September 1, 2023

Notice for Parents and Guardians of Children Receiving Chemotherapy or Radiation Therapy

Risk of Impaired Fertility from Chemotherapy and Radiation Therapy Treatment

As required by Texas Health and Safety Code, Section 161.681, this notice informs parents or legal guardians of pediatric cancer patients of the risk of impaired fertility from chemotherapy and radiation therapy treatment. Before treatment begins, the healthcare facility where your child will begin receiving chemotherapy or radiation must notify you of the risk of impaired fertility from treatment.

How can chemotherapy and radiation therapy affect my child’s fertility?

The effects of cancer therapy on reproductive function depend on many factors, including the child’s age at the time of treatment, the specific type and location of the cancer and the treatments a child needs for their cancer.

Cancer treatments such as chemotherapy and radiation therapy can affect your child’s reproductive organs and their ability to have biological children.

Chemotherapy: Some types of chemotherapy can increase the risk of impaired fertility for your child. Some chemotherapy drugs can have long-term effects on reproductive organs and affect fertility. Talk to your child’s doctor or health care provider to learn more about the chemotherapy treatments that will be used and the risk of impaired fertility for your child.

Radiation therapy: Radiation therapy can also impact fertility. Impacts to fertility will depend on the location of the radiation therapy, the total dose of radiation given, and the age of the person at the time of therapy. Talk to your child’s doctor or health care provider to learn more about the radiation therapy that will be used and the risk of impaired fertility for your child.

Talk with your child’s doctor or health care provider about the risk of impaired fertility with the specific treatment/s they will get for their cancer.

Consider asking the following questions:
• How can treatment affect my child’s development during puberty and their fertility? Will these effects be short-term or long-term?

• Are there ways to prevent infertility? If so, what fertility preservation options are available for my child? Who can I talk with to learn more? Can fertility preservation interfere with how well my child’s treatment will work? Are there any resources available to assist with the cost of fertility preservation treatments for my child if it is not covered by insurance?

• Can treatment affect my child’s ability to carry a pregnancy to full term? What problems might my child have during labor and delivery? Could treatment affect my child’s biological children?

• How will we know if my child’s fertility has been permanently affected from treatment? If my child is infertile, what other options does my child have for having a family?

For more information on the effects of cancer treatment and the reproductive health of your child, visit www.childrensoncologygroup.org/lateeffectsoftreatment.

References:

