

**Age, Melbourne**

31 Dec 2012, by Kate Hagan

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BRIEF IVF HOLD

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Having cancer no reason to avoid baby talk

By KATE HAGAN
HEALTH REPORTER

AS A 29-year-old newlywed, not being able to have children was Sara D'Angelo's first concern when she was diagnosed with cervical cancer in May 2011.

"I'd just married in 2009 and we were looking at having a family," she said.

"It hadn't hit me that it was cancer, and my life was probably more important at that point."

Mrs D'Angelo said that, while doctors were weighing up her treatment options, her main concern was finding out how she could preserve her chance of having a child.

Victorian Assisted Reproduction Treatment Authority education officer Kate Bourne said discussions about fertility preservation were too often overlooked following a cancer diagnosis, with research by the Victorian and Tasmanian Youth Cancer Network showing fewer than half of young patients were informed of their options.

The network recently audited the medical records of 171 patients aged 15 to 25 who were diagnosed with cancer in 2009, and found evidence of a discussion about fertility in just 65 cases (39 per cent).

Ms Bourne said advances in cancer treatment had improved the long-term survival of cancer patients but the effects of chemotherapy and radiotherapy on eggs and sperm rendered

many of them infertile.

She said young people with cancer needed to discuss their options with fertility specialists before treatment, but many oncologists failed to raise the subject because they did not have a good understanding of the options, or of where to refer patients.

She said the problem led her to run 14 education sessions for 300 cancer specialists at big public hospitals throughout Victoria about the effects of cancer treatment on fertility and the preservation options.

Ms Bourne said participants rated the sessions highly and she hoped they would lead to improved rates of referral to fertility specialists.

For Mrs D'Angelo, her determination to find the options led her to a fertility preservation service at the Royal Women's Hospital and the Melbourne IVF clinic, where she chose to freeze six embryos before undergoing radiotherapy and chemotherapy.

The clinic's medical coordinator Kate Stern said it saw about 150 new patients a year made up of men, women and teenagers from throughout Australia.

She said freezing ovarian tissue and eggs was among the options for women, along with freezing embryos if they had a partner. For men it was possible

to freeze sperm, or take testicular tissue from boys who had not yet undergone puberty.

Dr Stern said fertility specialists were becoming increasingly optimistic about the ability of cancer survivors to conceive using preservation methods, and discussing them was becoming an expected part of their management.

"A lot of the survivorship studies talk about this anger and regret and resentment. They are cured from their cancer and they just feel really angry that no one discussed [fertility]," she said.

Mrs D'Angelo was cleared of cancer in May and is grateful she had the chance to store embryos before her treatment. She is now considering surrogacy, which is her only option for conceiving a child with husband Nazz due to damage to her uterus from radiotherapy.

"It was an absolute blur for us. You've got a life-threatening illness and then there's the impact on your fertility thrown in," she said. "We were told straight up that surrogacy would be our only option. Now I'm better, if I didn't have that option I don't know where we'd be at, because adoption is so difficult."

"We've had offers from people around us and we are exploring those. It's a long, lengthy process, but we're looking at going on that journey with another couple."





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PRESERVING FERTILITY

For women

Freezing eggs/freezing embryos: Mature eggs are retrieved and fertilised with a partner's sperm. Embryos tend to survive freezing and thawing better than eggs alone.

Freezing ovarian tissue: Tissue is removed from an ovary, sliced and frozen. Treatment is still experimental.

Ovary-protecting injections: Medications known as GnRH analogues may protect the ovaries during chemotherapy treatment.

For men

Freezing sperm/freezing testicular tissue

Right: Sara D'Angelo stored some frozen embryos before treatment for cervical cancer last year.

PICTURE: MICHAEL CLAYTON-JONES

