



Sperm Banking

Teenage and Young Adult Cancer Service



Introduction

This leaflet has been written for young people who are about to start treatment for cancer. Your treatment may involve radiotherapy or chemotherapy. Both of these treatments may affect your fertility (ability to have children).

What treatments will affect my fertility?

Chemotherapy: Most chemotherapy drugs will affect your fertility. They can affect your sperm production. The effect can vary depending on the particular drug used and how much of the drug you receive. For some people, their sperm will return to normal once their treatment finishes. For others, their sperm count may be low, sperm might swim slower than normal or there might not be any sperm at all. There is unfortunately no way for us to know for certain if your sperm will return to normal.

Radiotherapy: Radiotherapy to your pelvis or testicular area can also affect your fertility. The radiotherapy can cause damage to your sperm. Whether your fertility returns to normal after treatment will depend on the amount of radiation your testicles receive.

Your oncologist or nurse specialist will discuss this in more detail with you. They will be happy to answer any questions or concerns you may have.

Fertility preservation

You might not be thinking about having children just now, but you might in the future. If your treatment is likely to affect your fertility, you might want to think about sperm storage. This means collecting, freezing and storing some of your sperm. It can then be used in the future when you are ready to have children.

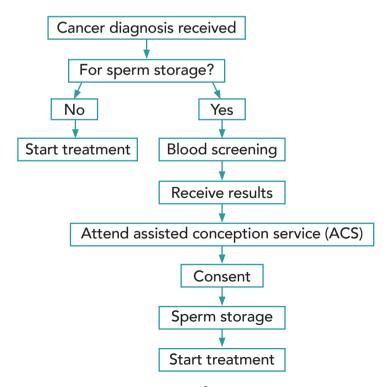
You might feel embarrassed talking about this, but it is important you think about it now. If you decide to go ahead

with sperm storage, it must be done before you start your cancer treatment.

You might be feeling rushed to make a decision about this. Try to take some time to think about your future plans. If you have any questions or want to discuss it more, talk to your oncologist, nurse specialist or family doctor. It might also help to talk to a close family member or friend.

What happens if I decide to go ahead with sperm storage?

If you decide to store your sperm, your oncologist or nurse specialist will arrange the necessary appointments. This will normally happen very quickly. This helps to avoid long delays in starting your cancer treatment. The process might vary slightly from that shown below, depending on where you are having your cancer treatment.



Blood screening

Before your sperm can be stored, a blood sample must be taken. The test screens for hepatitis B, hepatitis C and HIV. The ACS need these results before they can agree to store your sperm. If any of these test results are positive, further support and medical follow up will be available.

Assisted Conception Service (ACS)

If you decide to store your sperm, this will be done at the ACS. We will arrange an appointment for you as soon as possible. At this appointment, staff will discuss sperm storage with you. We will answer any questions you might have. We will check that you fully understand everything before asking you to sign a consent form. This gives permission for your sperm to be stored. If you are in a long term relationship, you can also consent to your sperm being used in your partner's fertility treatment in the future.

Staff will show you to a private room. They will give you a container and ask you to provide a sperm sample. This is done by masturbating to ejaculate. If you are over the age of 18, adult magazines will be available if you want them. You can also bring your own if you prefer. It is illegal for the department to provide anyone under the age of 18 with adult magazines.

We will then transfer your sperm samples into small tubes (straws), labelled with your details. They will be carefully stored in freezing tanks. These tanks are fitted with alarms. In the rare event that there is a problem with the equipment, staff will be alerted immediately.

You will receive a follow up letter which will confirm how many straws with your sperm have been stored.

It is important that you do not have sex, masturbate or ejaculate for 3 days before your appointment for sperm storage. This can affect the amount of sperm produced in the sample.

Is all sperm suitable for storing?

Not all sperm samples will be suitable for freezing. This can be due to several reasons. We will therefore test your sperm sample before storing. We will send you a letter giving you information about the outcome. Your oncologist or nurse specialist can also explain this.

Can I bring someone with me?

You might feel embarrassed going to the clinic. Think about whether you want to go alone or whether you would want someone to go with you. Some people feel awkward and embarrassed having their parents with them. If you have a partner, they can be with you if you would like.

What happens if I am unable to attend the ACS?

If you are physically unable to get to the clinic (because you are in hospital or too ill) we can make special arrangements to get your sample to the ACS. Speak to your oncologist or nurse specialist about this.

How long can my sample be stored?

Your sample can remain in storage for use for up to 55 years. We will contact you at least every 10 years to confirm your wishes regarding your stored sperm.

What happens if I move house or change partner?

It is important to tell the ACS if you change your permanent address or you have a new partner while your sample is stored. This is particularly important if you consented to your partner using your sperm for fertility treatment in the future.

Will I receive regular checks to test my fertility after treatment?

If you wish to check your fertility levels in the future, you can contact your GP, oncologist or nurse specialist. You should wait two years after your treatment has finished before doing this.

Do I need to use contraception?

Although your treatment may affect your fertility, it is unlikely that your ability to have an erection, to ejaculate or orgasm will change. It is best to avoid any chance of your partner becoming pregnant during your treatment and for up to a year after your treatment finishes. It is important to practice safe sex to protect you and your partner from sexually transmitted infections. This means using a condom.

Is everything I discuss confidential?

All of these appointments are confidential. This means the staff will not tell anyone else (not even your parents) what happens at these appointments. They will not share anything you have spoken about or any worries you have. Your test results will be sent to you. With your consent they will also be sent to your oncologist and GP. If your doctor is worried you do not fully understand what is happening, they might encourage you to talk to your parents, another family member or a close friend.

About this information

This guide is provided for information only. It should not replace professional medical advice relevant to your own individual situation.

The information was produced by The Beatson West of Scotland Cancer Centre with contributions from:

- Consultant Clinical Oncologist
- Assisted Conception Service
- Clinical Nurse Specialist Teenagers and Young Adults
- Young people

Every effort has been taken to ensure the information is accurate at the time of publication.

Further information and support

Glasgow Royal Fertility Service
(Assisted Conception Service) & 0141 211 8535

www.nhsggc.scot/hospitals-services-a-to-z/assistedconception-service/

Clinic Area B (ground floor)
Queen Elizabeth Building
Glasgow Royal Infirmary
16 Alexandra Parade
Glasgow
G31 2ER

All our staff are here to make sure your treatment goes as smoothly as possible and will try to help with any questions or problems you may have. There are also voluntary organisations providing information and support. These include:

Macmillan Cancer Support ☎ 0808 808 0000

www.macmillan.org.uk

Providing practical, medical, emotional and financial advice for those affected by cancer.

Macmillan Cancer Support -

Fertility information can be found at

https://www.macmillan.org.uk/cancer-information-andsupport/impacts-of-cancer/fertility

Teenage Cancer Trust

https://teenagecancertrust.org

The Teenage Cancer Trust offers unique care and support, designed for and with young people.

Glossary of term

Chemotherapy:

The use of anti-cancer drugs to destroy cancer cells.

Hepatitis:

Inflammation of the liver.

HIV (Human Immunodeficiency Virus):

The virus that causes AIDS.

Oncologist:

A doctor who specialises in treating cancer.

Radiotherapy:

The use of high energy X-rays or radiation to destroy cancer cells.