Preserving your fertility

There are many different ways to build a family. Many trans and gender diverse people are interested in keeping, or preserving, their fertility (fur-TILL-uh-tee). This is the ability to have biological children.

This handout tells you how gender affirming hormone medications can affect your fertility. We will call them ‘hormone medications’ in the rest of this handout.

Other ways to build your family

There are other ways to build your family besides having biological children. These include:

- Adopting a child
- Finding a partner who already has children
- Choosing to be a parent with someone who is not your romantic partner. This might be a friend, relative or someone else. It is called “intentional co-parenting.”

Talk with us to learn more about these options.

How can my hormone medications affect my fertility?

Puberty blockers

Taking puberty blockers alone should not affect your ability to have a baby in the future. But if you also take estrogen or testosterone, this can affect it.

Testosterone

If your body has ovaries that produce eggs, taking testosterone can affect the ability to produce them. If you stop taking testosterone, your body usually starts producing eggs again. You may also start having periods again. But testosterone is not an effective birth control method. You can still get pregnant while you are taking it.

Estrogen

If your body has testicles that produce sperm, taking estrogen can affect this. It can change your body’s ability to produce testosterone, sperm or both. This can happen shortly after you start taking estrogen or it can happen later.
If you would like to freeze some sperm to use later, we recommend doing it before taking puberty blockers or estrogen.

**What else can affect my fertility?**

Other factors that can affect your fertility include:

- Your age
- Your diet and nutrition
- Your weight
- Alcohol and other drugs
- Sexually transmitted infections, or STIs
- Earlier problems with your reproductive system

**Freezing your sperm**

If your body produces sperm, you may want to freeze some to use later. You can produce a sperm sample and have it frozen. Or you can have it taken out of your testicles. If you choose to have your testicles removed later, during gender affirming surgery, your doctor may try to remove some sperm then.

You may have heard about freezing tissue from your testicles in order to have children later. But this is still experimental. If you are interested in freezing sperm, you can talk with a doctor in our Urology department about your options.

**Freezing your eggs**

If your body produces eggs, you may want to freeze some to use later. This might be just the eggs, or eggs fertilized with sperm from your partner or a donor. Fertilized eggs have sperm put in them before freezing. A sperm donor is someone who volunteers to give their sperm to a sperm bank. Or they might give it directly to someone they know.

To freeze your eggs, you need to:

- Have had at least one monthly period (menstrual period)
- Take medications to help your body make a lot of eggs
- Have a procedure to remove eggs from your ovaries. The ovaries are the small organs in your belly that hold your eggs.

You may have heard about having some tissue from your ovaries frozen to have children later. But this is still experimental. If you are interested in freezing eggs, you can talk with a doctor in the OHSU Fertility Clinic about your options.

**Having biological children as a gender diverse or trans person**

The OHSU Doernbecher Gender Clinic is here to help you make decisions that meet your own goals. We understand those goals might change with time. For example, you might think about your options for having children before you start taking hormone medications. Or you might not think about children until later. Here are some things to consider.

- If you take hormone medications, you need to stop them before you freeze eggs or sperm or try to get pregnant.
Everyone's body takes a different length of time to be ready to have children after taking hormones.

It is possible for hormone medications to permanently change your ability to have children.

Doctors do not yet know exactly how hormone medications affect your ability to get pregnant, make sperm or carry a child. They are also not certain how these medications affect an unborn child.

You may want to use frozen eggs, sperm, or both.

You may want to have someone else carry the baby (be pregnant) for you. This person is called a surrogate.

**Options if you have a uterus**

Here are your options for having a baby if you have a uterus. The uterus is the organ that holds a baby before birth.

- A doctor can put sperm from your partner or a donor into your uterus.
- A doctor can put sperm into your partner or surrogate’s uterus.
  
  The medical term for putting sperm in the uterus to create a baby is “intrauterine insemination.” Say “in-truh-YOU-tur-in in-sem-uh-NAY-shun”. You might also hear it called IUI (eye-you-eye).

- A doctor can put sperm into eggs outside the body. Then they can put them in your uterus or your partner or surrogate’s uterus. The medical term for this is in vitro fertilization. You might also hear it called IVF- (eye-vee-eff).

**Options if your body makes sperm**

- A doctor can put your sperm or a donor’s sperm into your partner’s uterus. The uterus is the organ that holds a child before it is born. The sperm can come from you or a donor (a volunteer who gives it).

- The doctor can put the sperm in your surrogate’s uterus.
  
  The medical term for putting sperm in the uterus to create a child is “intrauterine insemination.” Say “in-truh-YOU-tur-in in-sem-uh-NAY-shun”. You might also hear it called IUI (eye-you-eye).

- A doctor can put your sperm or a donor’s sperm into eggs outside the body. Then they can put the fertilized eggs into your partner or surrogate’s uterus.

  The medical term for putting fertilized eggs in the uterus is in vitro fertilization. You might also hear it called IVF (eye-vee-eff).

You may have heard about having a uterus transplanted into your body. Doctors cannot do this now. But it might be an option in the future.

**How much do these options cost?**

Here are some of the costs for procedures to have children.

- Donor sperm: $500 for a vial (small bottle)
- Sperm banking and FDA testing: $1000
- Intrauterine insemination (IUI): $400
- In vitro fertilization: $15,000 for each cycle (time it is done)
- IVF with a donated egg (not your own): $25,000
- Freezing eggs for later use: $10,000
- Using a surrogate: $50,000-$100,000
Is financial help available?

OHSU offers programs to help you pay for these procedures over time. Most insurance companies do not pay for these procedures, called fertility treatments.

Get more information

The OHSU Transgender Health Program has free classes on your options for having children. Please visit www.ohsu.edu/transhealth to see the schedule and sign up.

You can find a guide to building your family as a trans or gender diverse person at Path2Parenthood.

If you have questions

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<tr>
<th>If you need to do this ...</th>
<th>Please contact</th>
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<tbody>
<tr>
<td>Make an appointment, ask a medical question, get a referral to another clinic or specialist or get a medication refill</td>
<td>Call 503-418-5710 or contact us through MyChart</td>
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<tr>
<td>Contact our psychologist</td>
<td>Call 503-494-6337 or contact them through MyChart</td>
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<tr>
<td>Get a referral to a community organization or support group</td>
<td>Call 503-494-7970 or contact us through MyChart</td>
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<tr>
<td>Contact our social worker</td>
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