

# Cancer patients should be told more about their fertility options

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Credit: Drew Hays/Unsplash

Fertility preservation care for people with cancer is "often underimplemented" with barriers needing to be overcome, according to authors from the Clinical Oncology Society of Australia Fertility

Preservation Taskforce, writing in the *Medical Journal of Australia*.

"These strategies include oocyte and embryo cryopreservation, ovarian tissue cryopreservation and subsequent autografting for females, and sperm cryopreservation and testicular biopsy for males," wrote the authors, led by Dr. Violet Kieu from the University of Melbourne and the Royal Women's Hospital.

"Fertility [preservation](#) treatment is often urgent to prevent a delay in commencing [cancer](#) treatments. Currently, fertility preservation care is often underimplemented.

"The barriers to overcome include limited models of care and uneven access due to cost, low health literacy, and patient education.

"As the use of fertility preservation increases, further reporting on outcomes data is required. In order to improve the quality of care, [data collection](#) by national and international registries is vital to identify the short and long-term outcomes of fertility preservation interventions."

The COSA taskforce has developed the 2022 Guidelines for fertility preservation for people with cancer with updates in management including:

- oocyte and embryo cryopreservation;
- ovarian tissue cryopreservation and transplantation;
- testicular sperm extraction; and
- testicular tissue [cryopreservation](#) in pre-pubertal boys.

"The guidelines highlight the importance of education for multidisciplinary team members, as well as pathways for referral of oncology patients to fertility specialists to discuss oncofertility options," wrote Kieu and colleagues.

"Furthermore, improving patient communication on fertility risk and cancer is vital for quality in oncofertility care.

"New Australian resources, such as the online patient education video series Fertility after Cancer, have been developed to introduce fertility preservation options to patients and their families in an age-appropriate manner.

"There is scope for further research on referral and utilization rates of fertility preservation services in Australia, as well as return-to-use of stored cryopreserved material and pregnancy outcome data," they concluded.

"Current gaps in knowledge include the impact of non-cytotoxic oncological therapies and immunotherapy on fertility and the role of laboratory techniques, such as in vitro oocyte growth and maturation, in oncofertility."

The 2022 [guidelines](https://www.cancer.org.au/clinical-guidelines/cancer-fertility-preservation) can be found online at [guidelines/cancer-fertility-preservation](https://www.cancer.org.au/clinical-guidelines/cancer-fertility-preservation)"  
target="\_blank">www.cancer.org.au/clinical-[guidelines/cancer-fertility-preservation](https://www.cancer.org.au/clinical-guidelines/cancer-fertility-preservation)

**More information:** Violet Kieu et al, Australian fertility preservation guidelines for people with cancer 2022: review and recommendations, *Medical Journal of Australia* (2022). [DOI: 10.5694/mja2.51751](https://doi.org/10.5694/mja2.51751)

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