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Cancer
Network

Improving Fertility Preservation Care for Male Patients with Cancer

William Buckett, MD



Centre universitaire
de santé McGill



McGill University
Health Centre



Hôpital général juif
Jewish General Hospital



Centre hospitalier de St. Mary
St. Mary's Hospital Center

Outline

- QI2 project goal and objectives
- MUHC RC Statistics at a Glance
- ASCO Guidelines about Fertility Preservation
- Educating Health Care Providers
- Bringing Awareness to Patients



Goal

**Improve access to fertility preservation services
for male cancer patients**

Project led by: Belén Herrero, PhD and William Buckett, MD



Objectives

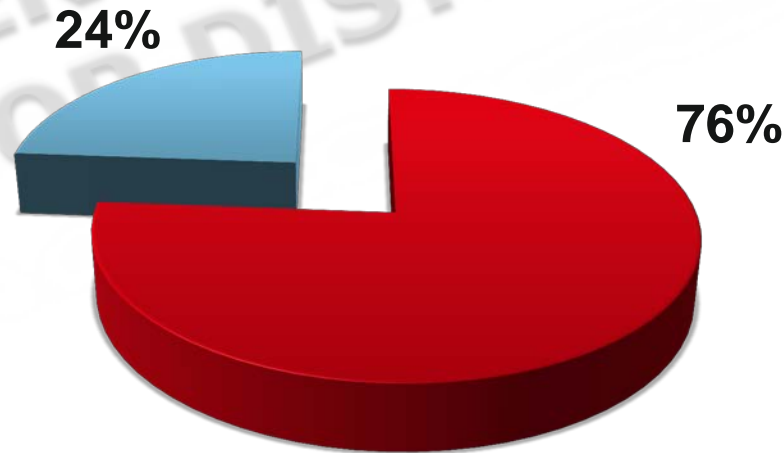
- Bring awareness to health care providers about the cancer-treatment related fertility risks and fertility preservation options available to male patients with cancer
- Develop a suite of patient education tools to equip patients with knowledge regarding importance of timely fertility preservation care
- Standardize referral process across RCN



MUHC Reproductive Centre Statistics at a Glance (2015)

- ❖ In 2015, only 48 male cancer patients from RCN hospitals preserved fertility at the MUHC Reproductive Centre

MUHC RC 2015 male cancer patient population by referral source



■ RCN ■ Other

n=63

Report date: April 2016
Data source: MUHC RC database
Prepared by: Rossy Cancer Network



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Fertility Preservation for Patients With Cancer: American Society of Clinical Oncology Clinical Practice Guideline Update

Alison W. Loren, Pamela B. Mangu, Lindsay Nohr Beck, Lawrence Brennan, Anthony J. Magdalinski, Ann H. Partridge, Gwendolyn Quinn, W. Hamish Wallace, and Kutluk Oktay

ABSTRACT

Purpose

To update guidance for health care providers about fertility preservation for adults and children with cancer.

Methods

A systematic review of the literature published from March 2006 through January 2013 was completed using MEDLINE and the Cochrane Collaboration Library. An Update Panel reviewed the evidence and updated the recommendation language.

Results

There were 222 new publications that met inclusion criteria. A majority were observational studies, cohort studies, and case series or reports, with few randomized clinical trials. After review of the new evidence, the Update Panel concluded that no major, substantive revisions to the 2006 American Society of Clinical Oncology recommendations were warranted, but clarifications were added.

Recommendations

As part of education and informed consent before cancer therapy, health care providers (including medical oncologists, radiation oncologists, gynecologic oncologists, urologists, hematologists, pediatric oncologists, and surgeons) should address the possibility of infertility with patients treated during their reproductive years (or with parents or guardians of children) and be prepared to discuss fertility preservation options and/or to refer all potential patients to appropriate reproductive specialists. Although patients may be focused initially on their cancer diagnosis, the Update Panel encourages providers to advise patients regarding potential threats to fertility as early as possible in the treatment process so as to allow for the widest array of options for fertility preservation. The discussion should be documented. Sperm and embryo cryopreservation as well as oocyte cryopreservation are considered standard practice and are widely available. Other fertility preservation methods should be considered investigational and should be performed by providers with the necessary expertise.

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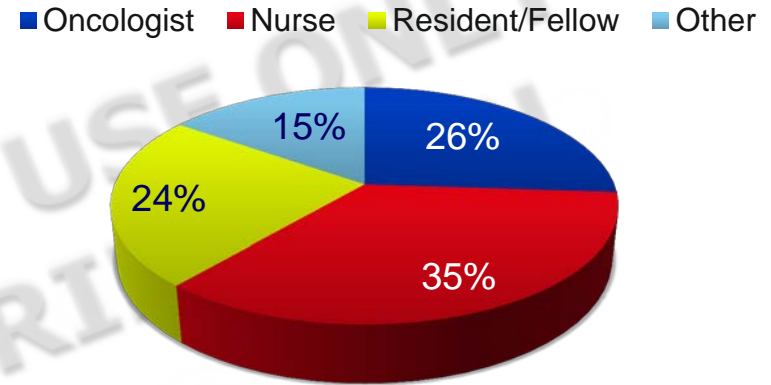
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Oncology health care professionals **should address the possibility of infertility** with all newly diagnosed male cancer patients and be prepared to **discuss fertility preservation options** and/or **refer** all potential patients to appropriate reproductive specialists.

Educating Health Care Providers

- 78 health care providers from MUHC, JGH and St Mary's attended Education Sessions on Fertility Preservation for male cancer patients
- Overall, there was a **significantly improvement (77% increase)** in health care professionals' knowledge regarding fertility preservation guidelines and services (for more details see Poster # 29)



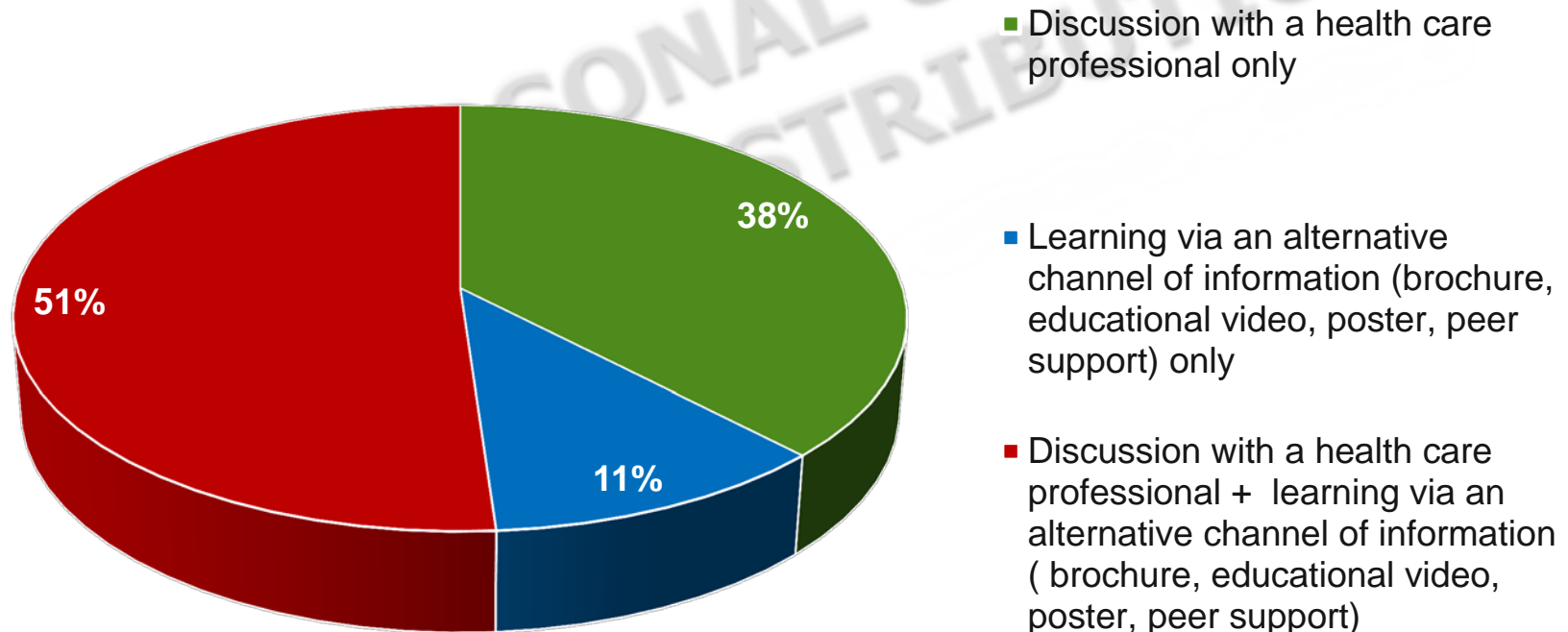
Respondents' self-assessed knowledge scores:
Score range: 1= least knowledgeable; 5= most knowledgeable

<u>Profession</u>	<u>Pre-survey</u>	<u>Post-survey</u>
• Nurse	2.1	3.7
• Oncologist	2.4	3.7
• Other	1.8	3.5
• Res/Fellow	1.8	3.6



Bringing Awareness of Fertility Preservation Options to Patients

Q14: In your opinion, which of the following ways of learning about sperm freezing do you consider useful?



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N=45



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Responding to patient information needs

- In collaboration with patients and HCPs across RCN, we have developed a suite of patients education material regarding (pre-cancer treatment) fertility preservation care:
 - Instructional video for patients
 - Pamphlet
 - Poster (paper, electronic)
 - FAQs
 - Bookmarks
- The patient education material is available in both French and English



Patient education tools and the referral form are available on the MUHC RC website

MUHC Reproductive Centre Web page



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Kids After Cancer?

Explore fertility preservation options **before** starting your oncology treatment

- Obtain a referral for fertility preservation from your oncology provider or call the MUHC Reproductive Centre 514-843-1650
- Freeze your sperm, eggs, or embryos before cancer treatment
- Follow-up with a fertility specialist

Egg, sperm and embryo freezing as a pre-cancer treatment, and storage fees for the first five years, are covered by the Quebec Insurance Plan (RAMQ).
 No waiting time for appointments.

www.mcgillivf.com
info@mcgillivf.com 514-843-1650










Kids After Cancer?

Consider fertility preservation before starting your oncology treatment



Fertility preservation care for male patients diagnosed with cancer





"I didn't know if I was going to be fertile or not after my treatments. Fortunately, I was. But if I wasn't, I see making the choice to freeze my sperm as a younger man was the best insurance policy for happiness there is."
 -- Gregory, 33, testicular cancer survivor



Can cancer treatments affect my ability to have a child?
 Cancer treatments such as surgery, chemotherapy and radiation can damage your fertility (ability to have a child). This effect can be temporary or permanent. Your risk depends on the type of cancer you have, the treatments you receive, your age, and your fertility status before cancer treatment.

How will my frozen sperm be used when I'm ready to have a child?
 Your frozen sperm will be used to conceive a child through assisted reproduction such as intrauterine insemination (IUI) or in vitro fertilization (IVF).

How much does it cost to freeze sperm?
 Sperm freezing for adolescents and adults diagnosed with cancer is covered under the Quebec Health Insurance Plan (RAMQ) as per Bill 20 (chapter 25-34.3).

How long do I have to wait for an appointment?
 There are no wait times for appointments.

How do I book a sperm freezing appointment?
 Ask your oncology provider for a referral or call the MUHC Reproductive Centre at 514-843-1650.

For more information:
 MUHC Reproductive Centre
 Royal Victoria Hospital (Legacy Site)
 65 St. - 657 Pine Ave West, Montreal, QC H3A 1A1
 Telephone: 514-843-1650 Fax: 514-843-1496
 Email: info@mcgillivf.com
www.mcgillivf.com

What can I do to preserve my fertility?
 The most effective way to protect your fertility is by freezing your sperm before you start cancer treatments.

What does the sperm freezing procedure involve?
 You will be asked to produce one or more sperm samples before the start of your cancer treatment. You can produce a sperm sample either at home or in a private room at the MUHC Reproductive Centre. Your sperm will be analyzed, frozen and stored at our centre.

How long can sperm stay frozen?
 Your sperm can stay frozen until the day you are ready to use it to have a baby.




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Veuillez éliminer la carte d'hôpital ou compléter / Please stamp hospital card or complete

Centre de la reproduction de santé McGill / MUHC Reproductive Centre

Questions? Composez le / Please call: 514-843-1650

Urgent: Oui / Yes Non / No

Medecin traitant en oncologie / Treating physician in oncology

Professionnel de la santé référent / Referring health care provider

Diagnostic / Diagnosis

Plan de traitement / Treatment plan

Commentaires / Comments

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PRÉSERVATION DE LA FERTILITÉ / FERTILITY PRESERVATION

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Thank you!

