Physicians’ practice behaviour regarding fertility-related discussions in paediatric oncology

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Conclusion
A majority of physicians in paediatric oncology in Sweden discuss treatment impact on fertility with their patients and/or parents. Lack of discussions is associated with physicians’ perceiving that the subject could worry patients and parents.

Structured communication training is recommended to physicians to increase fertility-related discussions in paediatric oncology.

What is known already?
Cancer treatment may have a negative impact on fertility. Physicians have a responsibility to provide information about the potential risk of infertility. However, both young adults treated for cancer in childhood and parents of children who have undergone treatment for cancer commonly report that they do not recall having discussed the issue.

Research question
The aim of this study was to investigate practice behaviours of Swedish physicians with regard to discussing the impact of cancer treatment on fertility with paediatric oncology patients and their parents, and to identify factors associated with such discussions.

Methods
A cross-sectional survey study was conducted targeting all physicians in Sweden working in paediatric oncology.

Participants responded to a questionnaire measuring practice behaviour, attitudes, barriers, and confidence in knowledge. Multivariable logistic regression was used to determine factors associated with seldom discussing fertility.

Results
In total, 58 physicians participated in the study. More than half of the physicians reported that they routinely talked with their patients/parents about the treatment’s potential impact on fertility (male patients: 62%; female patients: 57%) (Table).

Factors associated with less frequently discussing fertility with patients/parents were working at a non-university hospital (male patients: OR 11.49, CI 1.98-66.67; female patients: OR 33.18, CI 4.06-271.07), concerns that the topic would cause worry (male patients: OR 8.23, CI 1.48-45.89; female patients: OR 12.38, CI 1.90-80.70), and perceiving the parents as anxious (male patients: OR 7.18, CI 1.20-42.85; female patients: OR 11.65, CI 1.32-103.17).

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