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O-202 Online fertility workup with video consultation for infertile patients; a randomized controlled trial

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Study question: Is an online consultation for fertility work-up as effective as regular consultation in terms of patient centeredness and shared decision making?

Summary answer: This study shows no significant differences in level of patient-centeredness and shared decision making for an online fertility work-up compared to a regular appointment.

What is known already: Couples who suffer from involuntarily childlessness can experience a high psychological burden and treatment for their infertility has a high impact on their daily life. Most optimally, patients receive personalized information and undergo diagnostic testing for fertility work-up, with as little as possible interference in their personal life. Two recent studies already evaluated the use of video-consulting to further modernize current fertility care, with positive results. However, more well-designed research is needed to expand and carefully evaluate the idea of an online fertility work-up for patients with an unfulfilled child wish.

Study design, size, duration: This is a single-center non-blinded randomized controlled trial of 84 heterosexual patient couples. Patients were followed up from the start of the fertility work-up until three months after completion of the work-up.

After the work-up, a questionnaire was send through an online research program consisting of a modified version of the Patient-Centered Questionnaire-Infertility (PCQ-I) to measure patient-centeredness and the CollaboRATE questionnaire to evaluate the level of shared decision making.

Participants/materials, setting, methods: The study population consisted of infertile couples, who were referred to a fertility clinic for the first time. Couples were randomized between a regular fertility work-up, consisting of two face-to-face appointments of in total 45 minutes, and an online fertility work-up. The latter consisted of online recommendations and diagnostic tests, based on patient specific characteristics from an anamnesis questionnaire, followed by a 30 minute video consultation with a fertilitydoctor to discuss results and treatment advice.

Main results and the role of chance: Of the 84 included patients, 75 questionnaires were returned for this abstract (89%). The mean score on the total PCQ-I was 2.66 (SD 0.20), on a scale of 0-3, for the online fertility work-up versus 2.57 (SD 0.29) for the control group. This was not statistically significant (p = 0.147). Also the different subscales of the PCQ-I did not show statistically differences between the two groups, but there was a positive trend for the online fertility work-up on the subscale 'Information and Communication' (2.85 (SD 0.21) vs 2.72 (SD 0.31); p = 0.055).

On the CollaboRATE questionnaire, no significant differences in experienced level of shared decision making were found between the two groups (means between 7.52-7.91 on a ten point Likert scale).

During seven video consultations (17%) some technical difficulties were experienced, for example the video worked but there was no sound. For 62% of the couples in the intervention group the time for preparation for the online fertility workup was less than five minutes, while the majority of the patients in the control group (52%) spend at least 60-90 minutes on their appointment in the fertility clinic.

Limitations, reasons for caution: This study was performed during the COVID-19 pandemic, when patients were more used to online meetings. The preferences of patient post pandemic might be different. At this point we have not yet evaluated whether online fertility consultation leads to different conclusions and treatment advices than regular fertility care.

Wider implications of the findings: In our study online fertility work-up with video consultation is perceived as good as a regular work-up, therefore future patients should be offered a choice between the two methods. Considering the rapid development of online technology, online fertilitycare may develop further. It is important that developments undergo thorough scientific evaluation.

Trial registration number: NL8554

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