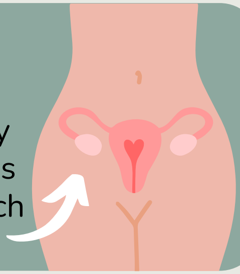
What is fertility?

Fertility refers to an individual's ability to conceive and carry a pregnancy.

When a person is born, their ovaries typically contain over a million eggs. This number naturally decreases over time since no new eggs are produced after birth. When only a few eggs remain, usually around the age of 50, this signals the onset of menopause.

What are ovaries?

Two oval shaped organs on either side of the uterus. They hold all the eggs a person has and also make hormones, such as estrogen.



Some cancer treatments can speed up the depletion of these eggs, causing menopause to occur earlier. This may shorten the timeframe for having children due to the accelerated aging of the ovaries. Therefore, it is important to consider methods for preserving fertility before starting any cancer treatment.

? FAQS

Does fertility preservation cost money?

Depending on the procedure you choose, there may be some costs. However, resources are available that can help cover these costs. Please ask your care team for more information.

Do young people need permission from a parent/guardian to talk about fertility preservation or go through procedures?

We encourage patients to talk to their parents or guardians about fertility preservation. Still, the choice to meet with a fertility specialist or go through the procedure is up to them. Patients need to understand the benefits, risks, and impact of the procedure in order to give consent.

What do most patients/families choose?

Fertility preservation is a personal choice. There is no right or wrong decision. Each situation is unique, and your care team will support your choice.

FERTILITY PRESERVATION

FOR INDIVIDUALS WITH OVARIES

FERTILITY PRESERVATION AND CANCER/BONE MARROW TRANSPLANT

Which therapies impact me or my child's fertility?

Your oncologist (cancer doctor) or transplant doctor will tell you if there are potential risks to you or your child's fertility. In general, fertility may be affected by:

- Certain types of **chemotherapy** used for cancer treatment and for bone marrow transplants, such as alkylators (e.g. cyclophosphamide)
- **Surgery** that involves removing sex organs (e.g. ovaries, uterus, cervix, vagina)
- **Radiation therapy**
  - close to or on the ovaries and/or uterus
  - cranial (head) radiation

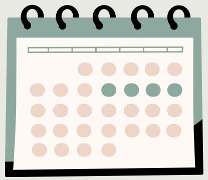
What is fertility preservation?

Fertility preservation refers to the process by which individuals can save or protect their eggs or reproductive tissue, enhancing the likelihood of having biological children in the future.

TIMING FOR FERTILITY PERSERVATION

Fertility procedures are time-sensitive. If you or your child is interested in fertility preservation, it should be done **before** starting any treatment (except for patients with blood cancers).

A member of your healthcare team will start the conversation and refer you or your child to our SickKids Gynecology Team and/or Mount Sinai Fertility Team for further assessment.



What if treatment has already started or finished?

If you or your child have already started or finished treatment, there may still be options for fertility depending on the type of treatment.

Other ways to become a parent may be an option as well, such as adoption, fostering, surrogacy, or egg donation. Some people may choose not to have children as well.

FERTILITY PRESERVATION OPTIONS

Ovarian Tissue Cryopreservation

- For people of any age.
- One ovary is removed by a surgeon laparoscopically (through small incisions in the abdomen using a camera to assist) under general sedation
- The tissue is processed, frozen, and stored at Mount Sinai Hospital.
- When the individual is ready to become pregnant, the ovary can be thawed and transplanted (put back) into the body, if needed, using a similar surgery.

Egg (oocyte) Freezing

- Advised after the age of 16 years old.
- Hormone injections are given for 10-14 days to help the ovaries produce many mature eggs.
- These eggs are then collected during an outpatient procedure in the clinic under light sedation, via transvaginal (through the vagina) ultrasound-guided approach and frozen for future fertility treatment.