

Fertility Preservation

for Transgender Patients



Fertility Within Reach.
ADVOCATING FOR FERTILITY HEALTH CARE



An Important & Necessary Consideration

Fertility preservation is often the last thing on a person's mind as they navigate the challenges of gender affirmation. Some hormonal therapies and surgical procedures used for gender affirmation can impact fertility or cause permanent sterilization. Advancements in reproductive technology have given transgender and non-binary adolescents hope that their personal reproductive material can be preserved to create a family, if and when they decide they want children. Fertility preservation is a beacon of hope for many patients, allowing them to imagine a future where they do not need to give up the possibility of having a biological child. Studies have shown that most adults who chose gender-affirming treatment in adolescence were not counseled about preserving their fertility during treatment. ***Fertility Within Reach*** aims to support transgender youth and their families through this journey, broaden the options for parenthood, and provide financial support for fertility preservation.

“I’m still a college student, and *Fertility Within Reach* gave me the opportunity to cryobank without breaking the bank. Because of them, my way forward is a lot more certain knowing that my partner and I can still start a biological family in the future.”

H.G.
gender affirming patient

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Fertility Preservation*

WHAT IS FERTILITY PRESERVATION?

Fertility is the ability to conceive or induce conception naturally. Gender affirming hormonal therapies, such as exogenous* hormonal treatments (oral contraceptives), testosterone* therapy, or estrogen* therapy can pause puberty and affect future fertility potential. Gender-affirming surgeries that remove reproductive organs such as hysterectomies, oophorectomies, and orchiectomies can cause permanent sterility.

There are ways to protect fertility through fertility preservation. This rapidly advancing field is a safe and dependable method of extracting and storing a person's reproductive material* (eggs, sperm, or reproductive tissue) until they are ready to access it. Discussions of fertility preservation should begin alongside any discussions of gender affirming treatment. There are several different options available for fertility preservation, and it's important to be aware of all the methods available as you decide if fertility preservation is the right choice for you.

LONG-TERM FERTILITY

If you have already started gender-affirming treatment and wish to preserve your fertility or start a family, you should work with your care team to determine how your fertility was impacted by the treatment you are receiving.

Even if you previously did not choose to preserve your fertility, there may still be options to have biological children. These can include the temporary discontinuation of hormonal treatments for a period of time to allow ovulation or spermatogenesis to resume. Additionally, spermatogenesis or ovulation may be stimulated through the injection of medications like clomiphene citrate or hCG if you have a uterus and ovaries. This process may take three to six months, but it's important to work with your doctor to determine what the best course of action is for you.

*See Glossary on page 14 for definition.



Preservation of Reproductive Material

FOR BODIES WITH PENIS AND TESTICLES...

SPERM BANKING

Sperm banking is the least invasive way of both collecting and preserving reproductive material. A semen sample is collected through self-stimulation, then analyzed for fertility. Samples are immediately cryopreserved and can be frozen indefinitely. Sperm counts are highest prior to beginning hormone therapy. However, if you have already begun hormone therapy it is best to discontinue hormones for 3–6 months, regain fertility, and bank sperm. These frozen samples can be used in the future via intrauterine insemination (IUI) or in vitro fertilization (IVF).

TESTICULAR SPERM EXTRACTION

This is a medical procedure for people with a penis and testicles who are unable to ejaculate and therefore is necessary to extract sperm from the testicle, under general anesthesia. Like sperm banking, samples can be frozen indefinitely and have a high fertility success rate using intrauterine insemination or in-vitro fertilization. As with sperm collected through masturbation, the quality and quantity are highest before beginning, and again the longer you have been off of, hormone therapy.

TESTICULAR TISSUE CRYOPRESERVATION*

In pre-pubertal* people with a penis and testicles, the only option for fertility preservation before initiation of hormonal treatment is testicular tissue cryopreservation. A child with a penis or testicles might never make sperm if they begin hormonal suppression prior to puberty; this option allows for sperm production outside the body. A small portion of the testicle is removed through a surgical biopsy under general anesthesia, then preserved and frozen. There are minimal risks associated with this procedure, including minor pain and swelling.

FOR BODIES WITH A UTERUS AND OVARIES...

OOCYTE* CRYOPRESERVATION

Hormonal injections stimulate the ovaries to increase the number of eggs retrieved while under sedation. This process takes approximately two weeks, and eggs can be frozen and stored. The eggs can be used for future pregnancy in their own uterus, for implantation in a partner with a uterus, or a gestational carrier.

OVARIAN TISSUE CRYOPRESERVATION

This preservation option is available for pre-pubertal and post-pubertal* adolescents. Most success has been demonstrated in post-pubertal adolescents and therefore, ovarian tissue cryopreservation is no longer considered experimental. This process involves the removal, processing and cryopreservation of ovarian tissue. When the patient is ready to expand their family, the ovarian tissue can be thawed and transplanted back onto a remaining ovary, allowing for the oocytes to develop into mature eggs.

EMBRYO CRYOPRESERVATION

This is the same process as oocyte cryopreservation, but the egg is fertilized with sperm before freezing. It is important to note that both oocyte and embryo cryopreservation require a controlled ovarian stimulation which involves medication and repeated assessment by transvaginal ultrasound, which may be uncomfortable or emotionally distressing. There are smaller ultrasounds made for adolescent patients or pelvic ultrasounds in patients who cannot tolerate transvaginal evaluation. The gynecologist will discuss the monitoring and determine the appropriateness of various methods for their patients.

*See Glossary on page 14 for definition.

Treatment & My Fertility

During the gender affirmation consultation with your healthcare provider(s), they will use this space to assess and document your risk of infertility based on the treatment you are to receive. This section provides you with necessary information to make an informed decision related to your fertility preservation options.

PLANNED TREATMENT THAT COULD AFFECT FUTURE FERTILITY

Hormonal therapy:

- Testosterone
- Spironolactone
- Estrogen
- Gonadotropin-Releasing Hormone (Gn-RH) analogs
- Progesterone
- Other _____

Expected method of delivery:

- Orally (pill form)
- Injections
- Topical Applications (cream, gel, patch)
- Implants
- Other _____

Expected dosage: _____ mg

Expected treatment start date: _____

Surgical treatment:

- Hysterectomy
- Mastectomy
- Vaginectomy
- Oophorectomy
- Orchiectomy
- Other _____

RECOMMENDED FERTILITY PRESERVATION OPTIONS

If you have a penis and testicles:

- Sperm Banking
- Testicular Sperm Extraction
- Testicular tissue Cryopreservation

If you have a uterus and ovaries:

- Oocyte Cryopreservation
- Ovarian Tissue Cryopreservation
- Embryo Cryopreservation

I am at risk for infertility due to my treatment.

- Yes No

My risk for infertility is...

- None Minimal Moderate High

I need to use protection to prevent a pregnancy:

- Yes No

NOTES

CONTACT INFORMATION FOR FURTHER QUESTIONS

Healthcare Provider Name: _____

Healthcare Provider Phone: _____

Healthcare Provider Email: _____

Other Team Members:

Name: _____

Role: _____

Email: _____

Phone: _____

Name: _____

Role: _____

Email: _____

Phone: _____

Support Guide

TALKING WITH YOUR LOVED ONES ABOUT FERTILITY PRESERVATION

As a young adult, the idea of talking about family building with your loved ones during the process of gender-affirming surgery or treatment may feel strange or uncomfortable.

Every family is different and there is no one-size-fits-all approach to opening a dialogue. It might be helpful to keep in mind some of the following when initiating these conversations:

- *Take some time to prepare yourself, and perhaps share your ideas and feelings with a trusted friend, family member, partner, social worker, or therapist ahead of time. Choose the right time to initiate a conversation.*
- *Don't rely on a script. Talk as naturally as possible and allow others to ask questions. Be honest - sometimes "I don't know. That's a good question, and we'll find out the answer together" is all you can say.*
- *Center your feelings and emotions. Despite your loved one's preconceived notions of parenthood, you are deserving of respect and understanding.*
- *Remember that this conversation is the first of many, and the key is laying a foundation for open, honest, and constructive dialogue.*
- *Be patient with your loved one's reactions. Your family's journey with understanding how your gender identity fits into traditional ideas of parenthood is a complex process and may require time for adjustment. Perhaps your parents have not yet considered being grandparents, and they may need time to process this notion.*

If you are struggling with how to talk to your loved one(s) about fertility, please reach out to a member of your healthcare team. They would be happy to help guide you through this process.

Adapted from: "Transgender Children & Youth: Understanding the Basics" from the Human Rights Campaign, "Talking to Grandparents and Other Adult Family Members" from the Human Rights Campaign, and "How Do I Tell My Parents?" from FFLAG.

Available Resources

CRISIS RESOURCES

The Trevor Project, thetrevorproject.org

24/7/365 Lifeline at 866-4-U-TREVOR (866-488-7386); TrevorChat for instant messaging; TrevorText for text-based support option; or trevorspace.org for online peer support

The National Suicide Prevention Lifeline at 800-273-TALK (8255)

Suicide and Crisis Lifeline at 988

Trans Lifeline at 877-565-8860

ADVOCACY GROUPS

National Center for Transgender Equality, transequality.org

Massachusetts Transgender Political Coalition, masstpc.org

Trans Women of Color Collective, twocc.us

Black Trans Advocacy, blacktrans.org

Trans Latina Coalition, translatinacoalition.org

SPART*A, spartapride.org

HRC's Parents for Transgender Equality National Council, hrc.org

Trans Families, transfamilies.org

LEGAL SERVICES

Sylvia Rivera Law Project, srlp.org

Transgender Legal Defense and Education Fund, transgenderlegal.org

Transgender Law Center, transgenderlawcenter.org

FAMILY AND TRANS YOUTH SUPPORT

Gender Spectrum, genderspectrum.org

Gender Diversity, genderdiversity.org

Trans Youth Equality Foundation, www.transyouthequality.org

TransTech Social Enterprises, transtechsocial.org

TransAthlete.com, transathlete.com

TransLife Center at Chicago House, chicagohouse.org

Glossary

Estrogen or Progesterone: Hormones found in *all* bodies, associated with the development of female primary and secondary sex characteristics

Exogenous Hormone: A hormone not produced by one's own endocrine system

Cryopreservation: Freezing biological material at cryogenic temperatures

Fertility Preservation: The process of saving or protecting eggs, sperm, embryos, or reproductive tissue so that a person can use them to have biological children in the future

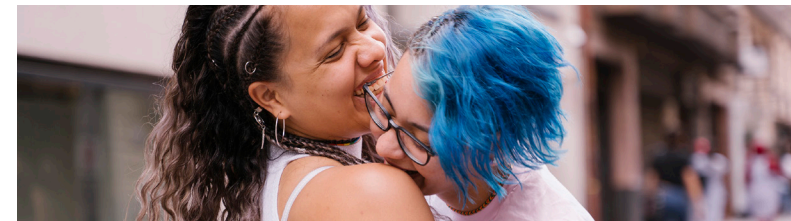
Oocyte: A cell in the ovary that develops into an egg

Pre-pubertal: Before puberty

Post-pubertal: After puberty

Reproductive Tissue/Reproductive Material: Cells that are important in the human reproductive system; Examples: sperm, egg, testicular tissue, oocyte

Testosterone: A hormone found in *all* bodies, associated with the development of male primary and secondary sex characteristics.



“ I am so beyond happy I did this. Fertility preservation gave me hope of a future and kept me going during treatment.”

K.R.
fertility preservation patient

How *Banking on the Future* Can Help

WHAT IS *BANKING ON THE FUTURE*?

Fertility Within Reach is a national non-profit dedicated to helping individuals increase access to fertility treatment and preservation, as well as fertility insurance benefits. Our goal is to remove costs as a barrier in someone's ability to start a family.

For young adults going through gender-affirming treatment, insurance plans rarely cover fertility preservation. As a result, it is not accessible for many families. **Banking on the Future** is a grant program* established to help cover the costs associated with fertility preservation and cryogenic storage prior to treatment. Through the grant, one year of reproductive material storage is covered, as well as cryobank administration, consultation fees, sperm collection, and freezing. Fertility medications will also be available at reduced rates.

The grant is available to adolescent transgender patients through the age of 24. For subsequent years of storage, deeply discounted rates have been negotiated for grant recipients until age 26.

Fertility Within Reach has partnered with cryobanks, fertility clinics, and across the country in order to provide these grants and discounted rates. A copy of the grant application is available on the Fertility Within Reach website, in English and Spanish.

*Grant availability is dependent on program funding.



FINANCIAL SUPPORT FOR PRESERVATION & MEDICATION*

FERTILITY PRESERVATION

Banking on the Future, fertilitywithinreach.org/fertility-preservation

MEDICATION

Walgreens/AllianceRx Walgreens, <https://www.walgreens.com/topic/pharmacy/specialty-pharmacy/fertility-preservation.jsp>

Compassionate Care, fertilitysavings.com

Heart Beat, ferringfertility.com/patient-resources

ReUnite Assist, reuniterx.com/discount-programs

Village Fertility Pharmacy, vfppharmacygroup.com/pricing-and-financing/

*Refer to websites for full eligibility requirements, including age limitations.



“**Fertility Within Reach** helped me access resources and helped with costs. This program took a burden off my shoulders, and I am forever grateful.”

Kailyn Ruiz
fertility preservation patient

Cryobanks & Clinics

The following cryobanks and fertility clinics participate in our **Banking on the Future** grant program. The grant is available to adolescent transgender patients through the age of 24. For subsequent years of storage, deeply discounted rates have been negotiated for grant recipients until age 26.

LEGACY

Nationwide At-Home Service

617-514-0901

Locations: Nationwide (at-home service)

Type of Reproductive Cell/Tissue

Storage: sperm

Collection Methods: mail-in kit

Discounted Subsequent Year Costs:
\$115/year for sperm

ARIZONA ANDROLOGY LABORATORY & CRYOBANK Arizona

520-855-2689

850 North Kolb Road, Tucson, AZ 85710

Locations: Tucson, AZ

Type of Reproductive Cell/Tissue

Storage: sperm

Collection Methods: drop off

Discounted Subsequent Year Costs:
\$200/year for sperm

FAIRFAX CRYOBANK

Virginia, Texas, Pennsylvania,
Minnesota, California, Florida

800-338-8407

3015 Williams Drive, Ste. 110,
Fairfax, VA 22031

Locations: Fairfax, VA; Austin, TX;
Houston, TX; Philadelphia, PA; Roseville,
MN; Pasadena, CA; Miami, FL

Type of Reproductive Cell/Tissue

Storage: sperm

Collection Methods: in-house, mail-in kit

Discounted Subsequent Year Costs:
\$200/year for sperm

NOTES

Infectious Disease Testing: For all participating cryobank options, patients have 30 days, from day of collection, to present infectious disease testing results to the cryobank. Without results, patients could face a fee for lack of infectious disease testing.

Additional Sperm Collection:

A maximum of \$100 per additional deposit is owed to the cryobank at the time of the initial collection.

Visit fertilitywithinreach.org for more information.

Pharmacies

The following pharmacies participate in our **Banking on the Future** grant program by providing discounted fertility medication.

ALLIANCERX WALGREENS PHARMACY

United States & Puerto Rico

800-424-9002

7003 Presidents Drive, Suite 260
Orlando, FL 32809

Locations: Ship to All 50 States &
Puerto Rico

Discounted Costs: Programs and options
discounting select fertility preservation
medications

VFP PHARMACY GROUP Arizona, California, Illinois, Massachusetts

877-334-1610

335 Bear Hill Road
Waltham, MA 02451

Locations: Ship to All 50 States

Discounted Costs: 10% medication
discount

WALGREENS

California, Florida, Georgia, Illinois,
Minnesota, Missouri, Nebraska, New
Jersey, New York, Texas

800-424-9002

Locations: Palo Alto, CA; South Miami,
FL; Margate, FL; Sandy Springs, GA; Chi-
cago, IL; Canton, MI; Edina, MN; Creve
Coeur, MO; Omaha, NE; Pittsburgh, PA;
Summit, NJ; New York, NY; Frisco, TX;
Houston, TX

Discounted Costs: Programs and options
discounting select fertility preservation
medications

Acknowledgments

WISDOM FROM INDUSTRY LEADERS & PATIENTS

Content within this guide is an evidence-based collaborative effort of many incredible organizations dedicated to supporting children and their families. This tool provides credible information by utilizing the knowledge and guidance of medical doctors, social workers, health communication professionals, as well as testimony from policymakers and patients. We are grateful for the contribution of these industry leaders and patients.

JOY BADER

ReproTech

STEPHANIE BRILL

Gender Spectrum

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Mother of a Former Patient

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Texas Children's Hospital

HEATHER SONI, APRN,

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Texas Children's Hospital

KAILYN RUIZ

Former Patient

STELLE SCOTT

Former Patient

DR. NATHANAEL STANLEY, PH.D.

Moffitt Cancer Center

LEA WILCOX

ReproTech

MATTHEW ZACHARY

Founder, Stupid Cancer

& OffScrip Media

“My biggest reservation over exploring my gender experience was always about fertility. *Fertility Within Reach* helped where seemingly no one else would, banking my opportunity to have biological children in the future.”

Stelle Scott
gender affirming patient

Written by Quinn Kilmartin, Former Project Manager for *Fertility Within Reach*.



Fertility Within Reach is a national non-profit dedicated to helping individuals increase access to fertility treatment and preservation. Cost or access to fertility preservation should not be a barrier in someone's ability to start a family when they choose.



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www.fertilitywithinreach.org

