

# Fertility procedures need not delay breast cancer treatment for younger women

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A new study published in the November issue of the *Journal of the American College of Surgeons* shows that breast cancer patients under 40 years old who undergo fertility preservation do not face a significant delay in the treatment of their disease when their care is coordinated in a timely fashion.

"Easy access and good communication among surgeons, medical oncologists and reproductive endocrinologists is critical," said Lynn Westphal, MD, associate professor, department of [obstetrics](#) and [gynecology](#), Stanford University School of Medicine, Stanford, CA.

Frequently, young [women](#) who are diagnosed with [breast cancer](#) must make difficult decisions about surgical treatment options as well as chemotherapeutic treatments that may permanently impair their fertility or delay childbearing. Advancements in reproductive medicine such as [in vitro fertilization](#) have benefited young women with breast cancer.

"The burden of facing premature [menopause](#) adds to the stress experienced by young cancer survivors," said Irene Wapnir, MD, FACS, associate professor, department of surgery, Stanford University School of Medicine. "Fertility preservation through cryopreservation of eggs or fertilized oocytes may be an important measure to offset these concerns and promote emotional well-being. Our study shows that these procedures, when expedited and appropriately timed, do not delay cancer treatment."

Researchers used the Stanford Cancer Center tumor registry to retrospectively identify 82 women younger than 40 years old who received adjuvant chemotherapy for breast cancer. Of the women identified, 19 underwent ovarian stimulation and oocyte retrieval, and 63 did not. The timing of fertility preservation, surgical intervention and chemotherapy were compared with the time intervals between diagnosis and treatment in the patients who did not undergo fertility preservation.

The research team found that the median time from initial diagnosis to chemotherapy in women who underwent fertility preservation was 71 days (ranging from 45 days to 161 days) versus 67 days among those who did not (ranging from 27 days to 144 days; p

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