

Impact of Covid-19 on Fertility Services

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SARS-CoV-2 (COVID-19) made its first appearance in the city of Wuhan in China and rapidly spread all over the world. WHO declared it a Global Pandemic on 11th March, 2020. Since then, it has spread rapidly all over the world and it has proved to be particularly deadly in vulnerable populations such as the elderly and those having co-morbidities like diabetes, hypertension, kidney disease etc. Already more than 2.1 million people have died and health care personnel have been affected most. Some countries are experiencing infection in multiple waves. There is also ominous signs that the virus is undergoing mutation which can make it more infectious and possibly more virulent.

Living with uncertainties about the course and duration of pandemic, professional societies in most countries and fertility specialists advised immediate stoppage of all fertility treatment except for those cases where embryo or gametes have to be preserved before gonadotoxic treatment for malignancies. American Society for Reproductive Medicine (ASRM), ESHRE, and U.K. Embryology Authority all advised suspension of activities related to fertility management. ASRM

advised that that only those patients who were in the middle of the stimulation cycle, should complete the cycles and embryos should be cryopreserved¹. Like ASRM, ESHRE also advised to suspend assisted reproductive activities and to cryopreserve the embryos² as there were uncertainties about the possibility adverse pregnancy outcome including the possibilities for vertical transmission and the risk of congenital anomalies in the fetus³. It was also hoped that Covid-19 was a temporary scourge and will disappear soon. But it has now become apparent that Covid-19 is not leaving us anytime soon, and there was no proof that it has a negative effect on pregnancy itself^{4,5}.

Covid-19 had a disastrous impact on fertility services worldwide. Almost all fertility centers were closed. Patients became worried and confused, those with advancing age became panicky as they thought that their last chance of getting a baby of their own was slipping away.

From the end of June 2020, many fertility centers started limited services. However

there were problems. In many cases the centers had lost their trained people and it was not easy to assemble an effective team. The staff and patients had to be trained in the basic elements of PPE, space had to be rearranged in order to maintain adequate social distances.

Many centers all over the world has since resumed fertility services and Bangladesh is no exception. Most of the fertility centers have resumed their full activity including assisted reproductive techniques since September. However, there were difficulties in some countries in getting media and consumables as they were not manufactured in the country. Eventual restarting would involve wide use of PPE equipment both for patients as well as for service providers, and routine screening of all patients for Covid-19 will make procedures more expensive.

Many patients were disappointed and depressed due to cessation of fertility services and has demanded that the services be resumed as soon as possible, and there is no doubt that more and more centers would open up for providing services not only for the patient only but also for their own survival; because investment is high in these fertility centers, and non-resumption of services for long period will make their survival difficult. Most professional societies have now recommended resumption of services according to their facilities and this trend will continue. However, service should be provided within strict safety standards. There should not be any lapse in infection control measures during provision of service. Telemedicine services should be used where possible instead of face-to-face contact. Every clinic should set up their priorities so that the really deserving patients get priority in this time of limited service.

Though health care service in some countries have been overwhelmed due to the demand of service from the health care providers, others are lucky in the sense that transmission of COVID-19 infection have been largely contained .Bangladesh is one such country, where normal health services including infertility treatment has started and continuing. We hope that infertility treatment including assisted reproduction will continue as before, but the possibility of discontinuation will always be there if the country faces a new wave of corona virus infection.

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