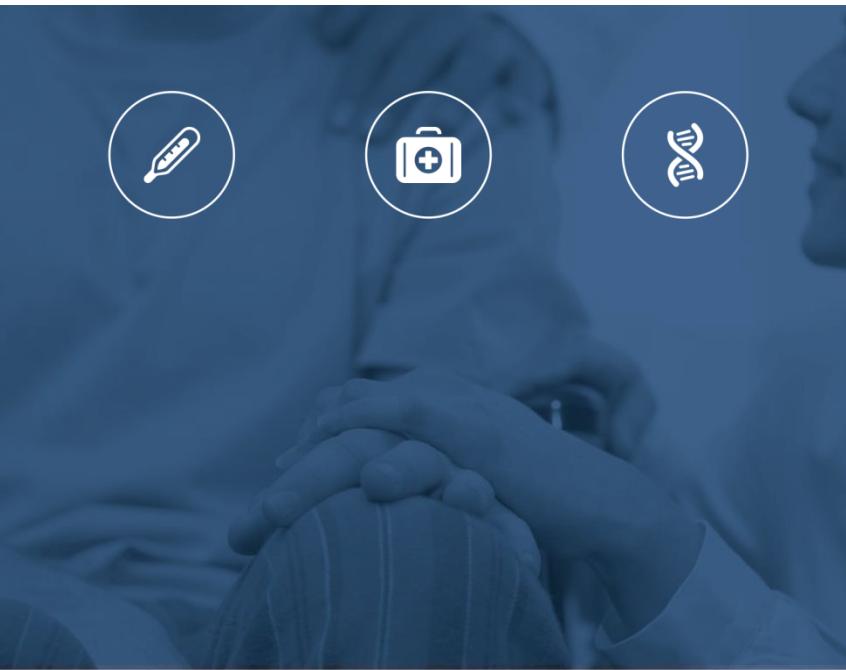


# Information on Fertility Preservation Treatment

for those wanting to become pregnant in the future

ASAN MEDICAL CENTER  
PATIENT FAMILY EDUCATION GUIDE

ASAN Medical Center | Gynecology |  
Fertility Preservation Clinic



## Fertility Preservation Clinic

### AMC Fertility Preservation Clinic

provides counseling sessions and fertility preservation treatments customized to each patient's conditions so that men and women wanting to become pregnant in the future can preserve their reproductive capabilities and plan for future pregnancies.

Pregnancy may be difficult in patients who develop reproductive dysfunctions from treatment including ① chemotherapy of malignant or blood cancers, or ② surgery for endometriosis or bilateral ovarian tumors. In men, sperm production is impaired, and in women, ovarian function is reduced. Also, early menopause can occur, which can significantly reduce the chances of becoming pregnant (fertility).

Patients wanting to become pregnant after receiving cancer treatments or ovarian surgery should consider optimal options to preserve fertility at the time of diagnosis. It becomes indispensable, then, for specialists in gynecology and reproductive medicine to closely cooperate with the medical team in charge of the patient.

The fertility preservation treatment is available not only for patients receiving cancer treatments but also for

- ① those who have a high probability of early menopause (due to family history, turner syndrome, etc.), and
- ② healthy men and women who are over 35 years old and have plans to postpone pregnancy.

The cryopreservation period is typically five years and can be extended through your consent.

## Getting Advice

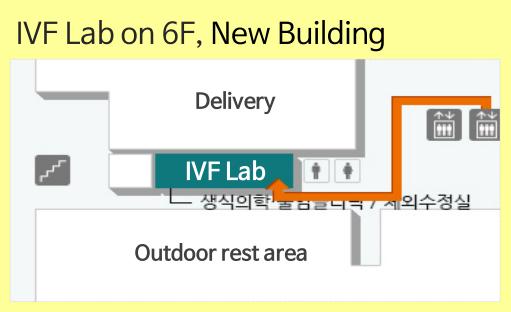
01  When and how do I seek advice?

- ① If you are diagnosed with a malignant tumor, a blood cancer, etc. and are expecting chemotherapy.
- ② If you are expecting surgery for endometriosis or bilateral ovarian tumors.
- ③ If you are over 35 years old or have no plans to get married.
- ④ If you have a high probability of premature menopause (family history, Turner syndrome, etc.)
  - Outpatient counseling at the Fertility Preservation Clinic
  - Referred from other medical departments



02  Where do I go for advice?

IVF Lab on 6F, New Building





- Rep Phone: +82-2-3010-8000
- Fertility Preservation Clinic : +82-2-3010-5051

## Fertility Preservation Treatment (non-surgical)

### 01 Sperm Cryopreservation (Male)

Sperm cryopreservation is done with a simple technique without the need for invasive procedures. To improve the quality of sperm that is preserved, it is necessary to abstain for 2-3 days before sperm collection. Large amounts of sperm are better for future use. Therefore, the collection may be needed 5-20 times, depending on the sperms' condition. The end time will vary depending on the individual. If cancer treatment is planned within a short period, sperm collection and cryopreservation is recommended even if it is only for 1-2 times.

### 02 Embryo Cryopreservation (Married Couple)



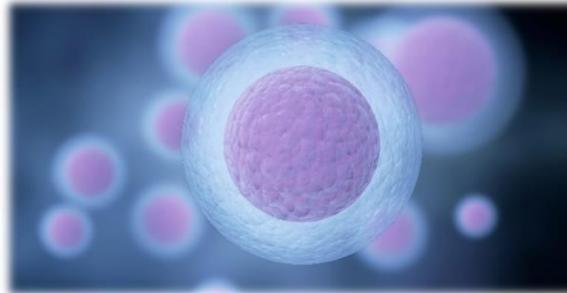
Embryo cryopreservation is a method in which a fertilized embryo is frozen. Superovulation is induced by administering a follicle-stimulating hormone.

Afterward, the ovum is collected in vitro and fertilized by the spouse's sperm.

The method is clinically proven to be the most effective in fertility preservation. It is completed in infertile couples in the same way the remaining embryos from IVF are preserved and has a high pregnancy success rate. Typically, the follicle-stimulating hormone is injected within five days of the menstruation cycle. However, if the need for chemotherapy or surgery is urgent, superovulation can begin immediately regardless of the patient's menstrual cycle.

## Fertility Preservation Treatment (non-surgical)

### 03 Ovum Cryopreservation (Female)



Ovum cryopreservation is a non-surgical method used in unmarried women to preserve fertility. As in embryo cryopreservation, a follicular stimulating hormone that induces superovulation is administered for two weeks before the beginning of chemotherapy. Afterward, the ovum is collected and frozen. If the need for chemotherapy or surgery is urgent, superovulation can begin immediately regardless of the patient's menstrual cycle. The time it takes for ovum collection is around two weeks.

### 04 Ovarian Protectant

A gonadotropin-releasing hormone agonist (GnRH agonist) is an ovarian protectant that is expected to protect ovaries from damage during cancer treatment. While cryopreservation is the first option used in fertility preservation treatment, ovarian protectants can be considered as an alternative if the prior method is not possible. Ovarian protective drugs are administered every four weeks starting one week before the initiation of chemotherapy.



Scan the QR code for relevant website.

## Fertility Preservation Treatment (Surgical)

### 05 Ovarian Tissue Cryopreservation (Female)

Ovarian tissue cryopreservation is a surgical method in which ovarian tissue is collected before cancer treatment or surgery. The tissue is frozen and implanted back into the abdominal cavity after the treatment is completed. The method can be performed on preadolescent patients if freezing of the embryo or ovum is not possible, and the likelihood of early menopause caused by chemotherapy is high. However, this option is still in an experimental phase because there have not been many reports on successful delivery using this method.

### 06 Ovarian Transposition

Ovarian transposition is a surgical procedure that moves the ovaries outside the scope of radiation. This procedure is used on patients with cervical or colorectal cancer whose treatment involves pelvic radiation therapy. Precise and meticulous surgery is required for safe fertility preservation.

## ASAN Medical Center's Fertility Preservation Clinic

Asan Medical Center's Fertility Preservation Clinic helps patients with reduced fertility build a happy family by preserving fertility after chemotherapy, radiotherapy, surgical treatment, and aging.



We understand your concern about your future treatments. However, if you spare just 2~3 weeks on fertility preservation, you can receive treatment for the causal disease and simultaneously prepare for your future pregnancy.