



LIFT

## United Kingdom Longitudinal Population Cohort Studies of Subfertile Individuals and Children Conceived after Fertility Treatments (LIFT)

### MEN'S COHORT STUDY

#### How can you help?

We are seeking patient and public input from men affected by fertility problems. If you have been affected by subfertility, you can help us by joining this Patient and Public Involvement Group to share your views on the study we are planning and provide feedback on study documents. The group will meet remotely, and the discussion will last around 30 minutes. Your views are very important in helping us guide the direction of the study we are planning.

#### What is the proposed study about?

Our research team at University College of London, Great Ormond Street Institute of Child Health, is designing a large study that will investigate the long-term health of men affected by fertility problems. We will use information from the Human Fertilization & Embryology Authority (HFEA), which holds information on all couples undergoing assisted reproduction treatments for the conception of a child in the UK, to identify affected men. We will then compare their later life health to the health of men with similar characteristics who have not sought help from fertility clinics. We will look at men's health using National Health Service (NHS) medical records, which hold information on all patients using the NHS services throughout their lives, including information on diagnoses and treatments of specific conditions. This information offers an invaluable resource for research like ours.

Find out more about the proposed study [here](#).

#### Why are we doing this study?

Male subfertility (known as any form of reduced fertility with prolonged time to conception) affects about half of all couples undergoing assisted reproduction treatments for the conception of a child. Assisted reproductive technology substantially increases the chances for the



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affected men to become fathers, but the effects of the underlying fertility problems on the health of these men remain unclear. Male subfertility may be an early and identifiable risk factor for the development of diseases later in life and more research into the long-term health effects associated with fertility problems is essential to improve diagnosis and treatment.

#### How will we do this?

The minimum amount of patient identifiable information will be used by the HFEA and NHS to link the different sources of information together. As it is not possible to ask all the men whose information will be included in this study (around 500,000) if they want to take part, we are seeking support by Section 251 of the NHS Act 2006, which allows confidential patient information to be shared for public research and clinical benefit without consent on a strictly regulated basis. Conducting this study using existing medical records is the least intrusive and most efficient way to investigate the long-term health of men affected by fertility problems. At no point will the research team have access to any identifiable information about the men included in this study.

Further information about participation or opting out of this study, or how we will process personal information is available [here](#).

#### Thank you for your help!

Professor Alastair Sutcliffe, University College London

Professor Allan Pacey, University of Sheffield



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