Fertility Preservation

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Reproductive Biotechnology Research Center
Monoclonal Antibody Research Center
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Tehran
2010
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Interventional Counseling for Fertility Preservation Clients

Abstract:
Introduction: Diagnosis of cancer greatly impacts all areas of one’s life. This event brings fear, stress, anxiety and questioning. Saving life is a major concern; however, returning to normal life after therapy is another important issue. The purpose of this article is to focus on the influence counseling can have on the emotional aspects of the cancer survivor’s lifestyle. Unfortunately, Cancer therapy has a negative effect on one’s fertility by destroying the testicular or ovarian tissue. However, saving one’s life is the paramount goal of the patient and his family members regardless of whether or not it leads to sterility. Based on the international conference Population and Development which was held in Cairo, Egypt, 1994, reproductive well-being is the right of all men and women alike. It is now possible to preserve fertility either before or after the patient receives treatment. This Fertility preservation includes a wide range of ages before reproductive age and in reproductive age. Making the decision in regards to one’s fertility is very critical. Counseling as a profession is relatively new and includes different techniques and procedures. A good counselor can interact with these patients in order to help them make a decision and help them to formulate new ways of feeling and thinking in regard their fertility issues, including: stress, emotion and anxiety, as well as, coping with the reality that they will not be able to conceive naturally. The appropriate counseling techniques help to enable the patient’s internal resources and external support systems in order to help him make the most appropriate decision. Cancer patients experience many fluctuating emotions after medical treatment. The goal of affective counseling with such patients is to help them become aware of the many fertility interventional techniques that are available to him. During the counseling process, a safe and supportive environment is maintained for the patient while information about the different choices available to the patient is introduced along with the alternatives in a complete and systematic way.

Methods: Descriptive, library research. Results: Rational Emotive Therapy (REBT) is the chosen counseling theory to use when working with this population. REBT is based on the assumption that negative emotions within the patient are manifested as a result of illogical or irrational thinking. As a result of the counselor building a safe and supportive environment for the patient, along with introducing the needed information in regards to fertility preservation in a complete and systematic manner, the patient’s illogical and/or irrational thinking will be significantly reduced. This, in turn, enables the patient to make the most appropriate choice in regards to the preservation of his fertility.

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