MULTICENTER CASE SERIES OF TRANSGENDER MEN WITH FERTILITY BENEFITS: ACCESS TO CARE AND NAVIGATING OBSTACLES

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OBJECTIVE:

Although many transgender men seek fertility care, critical knowledge gaps regarding assisted reproductive technology (ART) after testosterone therapy and continue to limit effective counseling. Current data are limited to single institution studies. We used fertility benefits claim data to identify a multicenter cohort of transgender men with inclusive fertility benefits who presented for fertility care and assessed their treatment progression and ART outcomes.

MATERIALS AND METHODS:

We performed an IRB-approved, multi-center, retrospective case series of transgender men within a single provider of employee sponsored fertility benefits. Study subjects were identified by benefit claims from December 2017 to April 2022. Clinical information and cycle outcomes were provided by subjects’ individual clinics.

RESULTS:

A total of 17 transgender patients were identified who utilized fertility benefits at one of 14 clinics. The majority, 15 (88.2%) pursued fertility treatment. A total of 7 (41.2%) underwent oocyte cryopreservation (OC), 6 (35.3%) underwent in vitro fertilization (IVF), and 2 (11.8%) underwent intrauterine insemination. Of the remaining, 1 presented for consultation only, and the other utilized oocyte storage. Of those that underwent IVF, 4 pursued freeze-all cycles, and 2 pursued transfer-- 1 frozen and 1 fresh. Clinical information and cycle outcomes were available for 5 OC/IVF patients (Table 1). One patient (Table 1, Case 5) underwent IVF with PGT-A demonstrating a fertilization rate of 75% (n=6/8), and 4 blastocysts, 2 of which were euploid.

CONCLUSIONS:
In this case series of transmasculine patients with fertility benefits, a majority pursued treatment after initial consultation. This case series adds to the increasing body of knowledge on health access disparities for transgender men and suggests reassuring ART outcomes in patients with fertility benefits.

**IMPACT STATEMENT:**

Pervasive economic and health disparities exist for gender minority patients; however, inclusive fertility benefits may reduce barriers to access to care. Given the sparse data on ART for transgender men, case series remain important for counseling patients regarding expectation for outcomes. Fertility benefit claims may represent a path for identifying larger cohorts of sexual and gender minority subjects for multicenter studies.

**REFERENCES:**

N/A