Continued Access to Fertility Preservation Critical for Adolescent and Young Adult Cancer Patients

Fertility preservation is an essential component of cancer care for patients diagnosed with cancer at reproductive age.

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The Supreme Court of the United States (SCOTUS) ruling in Dobbs vs. Jackson overruled Roe vs. Wade, returning an individual's right to access abortion services to state law. New findings led by researchers at the American Cancer Society (ACS) show more than 32,000 newly diagnosed adolescent and young adult (AYA) cancer patients may lose or face compromised fertility preservation care each year due to legislation that has been enacted or is expected to be enacted in some states. Fertility preservation is an essential component of cancer care for patients diagnosed with cancer at reproductive age. The SCOTUS ruling could potentially interfere with fertility preservation of AYA cancer patients due to new restrictions on genetic testing, storage, and disposal of embryos, including those created in vitro. According to study authors, fertility preservation care will be needed for more than two-thirds of newly diagnosed AYA cancer patients. The research was published September 26 in the journal The Lancet Oncology.

"Accurate information about the adverse consequences of reproductive legislation on access to fertility preservation care for adolescent and young adult patients with cancer needs to be fully understood by policymakers," said Dr. Xuesong Han, scientific director, health services research at the American Cancer Society and senior author of the study. "The data in this study show AYA cancer patients may be deprived of their ability to preserve their fertility before they start their cancer treatments due to new barriers to accessing these critical reproductive services."

From the recent national U.S. population-based cancer registry data, researchers identified individuals aged 15-44 years old newly diagnosed with cancer. Patients requiring fertility preservation as part of cancer care include diagnoses of any lymphoma, leukemia, bones/joints/soft tissue sarcoma, testicular cancer, female breast, ovary, uterine, or cervix cancer; or any regional/distant cancer as they commonly receive chemotherapy, radiation, or other gonadotoxic or sperm and egg destroying treatments. Patients needing fertility care from 22 states where abortion is banned/likely to be banned as of August 6, 2022, were compared with patients from 29 states where abortion remains legal.

According to researchers, among 123,591 newly diagnosed AYA patients in 2018, 85,085 patients (68.8%) would need fertility preservation care, including 32,008 patients from 22 states where abortion restrictions could compromise fertility preservation care. Among these patients, the majority were female (65.1%) and non-Hispanic White (62.7%). Texas (24.4%), Ohio (9.4%), and Georgia (9.1%) are the states with the largest numbers of newly diagnosed AYA cancer patients whose fertility preservation care could be compromised. Compared to patients from 29 states where abortion remains legal, patients from 22 states with abortion restrictions were more likely to be living in non-metropolitan areas (18.9% vs. 8.2%) and the poorest counties (14.6% vs. 8.6%) and diagnosed with ovary, uterine or cervix cancers (14.2% vs. 11.8%).

“These potential fertility preservation restrictions may create barriers for patients and could widen geographical and socioeconomic disparities in the receipt of fertility care,” said Dr. Changchuan Jiang, a third-year medical oncology fellow, department of Medicine, Roswell Park Comprehensive Cancer Center and lead author of the study. “Ongoing monitoring of the health effects of the Supreme Court decision on cancer patients and their families is warranted.”

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