

TC and Infertility

“If the cancer is in my testicles, that means I can’t have kids, right?”

Wrong!

-Infertility is defined as the inability to conceive a baby.

-In men, infertility results from:

- abnormally shaped sperm
- inability to produce a high enough sperm count
- poor sperm motility

-Many men who have testicular cancer fear that they may never be able to have a baby, but that is not the case! Most men who try **DO** go on to father children after treatment (8 out of 10).

-In a small fraction of patients testicular cancer is diagnosed as part of an infertility work up. At the time of diagnosis, sperm counts can be low and improves once the testicle is removed. Some treatment options may increase your risk of infertility, but having TC does not mean you can never father children.

-If you experienced fertility troubles before being diagnosed with testicular cancer, it may be harder to have kids following treatment, but is still possible!

-If you plan to have children, talk to your partner and doctors before beginning treatment. Your doctor may recommend you to a sperm bank if you are concerned about your ability to conceive in the future. There, they will freeze and store your sperm until you are ready for a baby later down the road.

Before you start radiation , chemotherapy or need an Lymph node surgery you should discuss sperm banking with your team. Typically 2 specimens are needed 3 days apart. Special blood tests will be done and then sperm is stored. There is a fee associated with sperm banking and you should check with your insurance about it.

-Retroperitoneal lymph node dissection may cause retrograde ejaculation, which can result infertility. Retrograde ejaculation occurs when nerves are damaged during the surgery and sperm no longer exit through the urethra.

Instead, they travel backwards and end up in the bladder. Nerve-sparing surgery can reduce the risk of retrograde ejaculation from occurring and can preserve fertility. Look for a surgeon with experience performing nerve-sparing surgery.

-Most men diagnosed with TC only have cancer in one testicle. If only one testicle is removed, then the man can still go on to have children naturally. If both testicles are removed, sperm production is permanently damaged and the man then becomes infertile.

-Chemotherapy and radiation can negatively impact sperm production and quantity, but for most men, this is only temporary. Most doctors recommend waiting 12 months following the end of treatment to begin trying to have children in case sperm were damaged during treatment. There is not much research about the effect of damaged sperm, but it is thought to be linked to birth defects so it is best to wait to be sure!

-A family counselor may be helpful to you and your partner to figure out what option is best for you if you decide you want children in the future. The fear of not being able to have children can cause negative emotional and mental side effects, which a counselor could also help you deal with.

Remember, there are options and you should not be afraid to seek help!

Canadian Cancer Society. Supportive care for testicular cancer. (n.d.). Retrieved from <http://www.cancer.ca/en/cancer-information/cancer-type/testicular/supportive-care/?region=on>

Cancer Research UK. Fertility - having children after testicular cancer. (n.d.). Retrieved from <http://www.cancerresearchuk.org/cancer-help/type/testicular-cancer/living/fertility-having-children-after-testicular-cancer>

Fertility Factor. Testicular cancer and infertility. (n.d.). Retrieved from <http://www.fertilityfactor.com/testicular-cancer-infertility.html>

Trimarchi, M. (n.d.). HowStuffWorks "How Sperm Banks Work" Retrieved from <http://health.howstuffworks.com/pregnancy-and-parenting/pregnancy/fertility/sperm-bank.htm>

University of Maryland Medical Center. Infertility in men. (n.d.). Retrieved from <http://umm.edu/health/medical/reports/articles/infertility-in-men>