

Preserving Fertility in Gynecological Cancer: Challenges and Advances in Oncofertility

Katherine Franchi*

Department of Gynecologic Oncology, Université Libre de Bruxelles, Brussels, Belgium

*Corresponding author: Katherine Franchi, Department of Gynecologic Oncology, Université Libre de Bruxelles, Brussels, Belgium; E-mail: franchikath@gmail.com

Received date: July 30, 2024, Manuscript No. IPIJCR-24-19444; **Editor assigned date:** August 01, 2024, PreQC No. IPIJCR-24-19444 (PQ); **Reviewed date:** August 15, 2024, QC No. IPIJCR-24-19444; **Revised date:** January 07, 2025, Manuscript No. IPIJCR-24-19444 (R); **Published date:** January 21, 2025, 2024, DOI: 10.36648/IPIJCR.9.1.001

Citation: Franchi K (2025) Preserving Fertility in Gynecological Cancer: Challenges and Advances in Oncofertility. Int J Case Rep Vol:9 No:1

Introduction

Even though older women are more likely to be diagnosed with gynecological cancer, many women will still be diagnosed with some kind of gynecologic cancer while they are still in their reproductive years. Women under the age of 45 are involved in over 10% of newly diagnosed ovarian cancers and over a third of newly diagnosed cervical cancers. This, in addition to the rising number of women having their first child after the age of 35, has resulted in a worryingly high number of complex fertility issues among cancer patients. The number of gynecological robotic-assisted surgeries has increased since their introduction. In order to avoid fertility disorders, gynecological surgeries that preserve fertility require precise management.

Description

Robotic-assisted surgeries

In order to highlight the role that robotic assisted fertility sparing surgery plays in preserving fertility in gynecologic cancers, we conducted a narrative review. According to our knowledge, there is still a lack of well-reported data on the effects and efficacy of Controlled Ovarian Stimulation (COS) in this group of patients. The aforementioned trend may be explained by concerns regarding the impact of stimulation on cancer progression and recurrence as well as the risk of disease transmission during egg collection. An anonymous survey was conducted on the practices, attitudes, access to reproductive endocrinologists and knowledge of FP services of full-member Society of Gynecologic Oncology (SGO) members. The survey consisted of a brief online survey that asked about basic demographics, FP practice patterns, access to and utilization of Reproductive Endocrinology (RE) services and five scenario-based questions to find out how well people knew about fertility sparing treatment. Gynecologic cancers affect a significant number of reproductive-age women who wish to preserve fertility for a future chance of childbearing. In modern societies, an increasing number of women are delaying childbearing beyond the age of 35.

Gynecological cancers

As a result, providing women with gynecologic cancer with treatment options for fertility preservation has emerged as an essential component of cancer survivorship care. Assisted reproductive technologies that can be used to preserve reproductive potential in women with cervical, endometrial and ovarian cancer were the topics of discussion in this review article, as well as the most recent findings regarding fertility-preserving surgical approaches. There is also a brief section on fertility preservation in pediatric gynecologic cancers. Young women, who may not have had children by the time they are diagnosed with gynecological cancer, account for approximately 20% of cases, especially when the age at first pregnancy rises. Traditionally, treatment of gynecological cancer has resulted in diminished fertility. In spite of the fact that eradicating the disease remains the primary objective of cancer management, efforts to reduce morbidity, enhance quality of life and preserve fertility have shifted toward less drastic approaches. In many situations, fertility-sparing surgery is appropriate. Cautious examination, directing and adjusted direction are expected for ladies to figure out the full ramifications of their decisions. Women ought to be aware that definitive treatment is typically provided after the family is finished. The number of Reproductive-Aged (RA) cancer survivors has increased as cancer treatment advances and many of these survivors have questions and concerns regarding fertility and family planning. The American Culture of Clinical Oncology (ASCO) suggests that suppliers examine the gamble of malignant growth related fruitlessness and allude patients who are keen on ripeness conservation (FP) to regenerative experts right off the bat over treatment arranging [1]. Although fertility counseling is recommended by practice guidelines, little is known about how effective these discussions are. Moreover, the sort of data gave to patients isn't all around portrayed and reference rates to conceptive endocrinologist stay low. Propels in imaging innovation and examination have worked on the capacity to make significant differentiations in gynecologic imaging. Radiologists have the opportunity to influence the outcomes of young women with cancer by contributing valuable information to interdisciplinary treatment planning in gynecologic oncology and by understanding the oncologic context and eligibility criteria for fertility-sparing approaches. Gynecologic

malignancies represent 1,09 million new disease cases overall comprising of around 12% of cancers influencing female populace.

Conclusion

Approximately 10% of female cancer survivors are under the age of 40. One of the most important goals of gynecologic oncology is the development of strategies for fertility

preservation because most cancers that affect female genital organs are treated with radical surgery, chemotherapy or chemoradiation, all of which cause permanent damage to reproductive functions. In this scenario, the newly defined field of oncofertility is getting more and more attention because it gives patients the best chance possible to make a good decision about their oncologic diagnosis and prognosis and future fertility.