



Female Fertility Preservation – Frequently Asked Questions

1. Can cancer treatments affect my ability to have a child?

Cancer treatments such as chemotherapy, surgery 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.

2. What can I do to preserve my fertility?

There are different ways to preserve fertility such as egg freezing, embryo freezing, ovarian tissue banking and hormonal therapy (i.e. ovarian suppression). Egg freezing is the most common fertility preservation option.

3. What does the egg freezing process involve?

- Upon referral to the MUHC Reproductive Centre, you will meet a fertility specialist and a nurse who will evaluate your ovarian function and discuss your fertility preservation options.
- Then you will undergo a blood test for HIV, hepatitis B & C and syphilis.
- Two to three vaginal ultrasounds will be done to evaluate the number of follicles (fluid-filled sacs that contain immature eggs) in your ovaries.
- At each ultrasound, a blood test will be done to evaluate your hormone levels. It is very likely that you will need to take hormone medication to stimulate your ovaries to produce follicles. In general, hormone medication is taken during a period of 7-10 days and requires that you self-inject the medication.
- Next, your eggs will be collected through a minor surgical procedure. You will receive pain medication and will be awake during this procedure. It is common to experience some pain at this time.
- Lastly, your eggs will be frozen and stored.

4. How is embryo freezing different from egg freezing?

Egg freezing allows you to save your eggs. In future, your frozen eggs can be fertilized through assisted reproduction to conceive a child.

Embryo freezing is a two- step process. First eggs are collected and then they are fertilized with sperm in a laboratory to form an embryo (an early stage of baby's development). Embryos are then frozen and stored.

5. Who legally owns frozen eggs or embryos?

While the ownership of frozen eggs rests with the woman, frozen embryos are the property of both partners and no use can be made of them without the consent of both partners.

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6. I just received a cancer diagnosis and need to start my treatment ASAP. Can I preserve my fertility without delaying my cancer treatment?

In situations where cancer treatment needs to start immediately, fertility specialists will try to retrieve your eggs within a 48-hour window of time.

7. I already started cancer treatments. Is it too late to preserve my fertility?

Research shows that the number and quality of eggs may be compromised after cancer treatments. However, if you have already started treatments, it may still be possible to preserve your fertility.

Your fertility preservation options will depend on your treatment history (e.g. chemotherapy treatment, radiation, etc.) and your current ovarian function.

8. I finished my cancer treatments and wish to conceive. Should I use my frozen eggs or try to conceive naturally?

If your menstrual cycles are back to normal, you can try to conceive naturally. If after one year, no pregnancy occurs, it is recommended that you make an appointment at the fertility clinic to get a complete evaluation of your fertility status and to discuss your fertility preservation options with a fertility specialist.

9. How long should I wait to conceive after my cancer treatments are finished?

Each individual's situation is different. It is therefore recommended to consult your oncologist to determine your individual circumstances (probability that damage to your reproductive system has repaired itself).

10. How long can eggs/embryos stay frozen?

Your eggs/embryos can stay frozen indefinitely.

11. Is there an age limit to conceive using frozen eggs or embryos?

Fertility preservation guidelines recommend that women do not attempt pregnancy past the average age of natural menopause. This is generally interpreted as 50 years of age.

12. How much does it cost to freeze and store eggs/embryos?

Egg or embryo freezing for women diagnosed with cancer is covered under the Quebec Health Insurance Plan (RAMQ) as per bill 20 (chapter 25-34.3).

However, coverage for hormonal medication varies depending on your health care plan. Patients on private insurance are expected to pay the portion of the cost not covered by the insurance. For patients who do not have private insurance, the cost of hormonal medication is covered by the RAMQ with an \$89 deductible.

Storage of eggs or embryos is covered by the RAMQ for the first 5 years and then you are expected to pay an annual storage fee (see <https://muhc.ca/reproductivecentre/page/clone-fees>).

If in future, you decide to use your frozen eggs or embryos to achieve pregnancy then there will be a cost associated with your assisted reproductive options (see <https://muhc.ca/reproductivecentre/page/clone-fees>).

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13. How long do I have to wait for an appointment with a fertility specialist?

At the MUHC Reproductive Centre, patients with cancer are given priority in booking fertility preservation appointments. Every effort is made to schedule your appointment as soon as possible.

14. How do I book an appointment to freeze eggs or embryos?

Ask your oncology provider for a referral or call the MUHC Reproductive Centre at 514-843-1650 (select option 0).

15. Do children born to cancer survivors have a higher risk of getting cancer themselves?

There is currently no evidence that children born to cancer survivors are more likely to develop cancer than children whose parents did not have cancer. The only exception are children born to parents with hereditary cancer syndromes (e.g. inherited retinoblastoma).

16. What would happen to the stored eggs or embryos, if I don't pursue fertility treatment or if I do not make it after the cancer treatment?

At the time of egg or embryo freezing, you will be asked to sign a consent form where you will state your intention regarding the use of your eggs or embryos for the future if you do not use them yourself.

It is also recommended that you make a will or testament. This is a legally binding document which will assure that your frozen eggs or embryos are used according to your wishes.