

# **A COMPREHENSIVE ANALYSIS OF FERTILITY PRESERVATION AND ART CONTENT ON PEDIATRIC TRANSGENDER AND GENDER-EXPANSIVE CLINIC WEBSITES: IS MORE ACCESS AND AWARENESS NEEDED?**

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## **Background**

Many transgender and gender-expansive children and adolescents seek out clinical care for gender affirming surgical and medical treatment that can negatively impact fertility. ASRM recommends that fertility preservation counseling should be offered prior to gender transitions. While many children may not be considering family planning yet, some individuals and parents may be interested in options for fertility preservation and assisted reproductive technology (ART) that allow for genetically related children in the future. Unfortunately, there is limited awareness and access to information on the fertility impacts of gender affirming treatment, as well as potential fertility preservation and ART options available.

## **Objective**

The goal of our study was to determine if clinics for transgender and gender-expansive children and adolescents have content on fertility preservation and family building options on their websites.

## **Materials and Methods**

A list of comprehensive clinical care programs for transgender and gender-expansive children and adolescents was identified on the Human Rights Campaign (HRC) website. The websites for each clinic were reviewed and data regarding fertility information and services were collected from September 2022 through November 2022. Website content was compared across geographic regions within the United States. Analyses were completed using chi-square tests for independence with  $p < 0.05$  considered statistically significant.

## **Results**

65 pediatric and adolescent LGBTQ+ clinics were listed on the HRC website. 19 (29%) of these clinics had information regarding fertility on their website. Of these 19 clinics, 9 (47%) had an OBGYN physician listed as part of the clinic team and 2 (11%) had an REI physician listed. Of the 8 (12%) clinics that provided information on fertility effects of hormone replacement therapy, the majority (88%) of included detailed information via a linked PDF. Of the 7 (11%) clinics that provided information on fertility preservation options on their website, the majority (86%) provided detailed content also via a linked PDF. Regarding providing fertility preservation counseling, 8 (12%) clinics stated they provided counseling at their clinic, while 7 (11%) stated they provided referrals to an REI practice. When comparing clinics by geographic region, those that provided information on fertility effects of hormone replacement therapy ( $p = 0.009$ ) and fertility preservation ( $p = 0.03$ ) were more likely to be located in the West in comparison to other regions. The majority of clinics with fertility information were located in Democratic states (95%,  $p=0.004$ ).

## **Conclusions**

The quantity, quality, and access to fertility information on pediatric transgender and gender-expansive clinic websites has room for improvement. Given the potential impact of gender affirming care on fertility, there should be increased awareness of and access to fertility preservation options available early on to this patient population. REI physicians should consider becoming more involved with pediatric LGBTQ+ clinics to provide more comprehensive clinical care to transgender and gender-expansive children and adolescents.

## **Support**

None

## **References:**

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