

# Bridging the gap between oncology health care providers and fertility specialists to facilitate access to timely fertility care

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## INTRODUCTION

As cancer survivors live longer, fertility becomes an important health concern. Existing and emerging technologies may prevent the risk of infertility (ex: sperm and egg freezing), although the lack of a trained workforce knowledgeable about oncology and reproductive health is a barrier to care.

In 2013, the American Society of Clinical Oncology (ASCO) published updated clinical practice guidelines for fertility preservation and recommended that clinicians:

- 1) discuss the potential impact of cancer treatments on future fertility with reproductive-aged patients with cancer and
- 2) be prepared to refer patients to a reproductive specialist, if appropriate.

However, research shows that proper pre-treatment fertility counselling is disseminated to only a minority of newly diagnosed patients with cancer. Therefore, there is an **urgent need** in our oncology healthcare system to **strengthen the management of patients' reproductive function during a cancer diagnosis**.

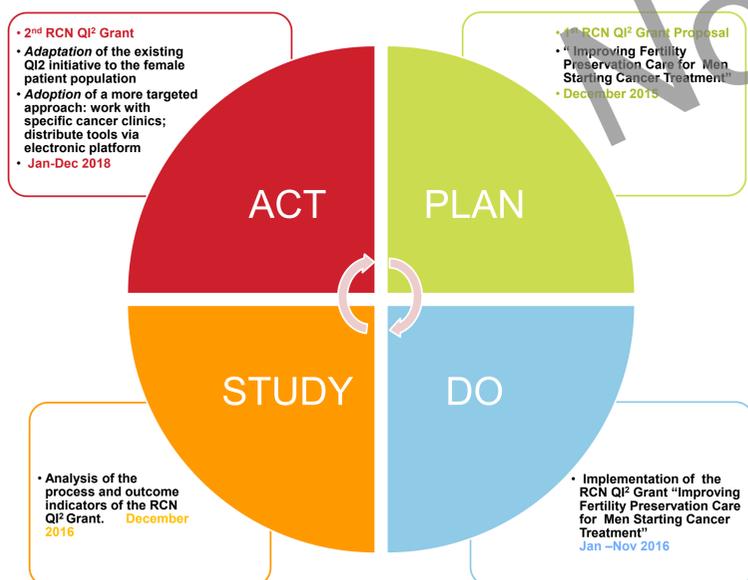
## OBJECTIVES

The overall objective of this initiative is to bring awareness and knowledge to oncology health care providers (HCPs) and patients with cancer about the importance of fertility preservation.

The project specific goals are:

- To develop a suite of patient education material to bring awareness and promote patient activation
- To put in place a dissemination strategy for patient education material including both paper and electronic means (such as the electronic patient portal OPAL)
- To streamline the referral process from oncology to the MUHC Reproductive Centre
- To educate health care professionals about the importance of fertility preservation for patients starting cancer treatments

## METHODS / INTERVENTIONS



## RESULTS

Development and implementation of a **suite of patient education tools to spread the word about fertility preservation options for patients with cancer**

### BROCHURES

One brochure for MEN & one brochure for WOMEN to explain the fertility preservation process and facilitate the discussion between the oncology HCPs and patients



### WAITING ROOM POSTERS

Placed in high traffic patient areas with the purpose of increasing awareness about fertility preservation options



### FREQUENTLY ASKED QUESTIONS

Available on the MUHC Reproductive centre website:  
[www.muhc.ca/reproductivecentre](http://www.muhc.ca/reproductivecentre)



### BOOKMARKS

Given to patients as a quick reminder of the key steps in the fertility preservation process



All patient education tools have been created with the input from patients, health care professionals in oncology and fertility specialists.

## VIDEOS

Developed to promote patient engagement and activation. You can find the videos on the MUHC Reproductive Centre website, the RCN website on and You Tube.



Fertility preservation video for men



Fertility preservation video for women

## EDUCATIONAL TALKS

Development and implementation of **education sessions for health care providers** aimed at raising awareness on fertility preservation guidelines, practices and a referral process

- To date, more than a hundred oncology health care providers from all three RCN sites (physicians, nurses, residents, allied health professionals) took part in educational talks.
- An increase in self-reported knowledge of fertility preservation practice was observed in the post-session scores.



## PATIENT IMPACT

In Spring/Summer 2019, the evidence of changes that occurred after the educational material has been disseminated will be collected by measuring key outcome indicators including the number of patients preserving their fertility before cancer treatment and specialty types of referring physicians.

To date, an increase in the different type of cancer diagnosis referred for fertility preservation at the MUHC Reproductive Centre is observed, suggesting that the educational talks helped "spread the word" among different specialties within oncology health care professionals.

## CONCLUSION

The patient educational material created through this initiative, as well as efforts to educate health care providers and patients about the importance of fertility preservation could provide significant means of facilitating timely access to fertility preservation services and bridging the gap between the oncology health care providers and fertility specialist.