Fertility Preservation Prior to Cancer Treatment

INITIAL PRESENTATION

Patients at risk for treatment-induced infertility

Care Team informs patients of:
- Risk of infertility from treatment(s)
- Options to preserve fertility if interested
- Availability of fertility specialist
- Confirmation that infertility risk has been explained
- Refer to fertility preservation informational resources
- Facilitate referral (if interested) to a fertility specialist

All patients should be asked if fertility is important¹, preferably in private

Patient interested in or uncertain about fertility preservation options¹?

Yes
- Consult oncofertility specialist and determine if eligible for fertility preservation² (see Appendix A for sperm banking and fertility consults)

No
- Consider patient educational material on fertility and family building after cancer treatment (see Appendix B for websites and patient education)

EVALUATION

Consult oncofertility specialist and determine if eligible for fertility preservation² (see Appendix A for sperm banking and fertility consults)

Eligible for fertility preservation?

Yes
- Fertility preservation method completed³?
- Individualized care based on clinical indications

No
- Consider alternative options for fertility and family building⁴

FOLLOW-UP

Begin cancer treatment recommendations

Fertility preservation method completed³?

Yes
- Individualized care based on clinical indications

No
- Consider alternative options for fertility and family building⁴

Other options for fertility and parenthood

- Donor eggs, sperm, and embryos
- Adoption
- Gestational surrogacy

¹ Fertility consideration (if clinically appropriate)
- Fertility decisions should be based on an patient’s values, beliefs, morals, culture, and religious practices
- Assessment and informative discussion of fertility desires should be conducted as part of treatment planning options that may impact fertility options
- Fertility consult criteria:
  - Male greater or equal to 10 years old*
  - Premenopausal female greater or equal to 10 years old*
- * See MD Anderson Institutional policy CLN0547 for pediatric patients

² Assess need for:
- Referral to psychiatry or reproductive medicine psychologist for decision and emotional support
- Financial counseling regarding fertility preservation by fertility specialist

³ Fertility preservation options and length of time needed prior to starting cancer treatment that can impact fertility:
- Cryopreservation of sperm: 1-3 days needed
- Cryopreservation of embryos: 2-3 weeks needed
- Cryopreservation of oocyte: 2-3 weeks needed

Investigational fertility preservation options:
- Ovarian suppression: up to 10 days needed
- Cryopreservation of ovarian or testicular tissue: variable, up to 3 days needed

Disclaimer: This algorithm has been developed for MD Anderson using a multidisciplinary approach considering circumstances particular to MD Anderson’s specific patient population, services and structure, and clinical information. This is not intended to replace the independent medical or professional judgment of physicians or other health care providers in the context of individual clinical circumstances to determine a patient’s care. This algorithm should not be used to treat pregnant women.

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Department of Clinical Effectiveness V5
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## APPENDIX A: Sperm Banking and Fertility Consults

### Consult for female fertility preservation or counseling for male fertility preservation at MD Anderson

- Go to Medications and Orders in OneConnect. Select Ambulatory Referral to Gynecologic Oncology Center and choose Onco Fertility button.
- For urgent consults, e-mail: Terri Woodard, MD at twoodard@mdanderson.org or Deborah Holman, RN, MSN, WHNP-BC at daholman@mdanderson.org

### Sperm banking at Baylor College of Medicine Department of Urology

- Special Procedures Lab - upfront cost for analysis and one year storage $550-$650; without insurance infectious disease testing may be additional
- Phone number 713-798-4027
- Lab hours are Monday through Friday, 8 a.m. to 5 p.m.
- Patients need to have a cryopreservation referral form completed by their physician. To request a referral, call 713-798-4027.
- The form should be completed and faxed to Baylor requesting cryopreservation: fax number 713-798-6679
- Same day appointments are often available

### Consult for pediatric fertility preservation or counseling at MD Anderson

- Go to Medications and Orders in OneConnect. Select Ambulatory Referral to Pediatrics and choose Onco Fertility button
- Call the Child and Adolescent Center Clinic at 713-792-6610
- For inpatient consults and urgent consults, page Donna A. Bell, MSN, RN, NP-C at 713-606-2256 or page John Andrew Livingston, MD at 713-606-1790
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APPENDIX B: Patient Education and Websites

MDACC Patient Education (available through Patient Education Online)

- Fertility Options for Men and Women
- Fertility Options for Men who Need Cancer Treatment
- Fertility Options for Women Who Need Cancer Treatment
- Pregnancy and Cancer
- Pregnancy Test
- Preventing Pregnancy during Cancer Treatment
- Sexuality and Cancer
- Pathfinder—Fertility and Cancer: Provides a list of pamphlets, books and websites that are available to patients

Websites

www.ReproductiveFacts.org: The patient education website of the American Society for Reproductive Medicine. Under the publications tab, it includes printable informational booklets and fact sheets about a variety of issues including “Age and Fertility,” Assisted Reproductive Technologies,” “Cancer and Fertility Preservation,” “Adoption,” and “Third Party Reproduction.”

www.livestrong.org: The national LIVESTRONG initiative dedicated to providing reproductive information, support and hope to cancer patients and survivors whose medical treatments present the risk of infertility. In addition to providing patient education and support, it also offers financial assistance for fertility and family building services.

Videos - Fertility Options for Female patients

The Female Reproductive System: http://www3.mdanderson.org/streams/FullVideoPlayer.cfm?mediaID=297C3559-01F5-4F33-B2FC-8B046A7C8S
Fertility Preservation Before Cancer Treatment: http://www3.mdanderson.org/streams/FullVideoPlayer.cfm?mediaID=97EAAD28-32D9-4FA9-99C1-17C93DAAC0E7
Family Planning After Cancer Treatment: http://www3.mdanderson.org/streams/FullVideoPlayer.cfm?mediaID=0BE83F30-C1E7-48AF-8035-52EE778DDF63
Fertility Consultation: http://www3.mdanderson.org/streams/FullVideoPlayer.cfm?mediaID=45EB224B-D593-4B52-8D1D-E9AF5130E97E
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SUGGESTED READINGS


Continued on Next Page
**SUGGESTED READINGS - continued**


UTMDACC Institutional Policy #CLN0547- Informed Consent Policy.

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DEVELOPMENT CREDITS

This practice consensus statement is based on majority opinion of the Fertility workgroup at the University of Texas MD Anderson Cancer Center for the patient population. These experts included:

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