

The Center for Fertility Preservation at USF IVF is committed to offering young adults with cancer with the most current and comprehensive fertility preservation opportunities.

Every year, 55,000 young adults, adolescents, and children are diagnosed with cancer in the United States. Most young men and women dream of having children and a family, and cancer patients are no different in this desire. Many chemotherapy drugs, and even some surgeries and radiation treatments, permanently destroy eggs and sperm. As cancer treatment has improved and advanced, so too have reproductive options. It is important that young cancer patients have the knowledge and the opportunity to make reproductive choices.

Reproductive considerations in cancer patients include:

- Will cancer treatment destroy gonadal function?
- What fertility preservation treatment choices are available, and when are they indicated?
- If cancer treatment is delayed to make time for fertility preservation, will survival be affected?
- What options are there to shorten the time required for fertility preservation treatment?
- Will pregnancy alter the likelihood of survival?
  
- Are there ways to prevent genetic transmission of genes that could predispose children of parents with familial cancers to cancer?

Treatment choices can include

- Sperm freezing and banking
- freezing unfertilized eggs
- freezing embryos (fertilized eggs)
- Some gynecologic cancer surgeries can be modified in reproductive age women to conserve reproductive organs
- Ovarian transposition surgery is a procedure where ovaries are moved away from a radiation field when radiation therapy is being used that may affect the ovaries.
- Hormonal treatment with drugs called GnRH agonists during chemotherapy may offer partial protection to the ovary
- Ovarian tissue cryopreservation (investigational)

Collaboration and discussion between the patient, her/his oncologist and the Center for Fertility Preservation team is important to develop an approach that will give the best opportunity for future fertility, and not delay cancer treatment.