

## JOURNALIST FACTSHEET

### FERTILITY

#### **Fertility in men with CF**

Although men who have CF can enjoy a normal sex life, they are almost always infertile due to an abnormality/absence of the vas deferens (the tube which carries sperm from the testis to the penis). The tubes are effectively blocked or absent altogether. Sperms are produced however, and it is possible to aspirate sperm from the epididymis, which sits on top of the testicle, and use this for in vitro fertilization. This technique has a success rate of 30-50%.

#### **Fertility of women with CF**

The onset of periods is often delayed in girls with CF by one or two years, a reflection of disease severity and especially poor weight. Although most girls eventually have normal menstrual cycles there is a higher incidence of missed or irregular periods and amenorrhoea, more likely in those with a reduced percentage of body fat. Problems in this area should be explored at regular intervals as part of the routine CF review. Women with CF are likely to have thicker cervical mucus than normal. This may make conception more difficult because it is harder for the sperm to move through this mucus, but is certainly not impossible. A woman with CF who is thinking of becoming pregnant should consult her CF team first and pregnancy needs close supervision as it may have significant consequences on the health of the mother.

#### **Genetics**

If you are a carrier of CF you will have no symptoms of CF yourself.

If both parents are carriers, a child has:

- a one in four chance of being born with CF
- a two in four chance of being a carrier but not having the disease
- a one in four chance of being completely free of CF – not having the condition nor being a carrier of the faulty CF gene.

If you have CF and are thinking of having a baby your partner will need to be screened to see if they are a carrier.

If one parent has CF and the other parent is not a carrier the child will be a carrier only.

If one parent has CF and the other parent is a carrier the child has a 50% chance of having CF, and if not will be a carrier

If both parents have CF your child will have CF – although it is very rare that two people with CF would choose to have a child together

In some cases antenatal or pre-implantation screening can be offered to prevent a baby being born with CF.

## **ENDS**

### **For all media enquiries, please contact:**

Gemma Foy on 0208 290 7912 or email [gfoy@cftrust.org.uk](mailto:gfoy@cftrust.org.uk)

- The Cystic Fibrosis Trust is the UK's only national charity dealing with all aspects of Cystic Fibrosis (CF). It funds research to treat and cure CF and aims to ensure appropriate clinical care and support for people with Cystic Fibrosis.
- Cystic Fibrosis (CF) is one of the UK's most common life-threatening inherited diseases. Cystic Fibrosis is caused by a single defective gene. As a result, the internal organs, especially the lungs and digestive system, become clogged with thick sticky mucus resulting in chronic infections and inflammation in the lungs and difficulty digesting food.
- Each week five babies are born with Cystic Fibrosis and three young people die – 90% from lung damage. Around half of the CF population can expect to live over 38 years, although improvements in treatments mean a baby born today is expected to live even longer.

- Further information can be found on our website [www.cftrust.org.uk](http://www.cftrust.org.uk). Help and advice for those affected by Cystic Fibrosis is available through our Helpline on 0300 373 1000. For further information, media should contact Gemma Foy on 0208 290 7912 or email [gfoy@cftrust.org.uk](mailto:gfoy@cftrust.org.uk)

**see off cf**

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*Patron: HRH Princess Alexandra, the Hon. Lady Ogilvy, KG, GCVO President: Duncan Bluck CBE*  
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