

INFERTILITY PATIENTS AND COVID-19



COVID-19 AND PREGNANCY

We don't know much yet about COVID-19 and how the virus may affect fertility, pregnancy, or the children that result. Until the global pandemic of COVID-19 subsides or we have more information, ASRM recommends that you avoid starting new fertility treatment unless it is an emergency (such as if you need chemotherapy in the next few weeks).

IF YOU HAVEN'T STARTED YOUR TREATMENT CYCLE YET

For now, ASRM recommends not starting new fertility treatment, if possible. More specifically, this is not the time to have procedures such as hysteroscopy or HSG or to start treatments like intrauterine insemination or IVF. However, women with an urgent need to preserve their fertility, (such as, those with a surgery or medical treatment planned that may cause infertility) may still start treatment.

IF YOU HAVE STARTED YOUR TREATMENT CYCLE

If you or your donor are already taking fertility medications as part of an IVF cycle, you may finish your current cycle and freeze your eggs and/or embryos for a later transfer. You should wait to begin a new cycle until the Coronavirus (COVID-19) pandemic has improved or we know more. If you are diagnosed with COVID-19 during a cycle, telephone your physician right away.

SAFETY OF STORED EGGS AND EMBRYOS IS A PRIORITY

It's not known whether cross-contamination can happen between frozen samples, so ASRM recommends treating samples from patients with COVID-19 like samples from any patient who tests positive for an infectious disease.

TAKE CARE OF YOUR MENTAL HEALTH AND EMOTIONAL AND PHYSICAL WELL-BEING

Infertility care, the uncertainty of a pandemic, the need for social distancing, and a delay or interruption in your treatment can each be stressful, and, added together, may feel overwhelming. Take steps to ensure you are taking care of your emotional and physical well-being by eating well, doing exercise, and connecting with your friends and colleagues, even if it is remotely. You may need more emotional support during this time and your physician can assist you in finding a mental health professional to help. You can also find one using the "FIND A PROVIDER" link on www.reproductivefacts.org. You're not alone.



TRAVEL CONCERNS

Non-essential travel is not recommended and, in many cases not possible, especially to highly impacted areas. If you are working with a donor or surrogate/gestational carrier who is not where you are, make a plan now on how to address this.

TELEHEALTH AND FERTILITY CARE

When possible, ASRM recommends having your office visits by telephone or secure videoconference (called telehealth or telemedicine). For example, you can start your evaluation or set a treatment plan with your doctor using telehealth.

