

How nutrition guidance can optimize fertility treatments for female cancer survivors

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A cancer diagnosis can increase the risk of infertility in young women. While consuming a healthy diet—including whole grains, fruits, vegetables, and healthy fatty acids—has been found to improve both

fertility and cancer survivorship, over 90% of young adult cancer survivors don't meet the dietary recommendations and have diets consisting of high fat and low fruit and vegetable intake.

Researchers from Drexel University's College of Nursing and Health Professions explored the barriers and ways to promote healthy diet practices among female cancer survivors with fertility challenges.

Recently published in *Integrative Cancer Therapies*, researchers conducted in-depth interviews with young, female cancer survivors with fertility challenges to collect information about their [dietary intake](#) and help inform the development of dietary interventions for this population.

"Clearly, barriers exist for these [young women](#) who are unable to meet healthy [dietary recommendations](#). Yet, to date, no study has investigated nutrition-related barriers to female cancer survivors experiencing fertility challenges," said Brandy-Joe Milliron, Ph.D., an associate professor in the College and corresponding author of the study.

In addition to the in-depth interviews, 20 female cancer survivors of reproductive age gave three 24-hour dietary recalls—a self-report of food and beverages they had consumed the day before—to gauge the quality of their diets based on the [Healthy Eating Index \(2015\)](#) and how closely they adhered to the [Dietary Guidelines for Americans](#). The researchers followed up with some participants in focus group discussions to ensure the meanings and perspectives of participants were accurate.

Overall, women in the study reported a poor-quality diet, with four main barriers to eating a healthy diet emerging from the data:

1. Challenges of work-life balance
2. Treatment-related fatigue

3. Dietary guidance, if provided, was too rigid for them to follow
4. Lack of nutrition resources and minimal guidance tailored to their unique needs during treatment and throughout post-treatment life

Despite these barriers, the research team did identify several facilitators to healthy eating, especially among participants with higher quality diets. These included building trust between patients and their [health care provider](#), identifying a high motivation to improve nutrition-related behaviors and recognition of the additional benefits of nutrition and a [healthy diet](#).

The research team noted that the findings are not generalizable, and future research should continue to investigate and explore the unique nutrition- and wellness-related needs of young female cancer survivors with diverse racial and ethnic, educational, and socioeconomic backgrounds and across different cancer types and treatments.

They recommend that nutrition programs and interventions for female [cancer](#) survivors use evidence-based strategies and tools such as motivational interviewing, self-monitoring, and [social support](#). Customized interventions should accommodate women's work schedules to improve adherence, and culinary education resources may help improve survivors' confidence in cooking, motivation and fatigue management.

"Nutrition interventions that seek to strengthen fertility treatment can be optimized by considering and addressing barriers and facilitators during the development stage," said Milliron.

In addition to Milliron, co-authors include lead author Cynthia Klobodu, Ph.D., of California State University, Chico; Jonathan Deutsch, Ph.D., Kathleen Fisher, Ph.D., Jennifer A. Nasser, Ph.D., and Dahlia Stott, of

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More information: Cynthia Klobodu et al, Optimizing Fertility Treatment With Nutrition Guidance: Exploring Barriers and Facilitators to Healthful Nutrition Among Female Cancer Survivors With Fertility Challenges, *Integrative Cancer Therapies* (2023). [DOI: 10.1177/15347354231191984](https://doi.org/10.1177/15347354231191984)

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