



A division of Oregon Reproductive Medicine



## PREIMPLANTATION GENETIC DIAGNOSIS FOR HEREDITARY CANCER—FOR PROVIDERS

Patients choose to do preimplantation genetic diagnosis (PGD) with in vitro fertilization (IVF) to dramatically lower the chance of having a child with a certain genetic or chromosomal condition. Studies have shown that PGD can provide optimism and peace of mind during pregnancy and after birth.

For more information: ormgenomics.com hello@ormgenomics.com

## WHY DISCUSS PGD WITH YOUR PATIENTS?

- » Access to genetic counseling and testing for hereditary cancer has grown exponentially; however, many patients of reproductive age are still not advised of the availability of PGD.
- » Studies show that the vast majority of patients believe information about PGD should be routinely provided with genetic test results and would prefer to receive PGD information from a provider they trust, such as their oncologist, OB-GYN or cancer genetic counselor.
- » A significant portion of individuals with hereditary cancer syndromes indicate that they would be interested in using PGD when starting or growing their families.
- » Individuals with hereditary cancer syndromes are typically at a high risk (50 percent) of passing on the condition, and they have a strong desire to preclude their children from living under the threat of cancer.
- » While prenatal diagnosis may be available, PGD provides information and reassurance prior to pregnancy, reducing emotional and physical distress.
- » Many myths about PGD persist despite its availability for most inherited cancer syndromes, low risks, high pregnancy rates and high accuracy.
- » Many individuals with a hereditary cancer syndrome may also benefit from an assessment by a reproductive endocrinologist for fertility preservation or options postcancer treatment.

**Preimplantation genetic diagnosis (PGD)** involves using in vitro fertilization to create embryos, which can then be tested for a familial genetic condition, such as a hereditary cancer syndrome. Embryos that test negative with PGD are preferentially transferred into the uterus, significantly reducing the chance that the child will be affected by the genetic condition.

Generally, PGD can be offered for any hereditary cancer syndrome if the genetic mutation(s) in the family is known. PGD has been successfully performed for many hereditary cancer syndromes, including the following:

- » Hereditary breast and ovarian cancer (BRCA 1 & 2)
- » Lynch syndrome (hereditary nonpolyposis colon cancer)
- » Familial adenomatous polyposis
- » Hereditary diffuse gastric cancer
- » Li-Fraumeni syndrome
- » Multiple endocrine neoplasia
- » Von Hippel-Lindau
- » Retinoblastoma

In order to assist healthcare providers and provide patients with reliable information about PGD, we have created:

- » An online PGD webinar
- » A PGD patient guide

ORM Genomics has four board-certified genetic counselors who are available for patients and healthcare providers who would like more information about PGD. To access these resources and learn more about our services and our team, visit ormgenomics.com.

**ABOUT ORM** Oregon Reproductive Medicine (ORM) is a world-class fertility center that is passionately committed to helping people grow their families. ORM is dedicated to achieving the highest pregnancy success rates while providing a customized, compassionate patient experience. Unrivaled expertise, outstanding results and personalized care make ORM highly sought after around the world. ORM has the largest in-house genomics program of any fertility center in the U.S., with four board-certified genetic counselors dedicated to supporting our PGD patients.

To speak to an ORM Genetic Counselor, refer a patient or request additional resources:

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