



Counselling on fertility awareness for teenage girls

MD M Ishlam*

Department of Public Health, La Trobe University, Melbourne, Australia

*Corresponding author. E-mail: mashiurislammd@gmail.com

Received: 29-Nov-2022, Manuscript no. IJGC-22- 82188; **Editor assigned:** 02-Dec-2022, PreQC no: IJGC-22- 82188 (PQ); **Reviewed:** 16-Dec-2022, QC no: IJGC-22- 82188; **Revised:** 23-Dec-2022: Manuscript no: IJGC-22- 82188 (R); **Published:** 30-Dec-2022, DOI: 10.15651/IJGC.22.06.012.

DESCRIPTION

There isn't enough data to support the recommended methods for giving adolescent females reproductive counselling. Despite their desire, adolescent girls frequently do not have access to the reproductive knowledge they need. To provide a clear overview of the major components of fertility awareness counselling for both healthy youth and those who have comorbidities that have an impact on fertility in order to assist practitioners in offering such counselling to young adult women and adolescents. The literature claims that despite adolescents' interest in discussing sexuality and reproduction, this is usually overlooked during a standard doctor's office visit. Teenagers, as a result, commonly seek information from less reliable sources, hold a variety of conception-related beliefs, and feel helpless regarding their potential fertility. There were no studies that looked at counselling on fertility awareness given to healthy adolescents on a regular basis. Fertility is impacted by a wide range of distinct gynecologic and medical issues, discuss them in great detail and provide a discussion guide with specific information and referral suggestions to assist with reproductive awareness counselling for female teenagers. The cancer care team, which includes paediatric oncologists, radiation oncologists, haematologists, paediatric oncologists, surgeons, nurses, and others, is advised to discuss reproductive issues with patients.

The oncology team should talk to the parents about fertility as well as bring up the topic with the child as soon as they are old enough to grasp it. Parents may need to talk to their children about fertility around the time puberty starts if they are too young to do so while they are receiving cancer treatment. The best moment to broach the subject is frequently at a follow-up appointment at the

oncology clinic. Many parents would want to preserve their child's fertility if given the chance. Asking the child if they consent to the treatment is appropriate if they are old enough to understand the fertility difficulties being treated. A child who can understand must normally concur (this is called assent) before an operation can be done, even though they are not yet of legal age to do so. Before a procedure, the parents must also grant their permission after being informed of the dangers, difficulties, and success and failure rates. Girls who have reached puberty can freeze part of their eggs or fertilised embryos since they have generated mature eggs. Most girls reach puberty between the ages of nine and fifteen. Sometimes the ovaries can be protected if radiation is needed to treat cancer and is being directed at the abdomen (belly). The ovaries may occasionally need to be surgically removed from the radiation field. After therapy, they can be placed back in their original position (or they might do so on their own). The term for this is ovarian transposition. Most females who get cancer treatment after puberty will resume having periods, although many fertile young people may have early menopause. In order to protect her fertility in the event that the treatment results in an early menopause, she can decide to store eggs in her late teens or early twenties.

Adolescent girls' healthcare professionals have the chance to raise knowledge about fertility as part of a larger reproductive health dialogue that teens want and from which they might benefit. The ability of the adolescent to make educated reproductive decisions may be enhanced by identifying probable future fertility problems, comprehending age-related fertility decline, and assisting in health optimization prior to future conception. In order to address the "appropriate time, right weight, and right approach" to seek pregnancy with teenagers.