

&sexuality Fertilitymales

WILL I BE INFERTILE FROM THE CANCER OR TREATMENT I HAD?

Not all cancers and cancer treatments cause infertility, but some do, so it is important to understand your individual risks. Infertility occurs when you stop producing sperm or when your sperm is too damaged. Azoospermia is the term used for having no sperm in semen.

There are two main causes of infertility for males who have survived a childhood cancer:

1. DIRECT AFFECT ON THE SPERM-PRODUCING CELLS IN THE TESTES BY:

- Chemotherapy with certain drugs – specifically alkylating agents. The most common ones used in treating a childhood cancer are; Ifosphamide, Cyclophosphamide, Procarbazine, Melphalan, Thiotepa, CCNU, and BCNU
- The greatest risk is from high total doses of these drugs and/or combined with radiation to the brain, pelvis or lower spine.
- Radiation to the pelvis, testicles and total body irradiation (TBI).
- Surgery to the testicles or near the prostate (not common).

2. DIRECT AFFECT ON THE HORMONE-PRODUCING AREAS OF THE BRAIN E.G. THE PITUITARY GLAND IN THE BRAIN THAT CONTROLS THE PRODUCTION OF HORMONES. THESE HORMONES ARE THE FOLLICLE STIMULATING HORMONE (FSH) AND LUTEINISING HORMONE (LH).

- Radiation or surgery to the brain.

3. OTHER FACTORS THAT CAN AFFECT YOUR RISK OF INFERTILITY ARE:

- Age at diagnosis or treatment.
- Pre-treatment fertility status.

CAN I HAVE CHILDREN?



HOW DO I KNOW IF THIS IS A PROBLEM FOR ME?

These are important issues for young people; hormones produced in the brain also regulate growth, as well as when and how, you go through puberty. It is often at this time that problems (if any) may appear. Blood tests can be done to check the hormone levels once you reach puberty. A semen (sperm) analysis can be done at any time to check if you are producing sperm. Sperm have been known to recover up to several years after treatment with some chemotherapy drugs, but this depends on the dose and whether it is combined with other alkylating agents or treatments. Your oncologist will be able to discuss this with you more fully.

There are a number of options available to assist you in fathering a child; if necessary a referral will be made to a specialist fertility clinic where treatments and options that are available can be discussed. If the type of treatment you had means you are at a high risk of your fertility being affected, you will be given more specific information when you come to clinic.

WHAT ABOUT MY SEX LIFE?

Fertility and sexual function are different. Even if you are told you are infertile you can still have a normal sex life.

SHOULD I USE CONTRACEPTIVES?

Yes! Do not assume that because you have had some of these treatments you will be infertile. It is important that you take precautions until you are ready to have a family. It is also important to protect yourself from sexually transmitted diseases.

WILL MY BABY HAVE CANCER?

Some young cancer survivors worry that the treatment they had may affect their baby, there is no evidence of increased health problems or abnormalities in children of people who have had treatment for cancer. Except for some rare inherited cancers there is also no evidence that children of cancer survivors have an increased risk of developing a cancer compared to other people.

Please note: 1 in 10 couples are infertile in the general population.

THESE ISSUES CAN BE DISCUSSED IN MORE DETAIL WHEN YOU COME TO CLINIC AS THE RISK OF ANY PROBLEMS WITH FERTILITY IS DIFFERENT FOR EVERYONE.


LIKE MORE INFORMATION?

The following are good websites to checkout:

www.fertilehope.org/learn-more

www.beyondthecure.org

www.fertilityassociates.co.nz/Understanding-your-fertility.aspx



HOW DO I
KNOW I HAVE
A PROBLEM?



SEX

IF YOU HAD SPERM BANKED BEFORE TREATMENT, IT IS IMPORTANT THAT YOU KEEP THE BANK INFORMED IF YOUR CONTACT DETAILS CHANGE (THEY WILL CONTACT YOU PERIODICALLY). IF THEY HAVE LOST CONTACT WITH YOU FOR 10 OR MORE YEARS THE BANKED SPERM MAY BE DESTROYED.
