Sperm quality according to the disease and treatment

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Stem cell transplantation is widely used for the treatment of haematological malignancy and offers potential long-term survival. But cancer patient has defective sperm and low sperm counts as a consequence of the disease and its treatment. Irradiation and chemotherapy each compromise fertility by exerting cytotoxic effects on gametogenesis. The degree of gonadal effect is governed by the therapeutic regimen(i.e., type, dose, schedule) and duration of treatment. This study was evaluated the sperm quality before stem cell transplantation. Records of 50 patients with haematological malignance, who banked their sperm between Aug. 1998 and Aug. 2001, were reviewed. The acute leukemia group had undergone chemotherapy or radiation therapy before sperm banking. CML group had undergone conservative treatment. Some patients of SAA group had got ALG treatment. The sperm quality was reviewed. The acute leukemia group had undergone chemotherapy or radiation therapy before sperm banking. CML group had undergone conservative treatment. Some patients of SAA group had got ALG treatment. The sperm quality was reviewed.

268 ENSURING ACCURACY OF OUTPATIENT MEDICATION ADMINISTRATION FOR THE PEDIATRIC BONE MARROW TRANSPLANT PATIENT

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The Bone Marrow Transplant (BMT) program at The Children's Hospital (TCH) in Denver, Colorado serves patients from the Rocky Mountain Area that includes nine states plus patients referred from other countries. The patients ages range from birth to the late twenties. The transplants are autologous and allogeneic including matched related, unrelated, and cord blood. BMT patients are on between 6 and 20 medications as part of their supportive care in the post transplant time period. Nurses play a valuable role in educating patients and families of the importance and interactions of their medications, evaluating compliance issues, and problem-solving roadblocks to successful medication administration. Home medication teaching is a multidisciplinary process involving nurses, pharmacy and physicians. The process begins in-patient weeks prior to discharge and continues at each outpatient clinic visit. We will present several tools that help patients with safe medication administration. These are available in English and Spanish. Tools include: patient/parent medication list including side effects, clinic medication tracking list, patient/parent instruction form (given with any medication change during the clinic visit), patient/parent medication checklist for home use, and medication calendars. In spite of this thorough medication