

## Effects of breast cancer on having children <sup>[1]</sup>

Dear Alice,

My wife is 30 years old. Her doctor found a lump in her breast; they are in the process of having it tested. What we (her and I) want to know is, depending on if it is cancer, since she has not had children yet, how will this affect having children and what can we expect to happen? What effect will the treatments have on her, when she does have children, or should she never try to have children after treatment?

### **Answer**

Dear Reader,

It's good that the breast lump has been identified and is undergoing further evaluation — the earlier the detection, the better. The short answer to your question is: if your wife does indeed have cancer, her future fertility and ability to carry a pregnancy to term depend on a number of factors, including what type of treatment she receives and when she's able to start trying to conceive after treatment. It's common for women of childbearing age who've been diagnosed with breast cancer to be concerned about their fertility, their ability to give birth while and after they undergo treatment, and how the disease and the treatments will affect the health of any potential offspring. Fortunately, babies born to survivors of breast cancer can be as healthy as those born to women who haven't had cancer. It can also be helpful to know that while some lumps are cancerous, lumps in the breasts aren't that uncommon and many of them can be benign. A quick note: the research primarily refers to women and isn't specific about those who identify outside of the gender binary but can still carry pregnancies. Due to this, the term women will be used in the response to match the research, while acknowledging there are gaps in this knowledge. Read on for more information about the impact on fertility before, during, and after cancer treatment.

If you and your wife are hoping to conceive soon, keep in mind that chemotherapy, radiation, and hormone therapy may negatively affect a woman's fertility. Most drugs used for chemotherapy can damage a woman's eggs, making it harder for her to get pregnant. However, the extent of the damage depends on a woman's age, which [drug](#) <sup>[2]</sup> she received and at what dose, among other factors. Before age 30, women have a better chance of getting pregnant after chemotherapy, particularly if they undergo a short course of treatment. Other side effects of

chemotherapy include increased risk for premature menopause, which is when menstruation stops significantly before the age of 51. However, even if periods resume after being treated, they may not indicate fertility or fertility may be short lived.

Because radiation uses high-energy rays to kill cancer cells, it's possible to scar the ovaries or the uterus, if used near those areas. Uterine scarring may impact the body's ability to carry a pregnancy to term (leading to miscarriage, low birth weight infants, and premature births), since the scar tissue might make it harder for the uterus to stretch to its full size. Hormone therapy may also be used for cancer treatment; however, its effects on eggs are unknown. Health care providers usually recommend that women on hormone therapy wait until the therapy is complete before trying to conceive.

If a woman has already been diagnosed with and treated for breast cancer, health care providers usually recommend waiting at least six months before attempting to conceive. This allows health care providers time to better determine whether or not the cancer is recurrent. If the cancer is recurrent, a woman and her partner may wait a while longer before getting pregnant.

If the lump is found to be cancerous and she's already pregnant, it also may be possible for the lump and any other abnormal tissue to be surgically removed. Removal of the breast tissue may take either the full breast (mastectomy) or just part of the breast (partial mastectomy or breast-conserving surgery). A mastectomy (either full or partial) and lymph-node removal pose only a small risk to the fetus in the form of the general anesthesia, with the risk varying based on the progression of the pregnancy. If the cancer is further along, chemotherapy is postponed until after the first trimester to reduce the chances of affecting the fetus, as certain types of chemotherapy have a lower risk of fetal abnormalities associated with them after the first trimester and up to three weeks before birth.

In addition to carrying a pregnancy, breastfeeding is a common concern for women who have or have had breast cancer. Some women's cancer may have required them to have a partial or total mastectomy, in which case the unaffected breast is usually used for feeding. Women who haven't had mastectomies certainly may be able to breastfeed their babies. Some women who have had radiation therapy on one (or both) breasts may find the milk production in the treated breast(s) affected. Often, in that case, the untreated breast may produce enough milk for breastfeeding. If a woman is having trouble breastfeeding, there are many support groups that exist to help her with any breastfeeding troubles. Women currently undergoing radiation or chemotherapy may not be able to breastfeed until a few months after treatments have stopped, since health care providers usually want to test breast milk to be sure that no harmful chemicals are transmitted to the nursing child.

If you're concerned that cancer treatment will affect your wife's fertility, there are a few options to consider. You and your wife might choose to have her eggs harvested and frozen for future use before treatment begins, shield the ovaries from radiation if it's being used elsewhere in the body, or pursue autotransplantation where an ovary is removed and implanted in another part of the body to avoid exposure to radiation. Other options for parenthood include the cryopreservation of embryos (as opposed to just the eggs), egg donation, embryo donation, surrogacy, and adoption.

You and your wife may consider speaking with each other about any concerns either of you have about your wife's health, your sexuality, your feelings, and her ability to conceive and carry a

child. By bringing your concerns to the table first with each other, and then with your health care providers, you can get the information you need to help you make the most appropriate decisions for yourselves and your future family.

Alice!

Category:

[General Health](#) [3]

[Cancer](#) [4]

[Sexual & Reproductive Health](#) [5]

[Reproduction](#) [6]

[Fertility](#) [7]

## Related questions

[Paternal grandmother – Breast cancer link?](#) [8]

[Bloody, greenish discharge from my nipples — Should I be concerned?](#) [9]

[Curious about female breast anatomy](#) [10]

## Resources

[Medical Services \(Morningside\)](#) [11]

[Medical Services \(CUIMC\)](#) [12]

Published date:

Apr 29, 2005

Last reviewed on:

Apr 19, 2019

## Footer menu

- ▼ [Contact Alice!](#)
  - [Content Use](#)
  - [Media Inquiries](#)
  - [Comments & Corrections](#)
- ▼ [Syndication & Licensing](#)
  - [Licensing Q&As](#)
  - [Get Alice! on Your Website](#)
  - [Full Site Syndication](#)
  - [Link to Go Ask Alice!](#)

**Go Ask Alice! is not an emergency or instant response service.**

If you are in an urgent situation, please [visit our Emergency page](#) to view a list of 24 hour support services and hotlines.

---

**Source URL:** <https://goaskalice.columbia.edu/answered-questions/effects-breast-cancer-having-children>

### **Links**

- [1] <https://goaskalice.columbia.edu/answered-questions/effects-breast-cancer-having-children>
- [2] <https://www.cancer.org/treatment/treatments-and-side-effects/physical-side-effects/fertility-and-sexual-side-effects/fertility-and-women-with-cancer/how-cancer-treatments-affect-fertility.html>
- [3] <https://goaskalice.columbia.edu/category/general-health>
- [4] <https://goaskalice.columbia.edu/category/cancer>
- [5] <https://goaskalice.columbia.edu/category/sexual-reproductive-health>
- [6] <https://goaskalice.columbia.edu/category/reproduction>
- [7] <https://goaskalice.columbia.edu/category/fertility>
- [8] <https://goaskalice.columbia.edu/answered-questions/paternal-grandmother-%E2%80%93-breast-cancer-link-0>
- [9] <https://goaskalice.columbia.edu/answered-questions/bloody-greenish-discharge-my-nipples-%E2%80%94-should-i-be-concerned-0>
- [10] <https://goaskalice.columbia.edu/answered-questions/curious-about-female-breast-anatomy-0>
- [11] <https://goaskalice.columbia.edu/resource/medical-services-morningside>
- [12] <https://goaskalice.columbia.edu/resource/medical-services-cuimc>