

# From Cure to Conception: The Role of Fertility-Preserving Surgery in a Tertiary Care Oncological Centre in Khyber Pakhtunkhwa

M. Imran<sup>1</sup>, S. Khan<sup>1</sup>, S. Ghazala<sup>1</sup>, T. Ayaz<sup>1</sup>, A. Mehmood<sup>1</sup>, F. Shah<sup>1</sup>, I. Islam<sup>1</sup>

<sup>1</sup>Shaukat Khanum Memorial Cancer Hospital and Research Centre, Radiation Oncology, Peshawar, Pakistan.



## Introduction

- Fertility-preserving surgery (FPS) has emerged as a viable option for selected women with early-stage gynecologic malignancies, allowing for oncologic safety while maintaining reproductive potential.
- FPS provides a crucial balance between potential curative treatment and reproductive capacity, addressing both patients' medical needs and family planning goals.
- For young patients, loss of reproductive ability in light of radical treatment of oncological disease can be devastating.
- Data from low- and middle-income countries, particularly Pakistan, remain scarce, and awareness, access, and acceptance of fertility-preserving options are still evolving.

## Objective

- To evaluate the oncologic and reproductive outcomes of fertility-preserving surgery in patients with early-stage gynecologic cancers treated at a tertiary care cancer centre in Khyber Pakhtunkhwa (KP).

## Methodology

- Study Design: Retrospective cohort study
- Study Period: January 2023 – December 2024
- Setting: Shaukat Khanum Memorial Cancer Hospital and Research Centre, Peshawar
- Inclusion Criteria:
  - Women aged  $\leq 45$  years

- Diagnosed with:
  - Early-stage ovarian cancer
  - Early-stage endometrial cancer
  - Early-stage cervical cancer
  - Borderline ovarian tumors

### Data Collected:

- Demographics
- Tumor histology
- Surgical details
- Adjuvant therapy
- Recurrence
- Survival

### Reproductive Outcomes Assessed:

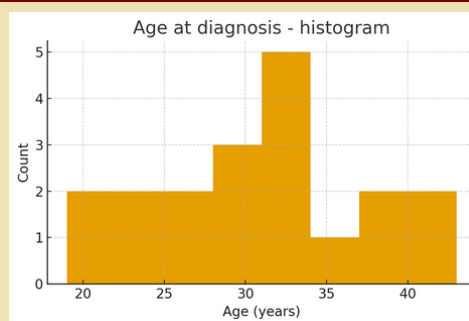
- Postoperative conception attempts
- Pregnancy rates
- Live births

## Analysis

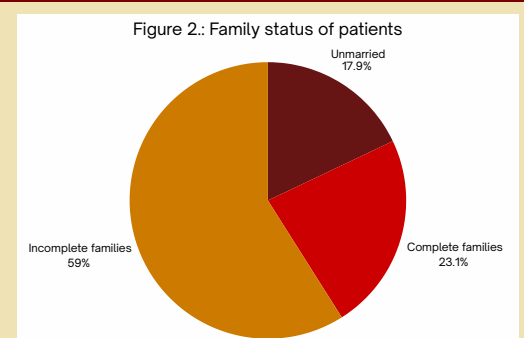
- Sample size: 39 patients.
- Age at diagnosis:
- Mean 30.16 years, SD 6.65, range 19–43.
- Mean Hospital Stay
- 3.05 days

The most common diagnosis was endometrioid ovarian carcinoma, followed by borderline ovarian tumors, specifically mucinous then serous.

2 metastatic cases were noted intraoperatively.



- 7 patients were unmarried, 9 had complete families, and 23 were trying to conceive.
- 2 patients were undergoing IVF treatments.



- Among patients attempting conception post-surgery, 7% achieved pregnancy, with 0 resulting in live births currently.

- The pregnancies were spontaneous, with no need for required assisted reproductive techniques. No significant compromise in oncologic outcomes was observed in women who conceived.
- One death was noted amongst our sample.

## Conclusion

- Fertility-preserving surgery in carefully selected patients with early-stage gynecologic malignancies is both safe and feasible in a tertiary cancer center setting in KP.
- Our findings highlight the importance of integrating reproductive counseling into oncologic care and provide a foundation for establishing

- fertility-preservation protocols in resource limited regions

