

Since January 2020 Elsevier has created a COVID-19 resource centre with free information in English and Mandarin on the novel coronavirus COVID-19. The COVID-19 resource centre is hosted on Elsevier Connect, the company's public news and information website.

Elsevier hereby grants permission to make all its COVID-19-related research that is available on the COVID-19 resource centre - including this research content - immediately available in PubMed Central and other publicly funded repositories, such as the WHO COVID database with rights for unrestricted research re-use and analyses in any form or by any means with acknowledgement of the original source. These permissions are granted for free by Elsevier for as long as the COVID-19 resource centre remains active. that even with easy access to information, women are still unclear about the importance of medical guidance regarding the use of contraceptives. Finally, we observe a change in the behavior of women who take contraceptives in their relationship of trust with the doctor, demonstrating that social media have a fundamental role for patients today.

IMPACT STATEMENT: This study can contribute to better understand the behavior of patients and, with that, generate new strategies for conduct that establish a greater connection with the patient.

SUPPORT: This study was financed in part by the NeoVita Clinics

P-444 6:30 AM Wednesday, October 20, 2021

DYNAMICS OF PREGNANCY INTENTION AND PREG-NANCY INCIDENCE AMONG PROFESSIONAL

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OBJECTIVE: To prospectively evaluate the dynamics of pregnancy intention and incidence of pregnancy among professional women.

MATERIALS AND METHODS: We followed 11,276 pre-menopausal non-pregnant women aged 19-45 years participating in the Nurses' Health Study 3 (2010-2021). Pregnancy intention and pregnancy status were assessed at baseline and every 3 months thereafter. Women who became pregnant during follow-up were asked to report their pregnancy intention at the time they conceived in a follow-up questionnaire administered at gestation week 20-25.

RESULTS: At baseline, 898 (8%) women self-reported they were actively trying to conceive, 1285 (11%) self-reported they were not actively trying to conceive but thought they would be pregnant within 1 year, and the remaining 9093 (81%) self-reported they were neither trying to conceive nor thought they would be pregnant within 1 year. Women actively trying to conceive were more likely to be married or in a domestic partnership, nulliparous, and to have a higher educational achievement than women in the other two groups. We documented 870 self-reported pregnancies within 12 months of pregnancy intention assessment. The crude rates of pregnancy were 45%, 28%, and 1% for women in the three pregnancy intention groups, respectively. About 1 in 7 women changed their intention status during follow up. Among women reporting at baseline being actively trying to conceive who did not become pregnant during follow-up, 27% subsequently reported that they were neither trying nor thought they would become pregnant soon. The corresponding figure for women reporting at baseline they thought they might become pregnant soon was 33%. Conversely, among women reporting at baseline that they were neither trying nor thought they would become pregnant soon, 9% reported that they were either actively trying to conceive or thought they would become pregnant soon. Among women who became pregnant during follow-up, 79% reported that they were actively trying to get pregnant when they conceived, including 50% of women who at baseline reported they were not trying to conceive.

CONCLUSIONS: Pregnancy intention is highly fluid among nurses and nursing students of reproductive age. Unsurprisingly, pregnancy intention is strongly associated with incidence of pregnancy.

IMPACT STATEMENT: Our findings suggest that pregnancy intention is highly fluid, and current approaches to assess this construct may not fully capture this fluidity.

POSTER SESSION: COVID-19

P-445 6:30 AM Wednesday, October 20, 2021

FET OUTCOMES DURING THE COVID-19 PANDEMIC. Isaac J. Chamani, M.D.,¹ David H. McCulloh, PhD,² Frederick L. Licciardi, M.D.,² James A. Grifo, MD, PhD³ ¹Baylor College of Medicine, Hous-

ton, TX; ²NYU Langone Health, New York, NY; ³NYU Langone Prelude Fertility Center, New York, NY.

OBJECTIVE: There has been significant uncertainty surrounding the COVID-19 pandemic and its effect on human reproduction which resulted in a temporary suspension of ART treatments in early stages of the pandemic. The ACE2 receptor used by the virus to infect pulmonary cells is also found in reproductive organs and has fueled speculation as to whether the disease can be sexually transmitted and whether it can cause infertility. Non-viral

issues (e.g., pandemic related psychological stress, alternate methods of communication and interaction, and new clinic procedures) may also worsen outcomes. We sought to determine whether clinical outcomes following the frozen embryo transfer (FET) of a euploid embryo were different during the COVID-19 pandemic in 2020 when compared to prior to the pandemic in 2019.

MATERIALS AND METHODS: Patients who tested negative for COVID-19 and underwent FET of a single euploid embryo at NYU Fertility Center in NYC over January 2020 through September 2020 were separated by treatment month and compared with patients from the corresponding month in 2019. Patient's age at cycle start and age at freeze were compared using Student's T-Test. Potential cycle outcomes included intrauterine pregnancy (IUG), biochemical pregnancy (Biochem), and no pregnancy, and outcomes were compared between the two years using contingency Chi Square.

RESULTS: 1,044 patients were compared over the corresponding months. 558 transfers from 2019 and 486 patients from 2020, with no patients in April of 2020. There were no differences noted in patient's age at cycle start, or age at cryopreservation, between any of the months across the two years. Analysis of outcomes following FET further revealed no statistically significant differences between any of the months over the two years, $X^2 = 14.64$, p > 0.05. Post hoc analyses comparing the combined months of March, April and May, or the combined 9-month periods, were also not statistically significant ($X^2 = 0.042$, p > 0.05; $X^2 = 1.68$, p > 0.05; respectively).

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Total
2019 Total Cycles 2020 Total Cycles					78 48	57 88		32 74	82 49	558 486
2019 IUG Rate (%)	70.8	74.0	67.1	62.3	71.8	73.7	67.1	59.4	65.9	69.2
	74.4	77.4	44.4	-	75.0	67.1	73.5	73.0	71.4	72.2
2019 Biochem Rate (%)	9.7	12.0	7.9	13.0	11.5	5.3	12.9	6.3	11.0	9.9
2020 BioChem Rate (%)	7.3	1.9	11.1	-	10.4	10.2	6.0	9.5	8.2	7.8

CONCLUSIONS: In patients who tested negative for COVID-19, there were no differences in treatment outcomes following FET's when comparing patients treated during the COVID pandemic with those who were treated prior to the pandemic.

IMPACT STATEMENT: Providers and patients can be reassured that with proper testing and sanitizing techniques FET outcomes remained unaffected by the pandemic.

References: Lawson AK, McQueen DB, Swanson AC, Confino R, Feinberg EC, Pavone ME. Psychological distress and postponed fertility care during the COVID-19 pandemic. J Assist Reprod Genet 2021;38:333-41.

Tur-Kaspa I, Tur-Kaspa T, Hildebrand G, Cohen D. COVID-19 May Affect Male Fertility but is Not Sexually Transmitted: A Systematic Review. F S Rev 2021;03:03.

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COVID-19 VACCINATION AMONGST INFERTILITY STAFF: HOW CAN WE DO BETTER? Keri Bergin, MD,¹ Isabelle Kate Levin, BA,² Daniel W. Duvall, Jr., BA,³ Alan S. Penzias, M.D.,³ Denny Sakkas, PhD,³



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OBJECTIVE: To examine COVID-19 infection rates, vaccination rates, and attitudes towards the COVID-19 vaccine amongst the staff at a large, university-affiliated center with sites in six different states.

MATERIALS AND METHODS: An 18-question email questionnaire was distributed to all employees at Boston IVF between April 6 – April 13th, 2021. Surveys were sent to staff in Massachusetts, Indiana, Maine, New Hampshire, New York and Rhode Island. The primary outcome was vaccination rate. Secondary outcomes included rates of COVID-19 infection. Results were stratified by age, gender, and geographical location. Reasons behind vaccination reluctance were explored.