

DEFINITIONS FOR TERMS LIKELY TO BE DISCUSSED ON JANUARY 5, 2005 CHEFERTILITY TELECONFERENCE ON INFERTILITY DISEASE DATA/TRACKING

Incidence and prevalence:

We can talk about prevalence or incidence infertility (or subfertility). What is the difference? Prevalence of infertility refers to the proportion of the population, at a particular point in time, who were **previously diagnosed** as infertile. It is like taking a “snapshot” of the population at a single time point. Incidence of infertility refers to the rate at which **new cases** of infertility occur in the population (none of whom had been previously diagnosed as infertile).

Measures of fertility, subfertility and infertility

Infertility

Demographers define infertility in terms of absence of children born. This is not, however, the most useful definition, since high rates of infertility (according to this definition) can be the result of voluntary delays in childbearing or to limiting family size. The American Society of Reproductive Medicine defines infertility as a disease to be diagnosed when the duration of failure to conceive is 12 months or more. [http://www.asrm.org/Media/Practice/opinion_infertility.html]. Implicit in this definition is the desire for conception. Because definitions and measures of infertility vary widely there is a wide range of estimates of the prevalence of infertility. For example, In a study of older women that used five definitions of infertility, the age-adjusted prevalence of a history of infertility ranged from 6.1% (when women reported a physician diagnosis) to 32.6% (unprotected intercourse for 12 months ever, based on a life-time calendar of pregnancy attempts) (Marchbanks, Peterson, Rubin, and Wingo, 1989).

Fecundability

Fecundability has been defined as, “the monthly probability of conception in the absence of contraception outside the gestation period and the temporary sterile period following the termination of a pregnancy” (United Nations Population Information Network (POPLIN)). Like infertility, this measure is subject to uncertainty due to varying definitions, time periods and measurements.

Time to pregnancy (TTP)

Time to pregnancy (TTP), the number of months (cycles) of unprotected intercourse until conception, is considered most suitable for cross-study comparisons because of its more precise definition and consistency of use relative to other measures (Joffe, 1996). “Cycles to conception” is a closely related measure, which is more difficult to measure than TTP and is used less frequently. Recall by mothers has been reported by several authors to be quite accurate, even many years after the event (Campbell and Wood, 1988; Joffe, Villard, Li, Plowman, and Vessey, 1995; Rowland et al. 1992).

Though preferable to other measures, TTP is not well defined for unplanned pregnancies and retrospective determination of TTP is difficult, particularly when contraception has been used intermittently. It may be difficult to compare across studies because populations may differ (some randomly selected and others drawn from selected cohorts such as clinics or occupational settings); some will be limited to first pregnancy planners and others will not.

TTP of one year or more

TTP, in months or cycles, is a relatively recent measure. However, a discrete form of TTP, using the (somewhat arbitrary) cut-off of one year of unprotected intercourse without conception has often been used to classify couples (or individuals) as infertile, or subfertile. This discrete version of TTP has been the most commonly used measure of subfertility over the past fifty years.