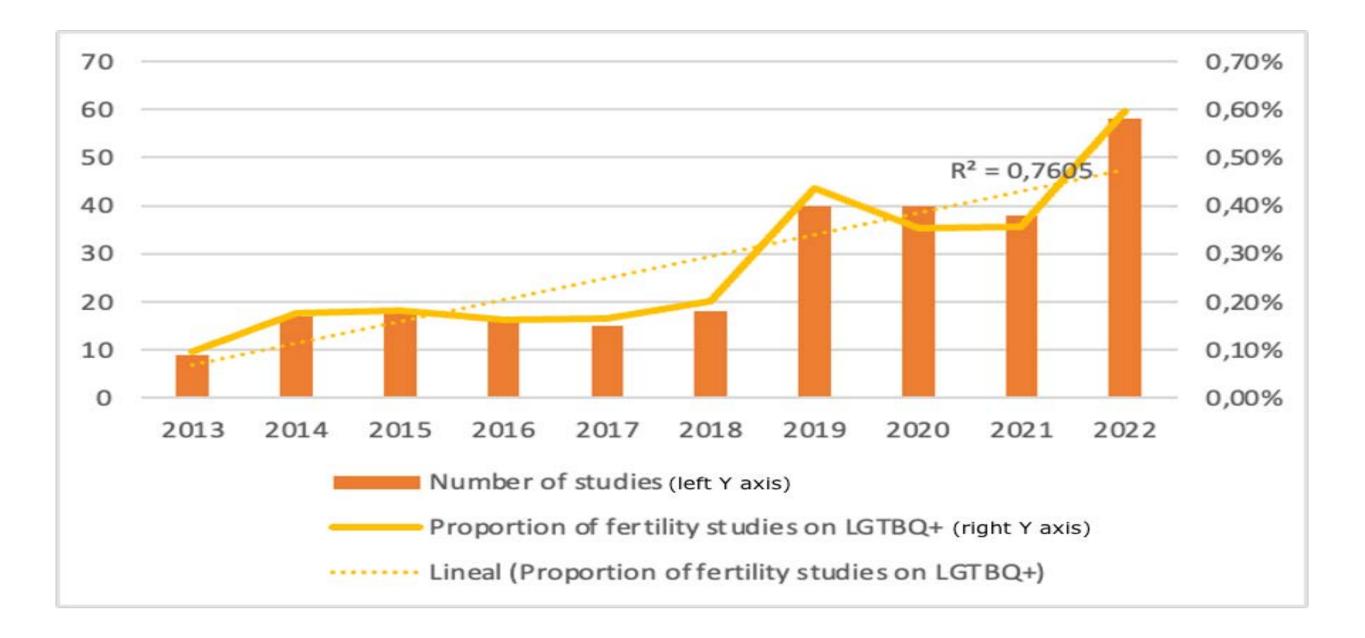
Enhance fertility research by prioritizing LGBTQ+ inclusion and producing studies that address their unique health needs.

The State of Research on Fertility for LGBTQ+ people: A scoping review

Background: The LGBTQ+ community has made significant progress in recent years in terms of visibility and awareness. This scoping review aimed to map the available research evidence on reproductive medicine related to the LGBTQ+ community.

A Call for More Dedicated Research: This growing number of studies highlights increasing recognition of LGBTQ+ fertility challenges. However, the small proportion of total fertility research underscores the need for more dedicated studies in this field..



- Only 268 studies addressing fertility issues within the LGBTQ+ community were published in the last 10 years, with a discernible uptrend (from 0.1% to 0.6%, R2=0.76).
- Authors from North America and Europe published more than other regions worldwide (p<0.05).
- Most studies were narrative reviews (32%) or with methodologies centered on inquiry, like surveys (14%), and semi-structured interviews (9%).
- Family planning (38.4%) and reproductive outcomes (29.1%) were the most common topics. Access to fertility services, preferences, psychological impact, ethics/legal issues, challenges, prevalence, partner engagement, and experience

Methods

Scoping review

- Database search: MEDLINE. Inclusion criteria: any article published on reproductive medicine and fertility preservation in which the LGBTQ+ persons were separately evaluated from a cisgender population.
- Search (5/2023): no language restrictions. Studies published in 2013 2022. Search terms: (Sexual and Gender Minorities, Reproductive Medicine, Reproductive Techniques, Fertility, Pregnancy, and Surrogate Mothers)
- Exclusion criteria: the main topic was the obstetrical or neonatal outcome, focused on the health team's experience attending
 to people from the LGTBQ+ community, or did not analyze any outcome related to fertility treatment.
- Titles and abstracts of each study were evaluated by two independent reviewers (DG, AC, JQ, MM, RP, FDB, BH) according to inclusion criteria. Then, two reviewers independently selected and extracted each full text. Discrepancies were resolved by consensus.

Limitation: The main limitation of the study stems from the exclusive reliance on Medline for the literature search. While Medline is a leading health database, the omission of studies from other databases could be a limitation. It is assumed that the highest-impact journals are extensively covered in Medline and, therefore, extrapolation of the findings to lower-impact factor journals should be cautious.



