

# Feedback form

Please provide your contact details below.

Name:	John France, PhD, DSc, FAACB
If this feedback is on behalf of an organisation, please name the organisation:	
Please provide a brief description of the organisation if applicable:	
Address/email:	19A Frater Ave, Milford, Auckland 0620
Interest in this topic (e.g. user of fertility services, health professional, researcher, member of public):	Health Professional (Retired)

Please refer to page v for information about:

- Publication of feedback on ACART's website
- Official Information Act requests – possible release of you feedback
- Official Information Act requests – possible release of you name and contact details

We will acknowledge all feedback.

- ☐ I **request** that my feedback be withheld in full or part from publication on ACART's website. (If you wish a part to be withheld, please clearly indicate which part.)
- ☐ I **do not** give permission for my name to be published on ACART's website.
- ☐ I **do not** give permission for my contact details to be published on ACART's website.

If you consider that your feedback, or your name and contact details (if you are submitting on behalf of an organisation), should be withheld under the Act, please state the reasons here:

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# Questions for response

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## Question 1

*Refer to sections 3 and 4.*

- (a) Do you agree with ACART's assessment of the known risks and benefits to health associated with the use of cryopreserved ovarian tissue to restore ovarian function?

Yes ☐ No ☐

Please give reasons for your views.

The risk of transplanting malignant cells in the ovarian tissue appears to be low even with leukaemia patients though they were in remission when the tissue was initially excised. The number of patients treated to date though is small. The surgical risk is low though two procedures are involved, the initial surgery to obtain the tissue and the second, later, for the transplant.

The benefits to the young woman are considerable with the restoration of ovarian function and potential fertility.

- (b) Are there any risks and/or benefits associated with the use of cryopreserved ovarian tissue to restore ovarian function that ACART has not identified or assessed?

Yes ☐ No ☐

If yes, please list below.

I think all the important risks and benefits have been identified.

## Question 2

*Refer to section 4.*

- (a) Do you agree with ACART's conclusion that the risks associated with the use of cryopreserved ovarian tissue to restore ovarian function falls within a level that is acceptable in New Zealand?

Yes ☐ No ☐

Please give reasons for your views.

I think the New Zealand public will accept that the benefits clearly outweigh the risks.

- (b) Please note any other comments below.

### Question 3

*Refer to section 4.*

- (a) Has ACART identified all the relevant areas to monitor the use of cryopreserved ovarian tissue to restore ovarian function?

Yes ☐ No ☐

Please give reasons for your views.

All the important relevant areas have been identified. I assume the health outcomes for the women concerned includes any arising from the surgical procedures.  
ACART presumably will establish a system for monitoring the outcomes of the use of the procedure in New Zealand.

- (b) Are there any other areas ACART should monitor?

Yes ☐ No ☐

Please give reasons for your views.

## Question 4

Refer to section 5.

- (a) Has ACART identified all the ethical issues relevant to the use of cryopreserved ovarian tissue to restore ovarian function?

Yes ☒ No ☐

Please give reasons for your views.

The important ethical issues have been discussed in the Document. I have a concern, though, in the area of Justice and Equality in that the less affluent in our society may have no or limited access to this procedure. Accepting that the initial surgery to remove ovarian tissue for cryopreservation may take place through the public hospital system at no cost to the individual, ongoing storage and the eventual transplantation procedure and follow-up will involve significant costs if carried out by private fertility services. The Document notes on pg 20 that ACART has no responsibility for the costs of reproduction.

- (b) Do you agree with ACART's ethical analysis that there are no significant ethical issues associated with the use of cryopreserved ovarian tissue to restore ovarian function?

Yes ☐ No ☒

Please give reasons for your views.

See my concern in (a) above.

## Question 5

*Refer to section 6.*

- (a) Do you agree that the use of cryopreserved ovarian tissue to restore ovarian function should become an established procedure?

Yes ☐ No ☐

Please give reasons for your views.

When in 2005 the storage of cryopreserved ovarian tissue became an established procedure in New Zealand, the intent was that sometime in the future it would be possible to transplant this tissue back into the individual and result in a successful restoration of ovarian function. International experience has now provided enough data that we can proceed with some confidence to establish the transplantation procedure.

- (b) Please note any other comments below.

## Question 6

*Refer to section 6.*

Do you agree with ACART's position that the scope for the use of cryopreserved ovarian tissue to restore ovarian function be limited to the woman from whom the tissue was excised, for her own treatment?

Yes ☐ No ☐

Please give reasons for your views.

The majority of requests for cryopreservation of ovarian tissue will come from cancer patients. Though the risk of inclusion of malignant cells in the transplanted tissue and the resultant development of a cancer appears to be very low, it is still a risk. The transplantation procedure, therefore, should be restricted to the woman from whom the tissue was excised.

## Question 7

*Refer to section 6.*

Do you have any further comments to share with ACART?

No further comments.