Ann & Robert H. Lurie Children's Hospital of Chicago<sup>®</sup>

**M Northwestern** Medicine<sup>®</sup> Feinberg School of Medicine

#### **Establishing an Institutional Gonadal Tissue Cryopreservation Protocol for Patients with Differences of Sex Development**

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### Disclosures

• All authors have nothing to disclose.



#### Background

- Advances in fertility preservation (FP) for oncology patients have paved the way for patients with other fertility-threatening diagnoses
- Patients with certain differences of sex development (DSD) diagnoses may have biological fertility
  –E.g, androgen insensitivity, 45X, 46XY





### Background

#### **Experimental GTC: Oncology vs. DSD**

	Oncology	DSD		
<b>Current Cancer?</b>	Yes	Future risk of malignancy		
Gonads	Normal	Abnormal		
Time from Diagnosis to Treatment	Days	Months to Years		
Outcome	Reported live births	No reported live births		

- Patients with DSD desire experimental GTC
- Oncology protocols
  - Ovarian tissue: 5 patients
  - Testicular tissue: 2 patients





# Describe development of IRB-approved GTC protocol for patients with DSD

### → disseminate the workflow beyond our institution



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![](_page_5_Picture_0.jpeg)

## **IRB Approval Process**

- Extensive collaboration
- Education
- Addressing main IRB concern
  - Inclusion criteria: planned gonadectomies performed for malignancy risk
- Half of gonad sent to pathology, half temporarily cryopreserved

![](_page_6_Picture_0.jpeg)

### **Preoperative Counseling**

![](_page_6_Figure_2.jpeg)

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![](_page_7_Picture_0.jpeg)

#### **Postoperative Pathology Pathway**

![](_page_7_Figure_2.jpeg)

Findings documented: presence of germ cells? malignancy?

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![](_page_8_Picture_0.jpeg)

### **Postoperative Pathology Discussion**

![](_page_8_Figure_2.jpeg)

**Tissue disposition documented by FP Provider** 

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![](_page_9_Picture_0.jpeg)

### Patients Enrolled 2018-2019

Patient	Diagnosis	Germ Cells	Neoplasia	Storage
1	Mixed Gonadal Dysgenesis	Yes	No	Yes
2	<b>Ovotesticular DSD</b>	Yes	No	Yes
3	Mixed Gonadal Dysgenesis	Yes	No	Yes
4	Turner Mosaicism	No	No	No
5	Swyer Syndrome	No	No	No
6	<b>Complete Androgen Insensitivity</b>	Yes	No	Yes
7	Partial Gonadal Dysgenesis	No	No	No

![](_page_10_Picture_0.jpeg)

# **Conclusions: GTC for DSD Protocol**

#### GTC at gonadectomy is technically feasible

- No additional surgical morbidity
- Adequate tissue for anatomic pathological analysis to rule out malignancy

#### Protocol – a template for other institutions

- Multidisciplinary team approach
- Bisected gonad for pathological analysis
- Documentation of tissue disposition before long-term storage

#### Future research topics

- Determination of patient candidacy
- Quality of germ cells
- Optimal timing of GTC

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