



Study: Transgender youths can freeze semen to preserve fertility

by Melissa Jenco, News Content Editor

Transgender adolescents and young adults hoping to preserve their fertility may be able to freeze their semen, even after starting hormone therapy.

Researchers studied the medical records of 10 transgender patients with an average age of 19.5 years. The patients were assigned male at birth but identified as female.

Eight of the patients provided semen for cryopreservation before starting therapy to suppress puberty or affirm their preferred gender. Their semen showed low morphology but otherwise were normal, according to "Fertility Preservation Outcomes in Adolescent and Young Adult Feminizing Transgender Patients" (Barnard EP, et al. *Pediatrics*. Aug. 5, 2019, <https://doi.org/10.1542/peds.2018-3943>).

Two patients already had started gender dysphoria therapy. One had been treated with leuprolide acetate for six months. The patient had only two motile sperm three months after stopping the therapy, but at the five-month mark, semen analysis was normal except for low morphology.

"Semen cryopreservation is a feasible method of fertility preservation in AYA (adolescent and young adult) feminizing transgender patients," authors concluded.

The other patient who already had started therapy had been taking the androgen-lowering medication spironolactone along with estradiol for just over two years and had no motile sperm four months after stopping the therapy. No additional testing could be performed as the patient had surgery for testicle removal.

Authors called for more study on how long medications would have to be discontinued in order to resume sperm production.

"This information is critical to address as part of a multidisciplinary fertility discussion with youth and their guardians so that an informed decision can be made regarding fertility preservation use," they wrote.

Jason R. Rafferty, M.D., M.P.H., Ed.M., FAAP, who authored the AAP's 2018 [policy](#) on caring for transgender youths, wrote a [commentary](#) on the new study in which he noted barriers to fertility preservation. Not all such patients are counseled on their options, some can't predict whether they will want biological children and for some, fertility preservation is too expensive.

"Overall, there is a clinical and ethical imperative to better understand and provide access to fertility services for (these patients)," he wrote. "Barnard, et al. pave the way, but more research is critical to characterize the potential for and limitations for fertility preservation."

Resources

- [AAP policy "Ensuring Comprehensive Care and Support for Transgender and Gender-Diverse Children and Adolescents"](#)
- [AAP Section on Lesbian, Gay, Bisexual and Transgender Health and Wellness](#)
- [Information for parents on transgender children](#)