

# Effects of chemotherapy upon female fertility

<b>Submission date</b> 08/09/2010	<b>Recruitment status</b> No longer recruiting	<input type="checkbox"/> Prospectively registered <input type="checkbox"/> Protocol
<b>Registration date</b> 06/12/2010	<b>Overall study status</b> Completed	<input type="checkbox"/> Statistical analysis plan <input type="checkbox"/> Results
<b>Last Edited</b> 30/09/2015	<b>Condition category</b> Cancer	<input type="checkbox"/> Individual participant data <input type="checkbox"/> Record updated in last year

## Plain English Summary

### Background and study aims

Chemotherapy is a type of cancer treatment that can also lead to fertility problems in women of reproductive age. The effects of different types of chemotherapy on fertility are still unknown, and depend on the type of chemotherapy, dosage, duration and the patient's age. Recent studies have found that anti-mullerian hormone (AMH) is a valuable marker of fertility. The aim of this study is to find out about the risks to fertility of chemotherapy drugs and the accuracy of AMH in predicting women's fertility following chemotherapy.

### Who can participate?

Women aged 18 - 43 who have been newly diagnosed with cancer (e.g., breast cancer or lymphoma).

### What does the study involve?

Blood tests are used to assess AMH levels in cancer patients before chemotherapy and at follow up 6, 9 months and 1 year later, compared with healthy volunteers without known fertility problems of the same age. We hope to follow up patients for at least 5 years to assess their fertility following chemotherapy. A medical questionnaire is completed by all participants, giving their views on the information they received during the study.

### What are the possible benefits and risks of participating?

Participants may not directly benefit from taking part in the study, but the results could help with decision-making regarding fertility treatment in the future. Risks of participation include the risks of blood tests.

### Where is the study run from?

Warwick University (UK).

### When is the study starting and how long is it expected to run for?

May 2010 to November 2011.

### Who is funding the study?

Midland Fertility Services Ltd (UK).

Who is the main contact?  
Dr Karolina Palinska-Rudzka  
K.E.Palinska-Rudzka@warwick.ac.uk

## Contact information

**Type(s)**  
Scientific

**Contact name**  
Dr Karolina Palinska-Rudzka

**Contact details**  
Centre House  
Court Parade Aldridge  
Walsall  
United Kingdom  
WS9 8LT  
-  
K.E.Palinska-Rudzka@warwick.ac.uk

## Additional identifiers

**EudraCT/CTIS number**

**IRAS number**

**ClinicalTrials.gov number**

**Secondary identifying numbers**  
8445

## Study information

**Scientific Title**  
Effects of chemotherapy upon fertility amongst women of reproductive age, using anti-mullerian hormone (AMH) as a marker of ovarian reserve

**Study hypothesis**  
Accurate assessment of reproductive function in women following cancer treatment is increasingly important due to improvements in survival rates and development of new methods of fertility preservation.

Advance counselling regarding chemotherapy's potential to affect future plans for children, premature menopause and offering options for fertility preservation should be a vital, integrated part of care for young women.

Chemotherapy may lead to subfertility and loss of sex hormone production. The effects of different types of chemotherapy on ovarian reserve amongst women of reproductive age are

still unknown. Chemotherapy-induced follicle loss is also dependent on the type of chemotherapy, its dosage, duration and age of patient.

Recent studies show that anti-mullerian hormone (AMH) is a valuable marker of ovarian reserve. It is independent of the menstrual cycle and can be accurate and diagnostic even amongst women without regular cycles.

We propose a prospective study to evaluate the risks to fertility of chemotherapeutic regimes and the accuracy of AMH in predicting women's potential reproductive capacity following chemotherapy. The results would be crucial in informing decision-makers and stakeholders regarding fertility treatment prognosis.

Using a prospective cohort design allows us to assess the effect of chemotherapy agents. Although the assays and analysis of AMH will be performed over a shorter period, we hope to followup patients for at least 5 years to begin to assess their post-chemotherapy fertility. We will recruit 50 to 100 reproductive age women newly diagnosed with cancers, needing chemotherapy within the Cancer Network in West Midlands.

Serum AMH will be measured in patients before commencing chemotherapy and with follow up at 6, 9 months and 1 year compared with an age-matched control group without known fertility problems. 5 year follow-up will be performed. The sponsor of the study is Warwick University, a funder is MFS.

On 30/09/2015 the overall trial end date was changed from 26/11/2011 to 01/12/2016.

### **Ethics approval required**

Old ethics approval format

### **Ethics approval(s)**

Coventry and Warwickshire REC, November 2009, ref: 09/H1211/87

### **Study design**

Multicentre observational cohort study

### **Primary study design**

Observational

### **Secondary study design**

Cohort study

### **Study setting(s)**

Hospital

### **Study type(s)**

Treatment

### **Participant information sheet**

Not available in web format, please use the contact details below to request a patient information sheet

### **Condition**

Topic: National Cancer Research Network, Reproductive Health; Subtopic: All Cancers/Misc Sites;  
Disease: Miscellaneous

### **Interventions**

1. Medical questionnaire, including questions regarding menstrual cycles, past medical history, desire to have children etc.
2. Venepuncture: serum AMH will be measured in patients before commencing chemotherapy and with follow up at 6, 9 months and 1 year compared with an age-matched control group

Study entry: other; patients are recruited at oncology/haematology clinics, or by contacting Midland Fertility Services.

### **Intervention Type**

Other

### **Phase**

Not Applicable

### **Primary outcome measure**

To assess the impact of different types, doses and duration of chemotherapy on ovarian reserve using AMH, measured at 6, 9, 12 and 60 months

### **Secondary outcome measures**

To assess the accuracy of serum AMH testing in predicting future reproductive capacity, measured at 60 months

### **Overall study start date**

26/05/2010

### **Overall study end date**

01/12/2016

## **Eligibility**

### **Participant inclusion criteria**

1. Women aged 18 - 43 years
2. Newly diagnosed cancer - mainly with breast cancer and lymphoma

### **Participant type(s)**

Patient

### **Age group**

Adult

### **Lower age limit**

18 Years

### **Sex**

Female

## **Target number of participants**

Planned sample size: 100; UK sample size: 100

## **Participant exclusion criteria**

1. A history of previous exposure to gonadotoxic agents and/or radiotherapy
2. Diagnosed with end stage cancer having a very poor prognosis (less than 10% chances of 1 year survival)
3. Significant ovarian pathology or previous bilateral oophrectomy

## **Recruitment start date**

26/05/2010

## **Recruitment end date**

26/11/2011

## **Locations**

### **Countries of recruitment**

England

United Kingdom

### **Study participating centre**

#### **Centre House**

Walsall

United Kingdom

WS9 8LT

## **Sponsor information**

### **Organisation**

University of Warwick (UK)

### **Sponsor details**

c/o Geraldine Hartshorne

Clinical Sciences Research Institute

Warwick Medical School

Coventry

England

United Kingdom

CV2 2DX

### **Sponsor type**

University/education

**Website**

<http://www2.warwick.ac.uk/fac/med/research/csri/rh/genesis/>

**ROR**

<https://ror.org/01a77tt86>

## Funder(s)

**Funder type**

Research organisation

**Funder Name**

Midland Fertility Services Ltd (UK)

## Results and Publications

**Publication and dissemination plan**

To be confirmed at a later date

**Intention to publish date**

01/01/2017

**Individual participant data (IPD) sharing plan****IPD sharing plan summary**

Not provided at time of registration

**Study outputs**

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
<a href="#">HRA research summary</a>			28/06/2023	No	No