (O2•-), hydrogen peroxide (H2O2), hydroxyl radical (OH•). This category also includes free radicals derived from nitrogen called reactive nitrogen species such as: nitric oxide (NO•), nitric dioxide (NO2•), peroxynitrite (ONOO•). Collectively they are termed as reactive oxygen species. These are by-products of cellular respiration that are necessary for certain cellular activity, including sperm capacitation; however, an overabundance of ROS may compromise sperm function, including sperm motility, altering DNA and decreasing membrane integrity.
Antioxidants are molecules such as albumin, ceruloplasmin, and ferritin; and an array of small molecules, including ascorbic acid, α-tocopherol, β-carotene, reduced glutathione, uric acid, and bilirubin or enzymes superoxide dismutase, catalase, and glutathione peroxidase. Antioxidants help remove the excess ROS in the seminal ejaculate and assist in the conversion of ROS to compounds that are less detrimental to cells. If there is more ROS than the local antioxidants can remove, it results in oxidative stress. Oxidative stress can result in sperm protein, lipid and DNA damage and sperm dysfunction.

Prognosis

Nutrition and pregnancy refers to the nutrient intake, and dietary planning that is undertaken before, during and after pregnancy. Nutrition of the fetus begins at conception. For this reason, the nutrition of the mother is important from before conception (probably several months before) as well as throughout pregnancy and breast feeding. An ever-increasing number of studies have shown that the nutrition of the mother will have an effect on the child, up to and including the risk for cancer, cardiovascular disease, hypertension and diabetes throughout life.

A diet for optimal fertility
- Maintain a healthy body weight and ensure you are eating enough food to match your activity levels.
- Ensure you are consuming enough iron by choosing lean meat, fish and protein, as well as plant based sources such as wholegrains, legumes and vegetables.
- Consume a wide variety of fruit and vegetables to ensure a good intake of antioxidants as well as folate.
- Limit your intake of caffeine and alcohol.
- Ensure you are consuming enough folate before you attempt to fall pregnant. Choose foods naturally rich in folate as well as foods with added folate such as commercially sold bread, and consider a folate supplement if necessary.

Find more about related issues

**Diagnoses**

**Amenorrhoea**
The absence of a menstrual period in women of reproductive age.
Learn more at: www.fertilitypedia.org/therapy/diag/amenorrhoea

**Anorexia Nervosa**
An eating disorder characterized by the maintenance of a body weight below average, fear of gaining weight, and a distorted body image.
Learn more at: www.fertilitypedia.org/therapy/diag/anorexia-nervosa

**Anovulation**
Failure of the ovaries to release an oocyte over a period of time generally exceeding 3 months.
Learn more at: www.fertilitypedia.org/therapy/diag/anovulation

**Cervical mucus defect**
Condition causing cervical mucus too thick and hostile to allow the sperm to penetrate the cervix.
Learn more at: www.fertilitypedia.org/therapy/diag/cervical-mucus-defect

**Endometrial cancer**
Cancer that arises from the endometrium, the lining of the uterus.
Learn more at: www.fertilitypedia.org/therapy/diag/endometrial-cancer

**Erectile dysfunction**
The inability (that lasts more than 6 months) to develop or maintain an erection of the penis during sexual activity.
Learn more at: www.fertilitypedia.org/therapy/diag/erectile-dysfunction

**Idiopathic male infertility**
A condition in which fertility impairment occurs spontaneously or due to an unknown cause.
Learn more at: www.fertilitypedia.org/therapy/diag/idiopathic-male-infertility

**Menopause**
The time in most women’s lives when menstrual periods stop permanently, and the woman is no longer able to have children.
Learn more at: www.fertilitypedia.org/therapy/diag/menopause

**Menstrual cycle disorders**
An abnormal condition in a woman’s menstrual cycle.
Learn more at: www.fertilitypedia.org/therapy/diag/menstrual-cycle-disorders

**Oligomenorrhea**
Light or infrequent menstrual flow at intervals of 39 days to 6 months or 5–7 cycles in a year.
Learn more at: www.fertilitypedia.org/therapy/diag/oligomenorrhea
Polycystic ovary syndrome
A condition in which a woman has an imbalance of female sex hormones. This may lead to changes in the menstrual cycle, cysts in the ovaries, trouble g
Learn more at: www.fertilypedia.org/therapy/diag/polycystic-ovary-syndrome

Thyroid disorders
A medical condition impairing the function of the thyroid.
Learn more at: www.fertilypedia.org/therapy/diag/thyroid-disorders

Therapies

Acupuncture
A form of alternative medicine and a key component of traditional Chinese medicine involving thin needles inserted into the body at acupuncture points
Learn more at: www.fertilypedia.org/edu/therapies/acupuncture

Traditional Chinese medicine
A broad range of medicine practices sharing common concepts which have been developed in China and are based on a tradition of more than 2000 years.
Learn more at: www.fertilypedia.org/edu/therapies/traditional-chinese-medicine

Medical nutrition therapy
It is a therapeutic approach to treating medical conditions and their associated symptoms via the use of a specifically tailored diet.
Learn more at: www.fertilypedia.org/edu/therapies/medical-nutrition-therapy

Meditation
A practice where an individual trains the mind or induces a mode of consciousness.
Learn more at: www.fertilypedia.org/edu/therapies/meditation

Sources

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