



SHANDE TCM

Trying to Conceive: A Safer Fertility & TCM Co-Care Guide

Preconception, fertility testing, male fertility, IUI/IVF and safer care decisions

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This publication provides general health education, not individual diagnosis or an emergency plan. Severe, sudden or progressively worsening symptoms require appropriate medical assessment first.

Trying to Conceive: A Safer Fertility & TCM Co-Care Guide

Preconception, fertility testing, male fertility, IUI/IVF and safer care decisions

Trying to conceive can quickly become a mixture of hope, timing, test results, internet advice, supplements and pressure. This guide organises the questions that matter most so couples can make safer decisions without turning every month into a medical emergency.

Traditional Chinese medicine may be used as supportive care for wellbeing, stress, sleep or symptom comfort, but it does not replace fertility assessment, reproductive medicine or obstetric care. When medicines, ovulation induction, IUI or IVF are involved, every herb and supplement should be disclosed to the treating team.

Use the chapters selectively. Start with the stage you are in now, keep one shared list of medicines and supplements, and bring questions to both conventional and TCM practitioners.

Keep these principles in view

- Traditional TCM concepts can be a discussion framework but do not replace biomedical diagnosis, tests, imaging or emergency care.
- Keep prescriptions, over-the-counter products, supplements, herbs, allergies and important diagnoses on one shared list.
- When red flags involve bleeding, severe pain, progressive weakness, breathing or consciousness, safety and medical assessment come first.



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Chapter 1

Trying to Conceive: When to Seek Fertility Help and What TCM Can - and Cannot - Do

At a glance

- For many couples, medical advice is appropriate if pregnancy has not occurred after about 12 months of regular unprotected intercourse; earlier assessment is commonly recommended when the woman is 35 or older or there are known risk factors.
- Irregular or absent periods, prior pelvic surgery, severe endometriosis symptoms, recurrent miscarriage or known male-factor concerns justify earlier discussion.
- TCM may be used as supportive care for wellbeing, but it should not delay fertility testing or replace reproductive treatment when indicated.

Time matters, but there is no single magic month

Fertility varies with age, medical history and both partners' health. Singapore specialist services commonly advise seeking help after about a year of regular unprotected intercourse, with earlier assessment for women aged 35 and above or when a condition may affect fertility. This is a reason to plan sensibly, not to panic at a particular calendar date.

Know the reasons to ask earlier

Earlier review is sensible for very irregular or absent periods, previous pelvic or testicular surgery, known endometriosis, prior cancer treatment, repeated miscarriage, erectile or ejaculation difficulties, a history of undescended testes, or other known reproductive conditions. If either partner has a significant medical issue, bring it into the conversation early.

Fertility is a couple issue

Assessment should not automatically focus only on the woman. Semen analysis is a standard part of fertility evaluation because male factors are common and may coexist with female factors. Both partners benefit from reviewing smoking, alcohol, medicines, supplements, weight, sleep and chronic disease.

Preconception basics still matter

Before pregnancy, folic acid is routinely recommended for women trying to conceive. Vaccination status, medication safety, chronic conditions and healthy weight also matter. Regular intercourse around the fertile window is more useful than complicated “fertility detox” routines. If cycles are irregular, medical advice can help clarify whether ovulation is occurring.

Be careful with promises and expensive add-ons

No clinic, supplement or herbal formula can responsibly guarantee pregnancy. Fertility marketing can be emotionally persuasive, especially after several unsuccessful months. Ask what evidence supports a claim, what the cost is, whether it could interfere with medical treatment and what would make the practitioner advise stopping.

Where TCM may fit

Some people use acupuncture or TCM during preconception for stress, sleep, digestive comfort or general wellbeing. If you do, tell both the fertility team and TCM practitioner about every medicine, supplement and herbal product. This is particularly important once ovulation induction, IUI or IVF medicines begin.

Pregnancy changes the safety conversation

Once pregnancy is possible or confirmed, the risk-benefit calculation for herbs and treatments changes. Do not simply continue a preconception herbal formula because it was “natural”. Tell practitioners promptly about a positive pregnancy test, bleeding, significant pain or severe vomiting, and seek appropriate obstetric care for red flags.

Chapter 2

Fertility Tests: What Couples Can Expect Before Choosing the Next Step

At a glance

- Both partners may need assessment because fertility factors can come from either or both sides.
- A test result is not a standalone verdict on whether pregnancy can or cannot happen.
- Bring medicines, supplements, herbal products and prior test results to appointments so the team can interpret results in context.

The first appointment is mostly history

Expect questions about how long you have been trying, cycle pattern, pregnancies or miscarriages, surgery, infections, chronic disease and medicines. For men, history can include puberty, testicular problems, surgery, heat exposure, sexual function and prior fertility. This history guides which tests are actually useful.

Ovulation and cycle information

Regular cycles often suggest ovulation, but not always. Depending on the situation, doctors may use cycle history, hormone tests or ultrasound to assess ovulation and ovarian function. Home ovulation kits can be useful for timing but do not replace a full evaluation when there are persistent concerns.

Ovarian reserve needs careful interpretation

Tests such as anti-Mullerian hormone (AMH) or antral follicle count can help estimate ovarian reserve and treatment response. They are not simple “fertility scores” and do not perfectly predict natural pregnancy. Age and the broader clinical picture remain important.

Anatomy may need imaging

Ultrasound can assess the uterus and ovaries. Depending on history, additional tests may look at whether the fallopian tubes are open. These tests answer specific questions; they should not be ordered simply to create a large panel without a reason.

Semen analysis is a standard part of assessment

Semen analysis looks at factors such as sperm concentration, movement and shape. Results can vary, so an abnormal result may need repeating or specialist interpretation. Fever, illness, some medicines, hormones, anabolic steroids and other health factors can affect sperm production.

Results guide choices, not guarantees

After assessment, the next step could be continued trying, lifestyle changes, treatment of an identified condition, ovulation treatment, surgery, IUI or IVF depending on the couple. Ask what problem each proposed treatment is addressing, its likely benefit, cost, burden and alternatives.

Tell the team about TCM and supplements

Bring the names or photos of every herbal formula, supplement and traditional product. This is especially important before fertility drugs or procedures. A transparent medication list allows the fertility team and TCM practitioner to avoid duplicate ingredients, interactions and unclear products.



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Chapter 3

Male Fertility Basics: Semen Health, Lifestyle and When to Seek Review

At a glance

- Semen analysis is the standard starting test for many male fertility questions.
- Smoking, anabolic steroids, testosterone treatment, significant heat exposure, some illnesses and medicines can affect sperm production.
- Testicular pain, a lump, marked swelling or sudden symptoms need medical assessment rather than fertility supplements.

Fertility and sexual function are not the same thing

A man can have normal erections and ejaculation yet still have an abnormal semen analysis. Conversely, difficulty with sex can interfere with conception even when sperm production is normal. Both areas can be discussed confidentially with a doctor.

Semen analysis provides useful baseline information

The test commonly measures semen volume, sperm concentration, movement and shape. One result may not tell the whole story because semen parameters vary. A specialist may recommend repeating the test or adding other investigations depending on the pattern and medical history.

Medicines and hormones matter

Testosterone therapy and anabolic steroids can suppress the body's own signals for sperm production. Some other medicines and medical treatments may also affect fertility. Do not stop important medicines on your own, but tell the clinician everything you use, including gym hormones, supplements and traditional products.

Lifestyle can help, but avoid perfectionism

Stopping smoking, avoiding recreational drugs, limiting excessive alcohol, maintaining a healthy weight, sleeping adequately and managing chronic disease are sensible. Very frequent sauna or high heat exposure may be worth reducing when there are fertility concerns. No single food, herb or supplement can guarantee improved semen quality.

Know the reasons for earlier assessment

Seek medical review sooner for a history of undescended testis, testicular surgery or injury, chemotherapy, genital infection, significant varicocele, infertility with a previous partner or erectile/ejaculatory problems. Pain, a new lump or sudden swelling in the testicle should be assessed promptly.

TCM should not replace diagnosis

A TCM consultation may address general wellbeing, stress or sleep, but claims to “boost sperm” should be treated cautiously. If semen analysis is abnormal, work with a medical team to identify the reason. Share any herbal formulas with the fertility clinician, especially if assisted reproduction is planned.

Couple-based planning reduces blame

Fertility is easier to navigate when both partners treat assessment as a shared health process rather than looking for who is “at fault”. Attend appointments together when practical, keep one list of supplements and medicines, and make decisions based on the combined picture.

Chapter 4

Using TCM During IUI or IVF: Herbs, Acupuncture and Communication Safety

At a glance

- Tell the fertility clinic about all herbs and supplements before stimulation medicines, egg collection, embryo transfer or other procedures.
- Do not start, stop or change fertility medicines based on TCM advice unless the prescribing fertility clinician agrees.
- Acupuncture used for comfort or stress support should never be presented as a guarantee of implantation, pregnancy or live birth.

Treatment cycles are tightly timed

IUI and IVF protocols may involve hormone injections, trigger medicines, progesterone and procedures at specific times. A change that seems small can matter to the cycle. Keep the fertility team's medication schedule as the primary plan and fit any complementary care around it.

Herbs and supplements need disclosure

“Natural” does not mean pharmacologically inactive. Herbal products may affect bleeding, liver metabolism, blood pressure, glucose or other pathways, and product composition can vary. The fertility clinic needs the full list so it can decide what should be paused before procedures or during early pregnancy.

Ask what acupuncture is trying to achieve

People may use acupuncture for relaxation, tension or general wellbeing during a stressful cycle. Ask the practitioner to describe the goal in realistic terms. Claims that a treatment guarantees embryo implantation or materially changes IVF success should be viewed cautiously.

Procedure days have different priorities

Before egg collection or other procedures involving sedation, follow the fertility clinic's fasting and medication instructions exactly. Do not take an unapproved herbal product on the morning of a procedure simply because it is part of a routine. If unsure, ask the clinic in advance.

After embryo transfer, do not assume everything continues

Once an embryo has been transferred or pregnancy is possible, review every herb, supplement and treatment again. Some products used before ovulation may not be appropriate in early pregnancy. A positive pregnancy test should trigger a fresh medication and herbal review.

Emotional pressure can drive over-treatment

Fertility treatment is expensive and emotionally intense. It is easy to add multiple therapies because doing more feels safer. More interventions also mean more cost, appointments and uncertainty. Choose complementary care only when its purpose is clear and it does not interfere with the core medical plan.

Create one shared treatment list

Keep one current page with fertility medicines, vitamins, supplements, Chinese herbs, acupuncture dates and any other therapies. Bring it to both teams. Good co-care is not about one practitioner controlling everything; it is about preventing gaps in information.



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Chapter 5

Cycle Tracking: What Changes Matter and When to Seek Care

At a glance

- Track patterns rather than one difficult day.
- Heavy bleeding, fainting, severe pain or pregnancy concerns need medical review.
- Bring the same record to both conventional and TCM appointments.

What to record

Start with the first day of bleeding, how long it lasts, whether flow is light, moderate or unusually heavy, and whether clots are new or different. Add pain, headaches, bowel changes, sleep, mood and any medication or supplement changes. The goal is not a perfect diary; it is enough detail to notice a pattern.

Why patterns help

Sleep, stress, illness, travel, contraception, pregnancy and perimenopause can all influence symptoms. Two or three months of notes can show whether a change is repeating. This also prevents one severe but unusual day from becoming the only memory at a consultation.

How TCM may use the history

A TCM practitioner may ask about timing, colour, discomfort, temperature sensations, digestion, sleep and energy as part of traditional pattern assessment. These observations belong to the TCM framework and do not replace tests or medical assessment when abnormal bleeding, anaemia or pregnancy complications are possible.

When changes deserve medical attention

Seek medical advice if bleeding becomes very heavy, you feel faint or unusually breathless, bleeding occurs after menopause, pain suddenly becomes severe, or you may be pregnant and have pain or bleeding. Persistent changes that affect work, sleep or daily life also deserve assessment.

Questions to bring

Ask what should be checked medically, what TCM can realistically support, how progress will be reviewed and whether herbs or supplements could interact with medicines or contraception.

Chapter 6

Pregnancy and Postpartum TCM: A Safety-First Guide

At a glance

- Always tell the practitioner if you are pregnant or could be pregnant.
- Do not use herbs, supplements or strong manual techniques casually during pregnancy.
- Heavy bleeding, severe headache, chest pain, breathlessness, fever or reduced fetal movement require medical assessment.

Pregnancy changes the safety conversation

A practitioner should know how many weeks pregnant you are, whether the pregnancy is high risk, what medicines or supplements you use, and whether you have high blood pressure, diabetes or bleeding. Acupuncture point selection, heat therapies, herbs and manual techniques may need modification or avoidance.

Symptoms that need obstetric assessment first

Persistent bleeding, fluid leakage, severe abdominal pain, new severe headache, visual changes, sudden swelling, fever, chest pain, breathlessness, fainting or reduced fetal movement should not be managed as routine “imbalance”. Contact your maternity team or emergency services as appropriate.

After birth

Postpartum recovery involves sleep disruption, feeding, bleeding, wound healing, mood and physical recovery. TCM conversations can focus on comfort and general wellbeing, but new heavy bleeding, fever, worsening wound pain, severe headache, chest pain, breathlessness or significant mood symptoms need medical review.

Herbs and breastfeeding

If breastfeeding, tell the practitioner. Substances taken by the mother can sometimes reach breast milk. Avoid assuming a traditional product is automatically suitable for breastfeeding. Coordinate with a doctor or pharmacist when medicines are involved.

Make the plan simple

Prioritise rest where possible, adequate food and fluids, follow-up appointments, support from family and early help when symptoms are worrying. Complementary care should fit around these basics, not replace them.

Chapter 7

A Practical Preconception Checklist

Start with what can be verified

Write down cycle dates, previous pregnancies or miscarriages, major operations, known reproductive conditions, chronic illnesses and current medicines. For the male partner, include past testicular problems, surgery, fever, medications, hormones, smoking and occupational exposures where relevant.

Create one shared treatment list

List prescriptions, over-the-counter medicines, vitamins, supplements, Chinese herbs and any products taken only occasionally. Add the dose if known. This is especially important once fertility medicines begin because treatment schedules can change quickly.

Separate wellbeing goals from fertility claims

It is reasonable to seek help for stress, sleep, tension or digestive comfort. It is not reasonable for any provider to guarantee conception, promise that a single treatment “unblocks” fertility, or advise delaying medically indicated testing.

Know the medical-first moments

Severe pelvic pain, heavy bleeding, fainting, fever, a positive pregnancy test with significant pain or bleeding, or severe vomiting and dehydration require appropriate medical assessment. Fertility support should never delay urgent care.

Bring better questions

Ask what problem a test is looking for, what a result can and cannot tell you, what the next decision point is, and whether any medicine, herb or supplement should be paused around a procedure. Clear questions reduce unnecessary treatment and help both partners stay involved.

References & Further Reading

These sources are useful for understanding medical safety boundaries. Public guidance can change; individual diagnosis and treatment should be discussed with the appropriate healthcare professional.

- KK Women’s and Children’s Hospital (KKIVF Centre): My Fertility Health and When Should I Seek Help?
- KK Women’s and Children’s Hospital: Fertility in Women
- Shande TCM Health Library: fertility, preconception and treatment-safety guides