Fertility & Cancer

What you need to know

This booklet will give you information about:

- Chemotherapy/immunotherapy/hormone therapy and fertility
- · Radiation therapy and fertility
- · Surgery and fertility
- Early menopause
- Fertility preservation options



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Important: Before you start treatment for cancer

Fertility is the ability to make a baby.

Cancer and treatment for cancer can affect your ability to have children. It is very important to tell your oncologist (cancer doctor) and team if you want to have a child. There are different ways that you or your partner might be able to keep your fertility.

It is hard enough to think about cancer and cancer treatments. If you need to make decisions about family planning and your sexual health you can get anxious and stressed.

It's very important to know that you are not alone. If you have a partner talk to them about what is important to you. Sometimes it is helpful to talk to a professional counsellor.

Patient and Family Support services can give counseling to patients and family members. To get in touch visit the Patient and Family Support office at TG-230 (on the ground floor of the Odette Cancer Centre) or call 416-480-4623.

For female patients or patients with female body parts (vagina, uterus and ovaries) it may be hard to get pregnant, carry a pregnancy or to give birth because of the cancer you have or the cancer treatments you get.

For male patients or patients who have male sex organs (penis, testicles) your sperm may be affected. Healthy sperm is needed to fertilize an egg for a pregnancy.

Chemotherapy/immunotherapy/ hormone therapy and fertility

Systemic therapy is treatment that uses medications (drugs) that travel through the body to treat cancer cells. It can include chemotherapy, androgen deprivation therapy (hormone therapy), targeted drugs, and immunotherapy. Chemotherapy and other cancer treatment drugs may affect your fertility.

Cancer drugs may change healthy sperm for men or might slow or stop eggs from being made by women. Some patients might find it more difficult to get pregnant and have a baby after systemic therapy is finished.

Some patients decide to preserve ("freeze") their eggs or sperm before they start their treatments.

Ask your doctor about:

- egg freezing
- embryo (an egg that has been fertilized) freezing or
- · sperm freezing vs. sperm banking

Important:

Talk to your health care team about your wishes/plans to have children <u>BEFORE</u> you start your treatment. It is very important NOT TO GET PREGNANT if you are on systemic therapy or any other cancer treatment drugs. These drugs can harm the baby.

Female patients: Some of the side effects of systemic therapy, like nausea (feeling sick to your stomach), vomiting and diarrhea, might make a contraceptive pill not work as well. You may need to use alternative contraception during chemotherapy.

Male patients: It is important that if your partner is female they do not get pregnant while you are on systemic therapy. Use condoms if you have sex during your chemotherapy treatment. Medications can get transferred through body fluid which can harm your partner.

Radiation therapy and fertility

Radiation therapy treatment can affect your fertility, especially if you are having treatment in the pelvic area.

Talk to your radiation oncologist (cancer doctor) about your wishes/plans to have children <u>BEFORE</u> you go to radiation therapy treatment planning. There may be different ways to plan your treatment so that your fertility will not be affected.

Surgery and fertility

Some cancer related surgeries might affect your fertility. Changes to your fertility depend on the type of surgery and where your cancer is in your body.

Types of surgeries that could affect your fertility:

- uterus removal (this is where babies develop and grow)
- ovary removal (ovaries produce eggs)
- prostate removal (your prostate produces fluid to help sperm move during sex)

Early menopause

Menopause is a natural process that women go through as they get older. It means that they are no longer able to have children because of changes to their fertility.

Some cancer treatments can make women start menopause earlier (early menopause). These treatments can stop your ovaries from making eggs for a while or forever.

Some people may only have short term infertility when your menstruation (period) stops or is less regular.

There are support and treatment options to help you with early menopause. Ask your team to refer you to the Odette Sexual Health and Recovery (SHARE) Clinic.

Fertility preservation options

For women (or patients born with female genitals)

Egg freezing might be a choice if you want to try to get pregnant or have a biological child in the future. Eggs are taken from your ovary and frozen to be used later.

Embryo freezing

Embryo freezing is when eggs are fertilized with sperm and an embryo (first stage of a baby) is frozen.

It is important to let your health care team know as soon as possible if you want to go ahead with any of the options above.

For men (or patients born with male genitals)

Sperm banking is a choice for men before they start cancer treatment. Sperm can be used in the future for in vitro fertilization (fertilization first happens in a test tube before it is inserted into a uterus) or with intra uterine insemination (sperm is inserted into a uterus).

Fertility resources

Your oncologist (cancer doctor) can send a referral to a fertility clinic. There are different fertility clinics in Toronto CReATe Fertility Centre 416-323-7727 or the Centre for Fertility & Reproductive Health at Mount Sinai Hospital 416-586-4748.

You can find more information about different Canadian fertility clinics on the Canadian Knowledge Network website cancerkn.com.

How much do these procedures cost?

Procedure	Approximate cost	
Egg and embryo freezing	\$5,000 to \$7,000	
Hormone medication (might be used with the other procedure first)	\$2,000	
Sperm banking (storing the sperm)	\$300 to \$800	
Sperm samples (getting the sperm from the patient)	\$200	
Annual storage costs	\$300	
In vitro fertilization	\$5,000 to \$6,000	

Financial support

OHIP does not cover all of the costs for these fertility options. As a cancer patient you might be able to get funding for some of these procedures.

Fertile Futures Power of Hope is a charity that can provide some funding for cancer related fertility treatments. Website **fertilefuture.ca** or call them at 1-877-467-3066.

A social worker at the Odette Cancer Centre can help you:

- understand some of your fertility options
- help you with paperwork or funding for fertility treatments
- talk about any stress or anxiety you might have

Social Work services are part of your care at the Odette Cancer Centre. Visit the Patient and Family Support office at TG-230 (on the ground floor of the Odette Cancer Centre) or call 416-480-4623.

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