



ETHICS INVOLVED ON FERTILITY PRESERVATION FOR PEDIATRIC CANCER PATIENTS

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INTRODUCTION

Improved survival rates of pediatric and adolescent cancers, increased attention on the discussion about future quality of life after treatment. Ethical thinking around fertility preservation procedures for children and young people with cancer is essential at this time. There is an increasingly pressing need to discuss the ethics of failing to preserve fertility, particularly for patient groups for whom established techniques exist. Discussing oncofertility, that is, cancer treatment's possible effects on fertility and fertility preservation (FP) options, is a means to address this concern by informing patients and parents regarding options available to them to prevent future struggles with infertility. This discussion summarizes the attitudes, beliefs, and patterns of behavior of patients, parents, and healthcare providers in oncofertility discussions when child/adolescents are involved.

The literature on adult cancer patients shows that reproductive capacity is a major quality-of-life issue. Patients also have a strong desire to be informed of available FP options with a view to future parenthood of their own genetic child, considering that <10% chose to adopt or used donated gametes. Furthermore, the quality of fertility counseling provided at the time of cancer diagnosis has been identified as a crucial factor in the decision-making process. By contrast, in the pediatric population, while it was shown that parents were able to make an informed and voluntary decision for their prepubertal sons despite the heavy emotional burden at the time of diagnosis, there is so far very limited information on patient expectations regarding FP. A lack of awareness often equates to suboptimal care by oncologists and FP specialists, and poor access to FP.

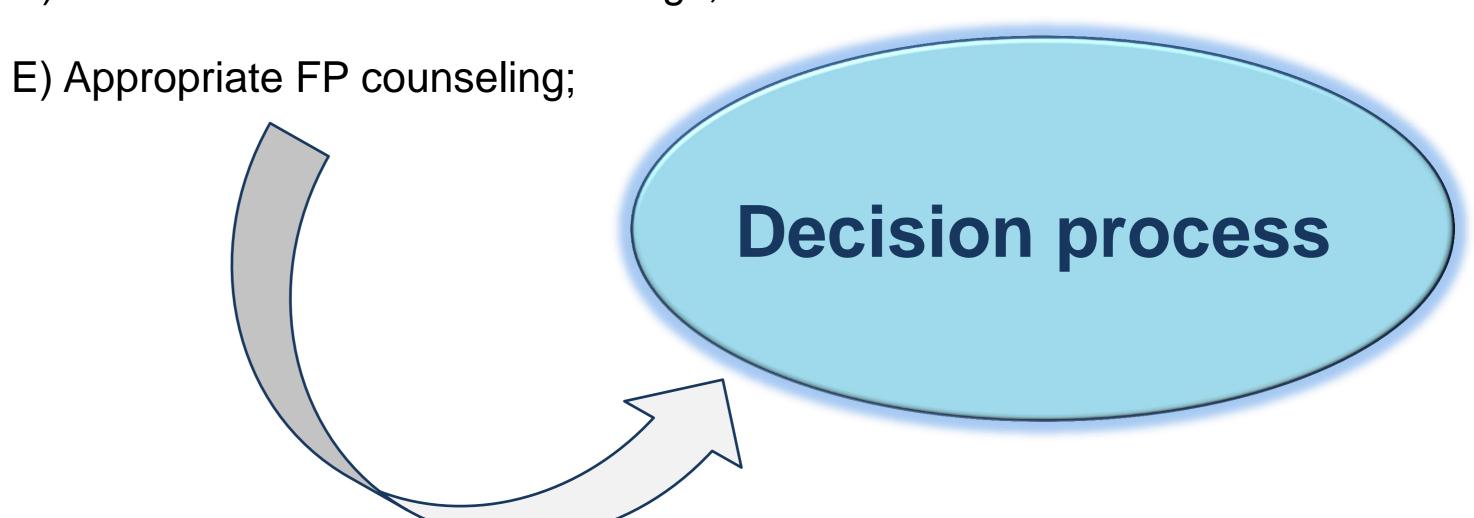
RESULTS AND DISCUSSION

Current scenario

It has been observed that adolescents and parents have similar informational and counseling needs. Both seek to be fully informed about cancer treatment's effects on fertility and FP options. Also, parents and healthcare professionals alike sometimes underestimate the importance of fertility for child and adolescent cancer patients. The universal right to procreation gives support ethical, legal and moral for the discussion about oncofertility.

Important issues

- A) Availability of information;
- B) Available options;
- C) Close contact between oncologist and reproductive medicine expert;
- D) Children and adolescents feelings;



CONCLUSION

The principles of autonomy, beneficence and non-maleficence should chart the course of the chosen strategy with respect and attention, including the views of the child when they are able to understand the circumstances. In order to overcome discussion barriers and meet pediatric patients and their parents' informational needs, it is essential to create and implement practice guidelines, as well as properly educate and train healthcare professionals about oncofertility issues. The content of information given to patients and parents and hope for future parenthood appeared to positively impact on the decision to preserve fertility in the pediatric population and, therefore, deserves special attention to improve FP care.

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