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UNDERSTANDING THE PATIENT EXPERIENCE IN THE DIGITAL AGE: VIRTUAL MEDICINE AND PATIENT PROGRESSION TO FERTILITY TREATMENT

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OBJECTIVE: Fertility practices have been profoundly impacted by the global COVID-19 pandemic, leading to a rapid increase in the utilization of new forms of virtual communication with patients. This study aimed to assess the use of telemedicine compared to conventional in-person consultation with regard to the rate of patient progression to treatment.

MATERIALS AND METHODS: The study included patients who sought reproductive treatment and underwent an initial consultation during from March 2, 2020 to December 22, 2020. Patients were grouped by in person or telemedicine at initial consultation. Patients who met in person underwent a physical exam and ultrasound the same day as the initial consultation. Patients who met via telemedicine were contacted after the initial consultation to schedule a physical exam and ultrasound at a later date. All patients were followed up with by a clinical team member and financial coordinator either in person or virtually following initial consultation. Study outcomes included number of patients who progressed to treatment. Secondary outcome included time to treatment. Treatment was defined as a patient who underwent a diagnostic procedure, surgical procedure, timed intercourse cycle, intrauterine insemination cycle, in vitro fertilization cycle, egg freezing cycle, laboratory procedure, or embryo transfer cycle. A 90 day censoring interval was applied to account for heterogeneity between initial consultation date and progression to treatment event.

RESULTS: Of the 2730 patients included in the study, 2153 (79.9%) received in person consultation and 550 (20.1%) communicated via telemedicine. The percentage of patients who progressed to treatment within 90 days of initial consultation was nearly identical between in person (35.4%) and telemedicine patients (34.0%). Patients who underwent in person consultation advanced to treatment 3 days faster (41.1 days) compared to telemedicine patients (44.0 days) within the 90 day censoring interval [Table 1].

Table 1: Initial Consultation & Patient Progression to Fertility Treatment

Initial Consultation Type	Average Number of Patients Who Converted to Treatment within 90 Days	Time to Treatment (Days)
In Person (n=2153)	35.4% (n=763)	41.1
Telemedicine (n=550)	34.0% (n=187)	44.0

CONCLUSIONS: The COVID-19 pandemic has forever changed society, healthcare, and reproductive medicine. While infertility patients who utilize telemedicine for initial consultation take longer to initiate treatment, they are equally likely to enter treatment.







IMPACT STATEMENT: Use of telemedicine breaks down barriers to treatment and provides the opportunity for patients everywhere to access reproductive care in their journey to parenthood.