

Fertility Services for Non-Binary & Gender-Diverse Patients



We support non-binary, gender-diverse and trans patients to keep their fertility options open and plan the families that they want, when they choose.

Having a family may not be front of mind if you are undergoing gender re-affirming treatment and are already facing the emotional, social, medical, surgical and legal steps ahead. However, it's worth taking a moment to consider whether you may want the possibility of having a biological child in the future. We recommend seeking advice on your options from a Fertility Specialist before you start any medical intervention.

Flinders Fertility strongly supports rainbow families, and we are happy to help families make choices that suit their needs.

Services that Flinders Fertility offers

For those assigned male at birth:

→ Sperm Freezing

Sperm freezing (also known as cryopreservation) allows sperm to be stored for an almost indefinite period. This allows a trans woman with a female partner a chance to have biological children in the future using their own sperm to fertilise their partner's eggs. Sperm collection is usually done at our clinic at Glenelg.

We recommend that sperm freezing is done before taking gender affirming hormone therapy (GAHT) as this has been shown to significantly lower total sperm count and increase sperm abnormalities making it less likely that they will be viable.¹

For those assigned female at birth

→ Egg Freezing

As a trans man, freezing eggs may be a consideration if you'd like to keep the door open to having a biological child later.

Egg freezing should preferably be done before commencing gender affirming hormone therapy (Testosterone or "T"). It is sometimes possible to undergo a stimulated cycle to retrieve eggs later, but this entails a suspension of gender affirming hormone therapy for an extended period and may be a confronting and difficult process.

If you decide to freeze your eggs, you'll need to take a course of hormonal ovarian stimulation medication to produce ovarian follicular growth, and then undergo an egg collection procedure. The eggs are then frozen and stored for later use.



Partner/Reciprocal IVF

If you are a non-binary, or a trans man who has a partner who was assigned female at birth, it may be possible to have a family using your eggs and donor sperm if they are able to carry the pregnancy.

Partner IVF involves undergoing an IVF cycle where your oocytes (eggs) are collected, fertilised with donor sperm, and the resulting embryo is then frozen. Your partner can then undertake a subsequent frozen embryo transfer cycle. Requests for partner IVF are common, and many couples prefer it as they are both involved in creating their family.

If you are considering reciprocal IVF, there are some important factors to consider:

- The risk of pregnancy complications, including pre-eclampsia and miscarriage, is higher than in pregnancy involving embryos created from the gestational carrier's own eggs.
- Clinics are obliged to retain details for the SA Donor Register. On a practical note, this means that there are more forms to fill.
- The process may also involve more tests and costs than standard IVF using your own eggs.

If you are considering partner IVF, we recommend discussing this with your doctor at your first appointment so that they can arrange tests as early as possible to establish your suitability for this program, and to reduce the likelihood of delays whilst additional tests are ordered.

Embryo Freezing and IVF

Embryo freezing may also be an option for gender diverse individuals. It is often pursued by couples who wish to preserve their fertility options before medical transition has started. Embryo freezing happens after IVF, a process where sperm are used to fertilise eggs in a laboratory. The resulting embryos are frozen and stored for future use.

It is important to understand that the embryos created are owned by both of you and that one cannot use them without the other's express wishes, so we advise you to both have counselling and legal advice if you are considering this option.

'Seahorse' pregnancy

This is still quite rare as many trans men find it hard to reconcile carrying a pregnancy with their affirmed gender, but it is possible to stop taking testosterone and become pregnant through partner or donor sperm. Colloquially known as 'seahorse' pregnancies they are sometimes the only way for some couples to have a baby. We recognise how hard it can be to carry an unconventional pregnancy and treat you with care and respect throughout.

Support for your emotional wellbeing

We recognise the greater challenges and obstacles involved in creating a family as a LGBTIQA+ couple or individual. These challenges go well beyond the physical and biological barriers, so in addition to fertility preservation options we also provide counselling free of charge with our ANZICA qualified fertility counsellors.

Costs

Treatment costs vary depending on your specific needs and we provide a detailed, customised plan for all patients. Up to date prices can be found on our website.

Next steps

We encourage gender-diverse individuals to seek advice from a Flinders Fertility doctor before medical transition begins, to discuss all available fertility preservation options. We provide an inclusive, safe and nondiscriminatory environment to assist you before, during, and after your medical transition. Please ask your GP for a referral.

¹Sperm quality in transgender women before or after gender affirming hormone therapy-A prospective cohort study Kenny A Rodriguez-Wallberg, Jakob Häljestig, Stefan Arver, Anna L V Johansson, Frida E Lundberg (Andrology Nov 2021)

→ Please send all referrals via HealthLink to FLINDFRT or enquire@flindersfertility.com.au or fax 08 8155 5330

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