Pregnancy and fertility

Where there is a family history of muscle-wasting conditions, people may have a number of concerns when considering having children. The potential problems may differ between men and women, and between types of condition.

(For more specific genetic concerns, read the Muscular Dystrophy UK factsheets: Carrier testing and reproduction: your options, and Prenatal testing and diagnosis, and discuss this with your local genetic specialist.)

What effect does being pregnant have on muscle-wasting conditions?

For women who have a muscle-wasting condition, the extra weight associated with being pregnant is generally the main problem, especially if they have difficulty walking and frequently trip or fall. Occasionally, women may find they need to use a wheelchair towards the end of their pregnancy and this may aggravate their muscle weakness. It may also be difficult to return to full strength and to lose any additional weight following delivery.

In addition, men and women will need to consider the potential challenges associated with lifting, carrying and nursing their baby. (It is often helpful to discuss these concerns with other people who have been through it – the Muscular Dystrophy UK helpline can put you in touch.)

Delivering the baby

Occasionally, the mother’s muscle weakness may make it harder for her to push with her contractions. This may result in the baby’s needing help at delivery, either by forceps or ventouse (suction applied to the baby’s head). This is generally done under local anaesthetic. If the baby is very distressed, or the mother is in labour for a long time, it may be necessary to have an emergency caesarean section. If problems are anticipated, this may be the planned form of delivery.

Caesarian section is performed either under epidural (where the mother is awake) or under general anaesthetic (GA). As this is major surgery, it may take additional time for women with muscle weakness to recover their strength fully. (Read the Muscular Dystrophy UK factsheet: Anaesthetics.)

For vaginal delivery, it may be advisable for the mother to have a ‘walking epidural’. This is not only to relieve pain and prevent her being too tired to push, but also to keep her moving during labour. The epidural may also reduce recovery time, so the mother may be able to leave hospital sooner.
Involvement of heart and lungs
In women who have weak breathing muscles, or major curvature of the spine (scoliosis), the growing abdomen in pregnancy can reduce breathing capacity. A full respiratory assessment is therefore advisable before the pregnancy. This includes measurement of lung volumes and, if these are below about 50 percent predicted, overnight breathing may need to be monitored (sleep study).

Should these tests show significant problems, the use of a small breathing machine (non-invasive ventilation) during sleep can maintain blood oxygen levels.

In women whose hearts are affected by their muscle-wasting conditions, pregnancy may bring on additional problems. An increased amount of fluid in the body, extra weight from the developing baby, and the delivery itself may put additional strain on the heart.

Not all people with a muscle-wasting condition will be at risk of heart complications. However, if you have concerns, discuss them with your GP.

Potential complications
Ensure your midwife is fully aware of your muscle-wasting condition and is checking for any sign of complication before you leave the hospital.

Women with myotonic dystrophy are often at risk of a number of complications, including:
- an increased risk of miscarriage
- increased fluid around the baby (hydramnios) that may cause premature labour
- heavy bleeding either before or following delivery, and
- retained placenta (afterbirth).

Many of these complications are particularly evident when the baby has congenital myotonic dystrophy. The incidence of diabetes is also slightly increased in myotonic dystrophy, and the bodily changes associated with pregnancy may precipitate diabetes during pregnancy, which will bring its own complications.

What are other options?
Speak to your GP or specialist nurse about what other family planning options there are for you.

What about infertility?
Infertility is potentially a problem for anyone, and couples may have trouble conceiving for reasons unrelated to their muscle-wasting condition. If you are experiencing problems conceiving, discuss this with your GP.

Is impotence a problem for men with muscle-wasting conditions?
Erectile dysfunction or impotence (difficulty for the male to develop or maintain a hard penis) is not a problem caused by muscle-wasting conditions. It may be as a result of a number of other issues.
Psychological issues that may be related to physical disability, or dislike of self-image, can often cause major problems. Speak to your GP or other local counselling services (see resources listed below).

Viagra (Sildenafil) may be helpful in some cases, but can be contra-indicated in patients with heart problems, which are of course commonly associated with some muscle-wasting conditions. This should be discussed with your doctor.

Other related publications
- Inheritance and the muscular dystrophies
- Prenatal diagnosis and testing
- Carrier testing and reproduction: your options
- Anaesthetics

We’re here for you at the point of diagnosis and at every stage thereafter, and can:
- give you accurate and up-to-date information about your or your child’s muscle-wasting condition, and let you know of progress in research
- give you tips and advice about day-to-day life, written by people who know exactly what it’s like to live with a muscle-wasting condition
- put you in touch with other families living with the same muscle-wasting condition, who can tell you about their experiences
- tell you about – and help you get – the services, equipment and support you’re entitled to.

Disclaimer
While every reasonable effort is made to ensure that the information in this document is complete, correct and up-to-date, this cannot be guaranteed and Muscular Dystrophy UK shall not be liable whatsoever for any damages incurred as a result of its use. Muscular Dystrophy UK does not necessarily endorse the services provided by the organisations listed in our factsheets.

Here for you
The friendly staff in the care and support team at the Muscular Dystrophy UK’s London office are available on 0800 652 6352 or info@musculardystrophyuk.org from 8.30am to 6pm Monday to Friday to offer free information and emotional support.

If they can’t help you, they are more than happy to signpost you to specialist services close to you, or to other people who can help.

www.musculardystrophyuk.org