Abstract:
Cancer treatment is the most frequent cause of reduced fertility in cancer patients, with up to 80(%) of survivors affected. None of the established or experimental fertility preservation methods can assure parenthood, rather they may provide a future opportunity to overcome treatment induced sterility. Around 70-75(%) of young cancer survivors are interested in parenthood but the numbers of patients who access fertility preservation techniques prior treatment are significantly lower. Moreover, despite existing guidelines, healthcare professionals do not address fertility preservation issues adequately. Lack of time and knowledge about existing options, delay in potentially useful treatment, patient's age, partnership status, existing children, sexual orientation and socioeconomic situation are the main barriers to effective fertility preservation. Patient's fears, expectations and priorities shaped by personal values have to be addressed in the framework of medical necessities, realistic survival probabilities, socio-cultural environment and resources availability. We call for a need of patient centred fertility counselling within a framework that should include patients understanding of medical aspects of their cancer, realistic fertility preservation options, preferences based on personal values and goals. Optional support services could also include legal guidance, psychological and spiritual support and financial counselling.