

GUEST EDITORIAL



Philippine Journal of
Allergy, Asthma and Immunology

Perfect Combination: Reproductive Immunology Meets Lifestyle Medicine

Odelind S. Conchada-Flores, MD

Adventist Medical Center Manila, Pasay City, Philippines

Reproductive immunologists navigate the complex pathways of endothelial dysfunction, autoantibodies, oxidative stress, and cytokine networks to overcome recurrent pregnancy loss and implantation failure. However, a hopeful dimension is rapidly shifting from the sidelines to the center of reproductive medicine: Lifestyle Medicine.

Lifestyle Medicine is the medical specialty that uses therapeutic lifestyle interventions as a primary modality to treat, prevent, or even reverse chronic conditions, including, but not limited to, cardiovascular diseases, type 2 diabetes, and obesity. It includes the application of medical, behavioral, motivational, and environmental principles to the management of health-related problems.¹

When we recently had the privilege of speaking at the Annual Reproductive Immunology Council Update of the Philippine Society of Reproductive Immunologists and the Philippine Society of Allergy, Asthma and Immunology, our goal was to highlight how evidence-based lifestyle interventions optimize fertility outcomes. This editorial serves to extend that conversation by reiterating that the systemic inflammatory pathways driving immunological disorders are deeply intertwined with lifestyle, and that Lifestyle Medicine gives us a handy tool to offer patients new hope.

Fertility is inherently tied to immune homeostasis. Chronic systemic inflammation – driven by poor diet, sedentary behavior, sleep deprivation, chronic stress, and environmental toxins – disrupts this delicate balance. It alters natural killer cell activity, elevates pro-inflammatory cytokines, induces oxidative stress in the ovarian and uterine microenvironments, and causes deterioration in sperm quality.^{2,3}

Lifestyle Medicine offers a non-invasive approach to down-regulate this systemic inflammatory state. By addressing the root lifestyle causes of immune dysregulation, we can optimize and nurture the maternal soil and the paternal seed well before implantation occurs.



The Six Pillars of Lifestyle Medicine

Our lecture to the PSRI focused on actionable, evidence-based lifestyle prescriptions that, when practiced yield measurable immunological and reproductive benefits, empowering our patients to become active partners in their healing journeys:

1. **Nutrition:** Transitioning patients toward a whole-food, plant-predominant diet, rich in fiber and antioxidants, significantly reduces systemic oxidative stress.²⁻⁶ Minimizing ultra-processed foods and refined carbohydrates mitigates insulin resistance, a known driver of pelvic inflammation and ovulatory dysfunction.⁶
2. **Physical Activity:** Regular, moderate exercise acts as a natural immunomodulator. It enhances anti-inflammatory cytokine profiles and improves pelvic blood flow.^{2,3} It is most helpful for the patient who needs to lose weight. Conversely, we must caution against extreme, exhaustive exercise for those with a healthy BMI, which can inadvertently trigger an acute-phase immune response and disrupt the hypothalamic-pituitary-gonadal axis.
3. **Restorative Sleep:** Poor sleep can worsen insulin resistance, weight regulation, stress reactivity, and systemic inflammation - all of which can impair reproductive physiology.⁶ When we optimize sleep, we are improving the neuroimmune and endocrine synchronization on which reproduction depends.
4. **Stress Management:** Chronic stress can exacerbate inflammatory dysregulation, endothelial dysfunction, and immune mechanisms relevant to infertility and pregnancy loss.⁷ Mindfulness-based stress reduction, cognitive behavioral therapy, spiritual renewal like Bible-reading, time in nature, and structured stress-recovery habits can help.
5. **Avoidance of Risky Substances:** Preconception reduction or elimination of substances or exposures to either of the following: smoking, alcohol, caffeine, recreational drugs, electromagnetic radiation from mobile phones, endocrine-disrupting chemicals and pollutants, is a reasonable recommendation, especially during active conception attempts and fertility treatment.^{3,8,9} These exposures may act not only as endocrine disruptors but also as promoters of oxidative stress, inflammation, and altered immune signaling.^{8,9}
6. **Positive Social Connections:** Patients and couples often experience isolation, shame, relationship strain, sexual stress, identity disruption, and grief. Harmonious and meaningful relationships, especially marital satisfaction, have a protective effect on mental health and can improve resilience, coping, treatment persistence, and behavioral change.¹⁰

By integrating lifestyle medicine into reproductive immunology, we do not replace conventional therapies. Instead, we create a synergistic treatment model. We empower patients to take control of their preconception health, lowering systemic inflammation from the inside out.

It is our hope that reproductive immunologists and allergists alike will increasingly prescribe these lifestyle interventions as foundational therapy. Through whole-person care, referral system, and collaborative research, we look forward to significantly improving fertility outcomes and fostering healthier future generations across the Philippines.

REFERENCES

1. American College of Lifestyle Medicine. What is lifestyle medicine? Chesterfield (MO): American College of Lifestyle Medicine; [updated 2024]. Available from: <https://lifestylemedicine.org/what-is-lifestyle-medicine/>
2. Donato M, Capalbo A, Morizio E, Fratini RM, Pilenzi L, D'Antonio F, Stuppia L, Vitacolonna E, Gatta V, Konstantinidou F. The Role of Lifestyle Intervention in Female Fertility: A Modifiable Factor for Preconception Health. *Nutrients*. 2025 Jun 25;17(13):2101. doi: 10.3390/nu17132101. PMID: 40647206; PMCID: PMC12251342.
3. Balawender K, Orkisz S. The impact of selected modifiable lifestyle factors on male fertility in the modern world. *Cent European J Urol*. 2020;73(4):563-568. doi: 10.5173/cej.2020.1975. Epub 2020 Oct 10. PMID: 33552585; PMCID: PMC7848840.
4. Braga DP, Halpern G, Setti AS, Figueira RC, Iaconelli A Jr, Borges E Jr. The impact of food intake and social habits on embryo quality and the likelihood of blastocyst formation. *Reprod Biomed Online*. 2015 Jul;31(1):30-8. doi: 10.1016/j.rbmo.2015.03.007. Epub 2015 Mar 27. PMID: 25982093.
5. Hoek J, Schoenmakers S, Baart EB, Koster MPH, Willemsen SP, van Marion ES, Steegers EAP, Laven JSE, Steegers-Theunissen RPM. Preconceptional Maternal Vegetable Intake and Paternal Smoking Are Associated with Pre-implantation Embryo Quality. *Reprod Sci*. 2020 Nov;27(11):2018-2028. doi: 10.1007/s43032-020-00220-8. Epub 2020 Jun 15. PMID: 32542536; PMCID: PMC7522074.
6. Hauser ME, McMacken M, Lim A, Shetty P. Nutrition-An Evidence-Based, Practical Approach to Chronic Disease Prevention and Treatment. *J Fam Pract*. 2022 Jan;71(Suppl 1 Lifestyle):S5-S16. doi: 10.12788/jfp.0292. PMID: 35389838.
7. Cohen S, Miller GE, Rabin BS. Psychological stress and antibody response to immunization: a critical review of the human literature. *Psychosom Med*. 2001 Jan-Feb;63(1):7-18. doi: 10.1097/00006842-200101000-00002. PMID: 11211068.
8. Mínguez-Alarcón L, Chavarro JE, Gaskins AJ. Caffeine, alcohol, smoking, and reproductive outcomes among couples undergoing assisted reproductive technology treatments. *Fertil Steril*. 2018 Sep;110(4):587-592. doi: 10.1016/j.fertnstert.2018.05.026. PMID: 30196942; PMCID: PMC11002791.
9. Okechukwu CE. Does the Use of Mobile Phone Affect Male Fertility? A Mini-Review. *J Hum Reprod Sci*. 2020 Jul-Sep;13(3):174-183. doi: 10.4103/jhrs.JHRS_126_19. Epub 2020 Oct 27. PMID: 33311902; PMCID: PMC7727890.
10. Vaillant GE. *Triumphs of experience: the men of the Harvard Grant Study*. Cambridge (MA): Harvard University Press; 2012. doi: 10.4159/harvard.9780674067424.