

15771: Challenges and potential practice gaps faced by healthcare professionals investigating male infertility: A patient-informed educational study in eight countries

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Objectives

- Identify challenges, barriers, and practice gaps of healthcare professionals (HCPs) offering male and female fertility care
- Inform continuing professional development (CPD) and continuing medical education (CME) activities** in reproductive medicine

Materials and Methods

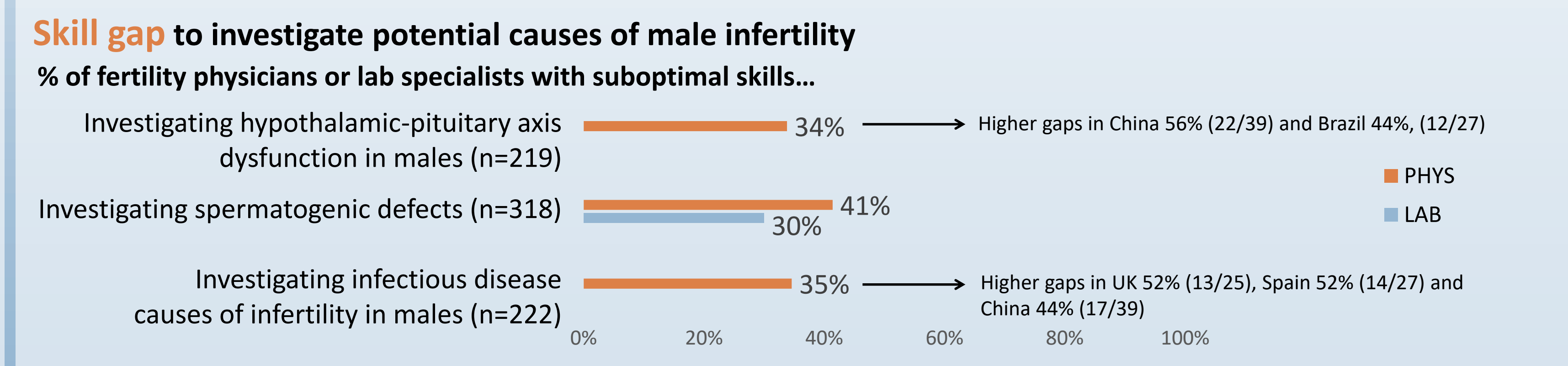
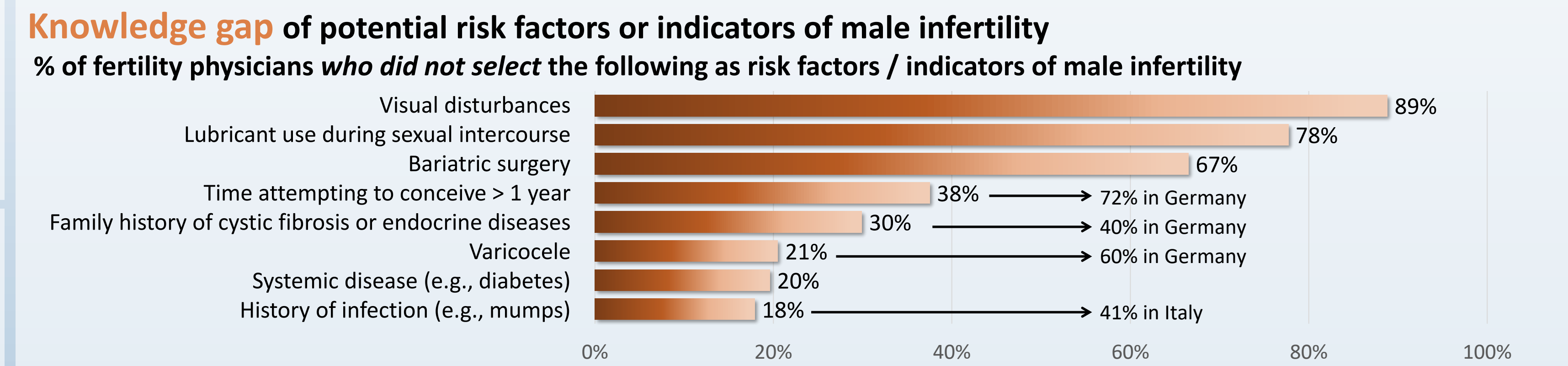
- Participants / eligibility criteria across 8 countries:**
 - Physician (PHYS) or a laboratory professional (LAB) specialised in fertility care
 - Involved in assisted human reproduction (AHR)
 - Actively practicing
 - Patient seeking/receiving care for infertility
- Mixed methods study**
 - Qualitative **45-minute semi-structured interviews** transcribed and coded to identify emerging themes
 - Quantitative survey** of separate PHYS and LAB sample, analyzed descriptively, using chi-squared statistical tests
 - Data sources, methods and interpretation viewpoints **triangulated to increase trustworthiness of results**

Sample

Country	Qualitative and Quantitative Sample Demographics					
	Profession or Demographic					
	PHYS*	LAB**	Female patients	Male patients	PHYS*	LAB**
	Interviews				Surveys	
Brazil	3	3	3	1	27	12
China	3	3	2	1	40	15
France	3	3	3	0	26	12
Germany	3	3	3	0	25	12
Italy	3	3	3	1	27	12
Mexico	3	3	3	1	27	12
Spain	3	3	3	1	27	12
UK	3	3	3	0	25	12
Total	24	24	23	5	224	99

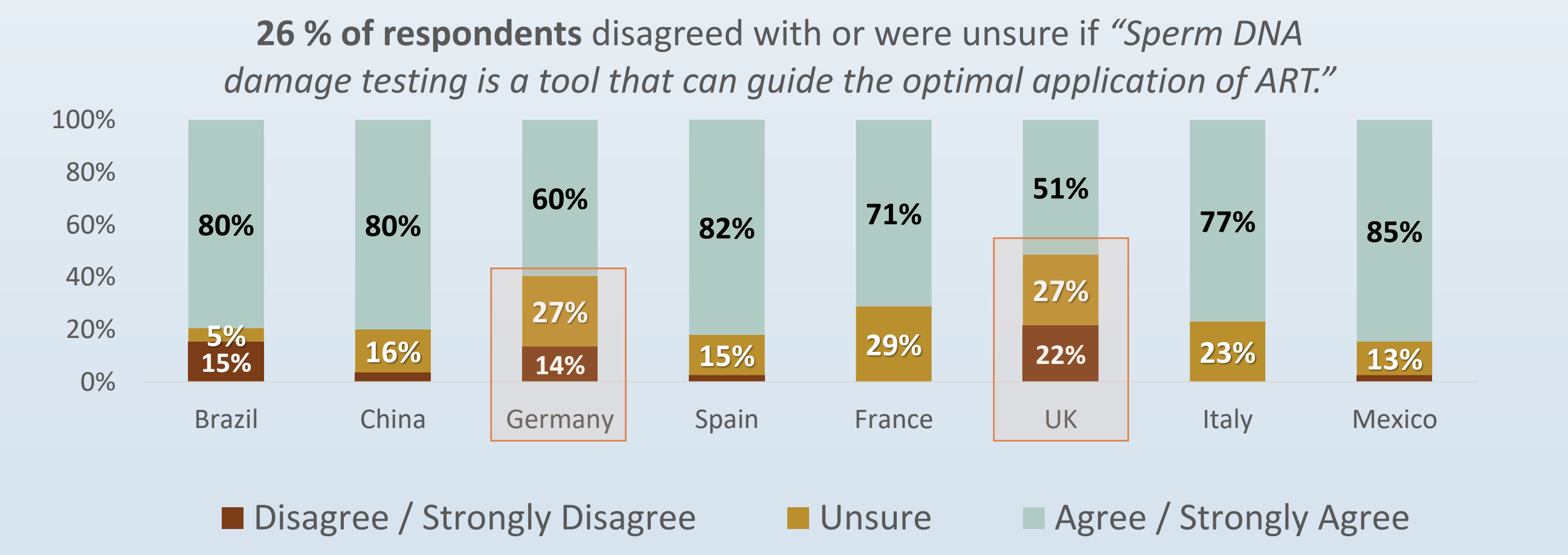
* PHYS: Reproductive medicine specialists, endocrinologists, OBGYN, Reproductive urologists or andrologists involved in AHR
 ** LAB: Microbiologists, biologists, embryologists involved in the manipulation of gametes or embryos for the purpose of AHR

Results - Underlying Challenges and Barriers:



Doubts about the value of sperm DNA damage testing, perception that performing this type of diagnosis is complex

“...you can see the percentage of spermatozooids with chromosomal alterations [...] but you won't be able to use any of it. It just doesn't make sense to get genetic tests when it comes to sperm.”
 – Laboratory Specialist, Brazil

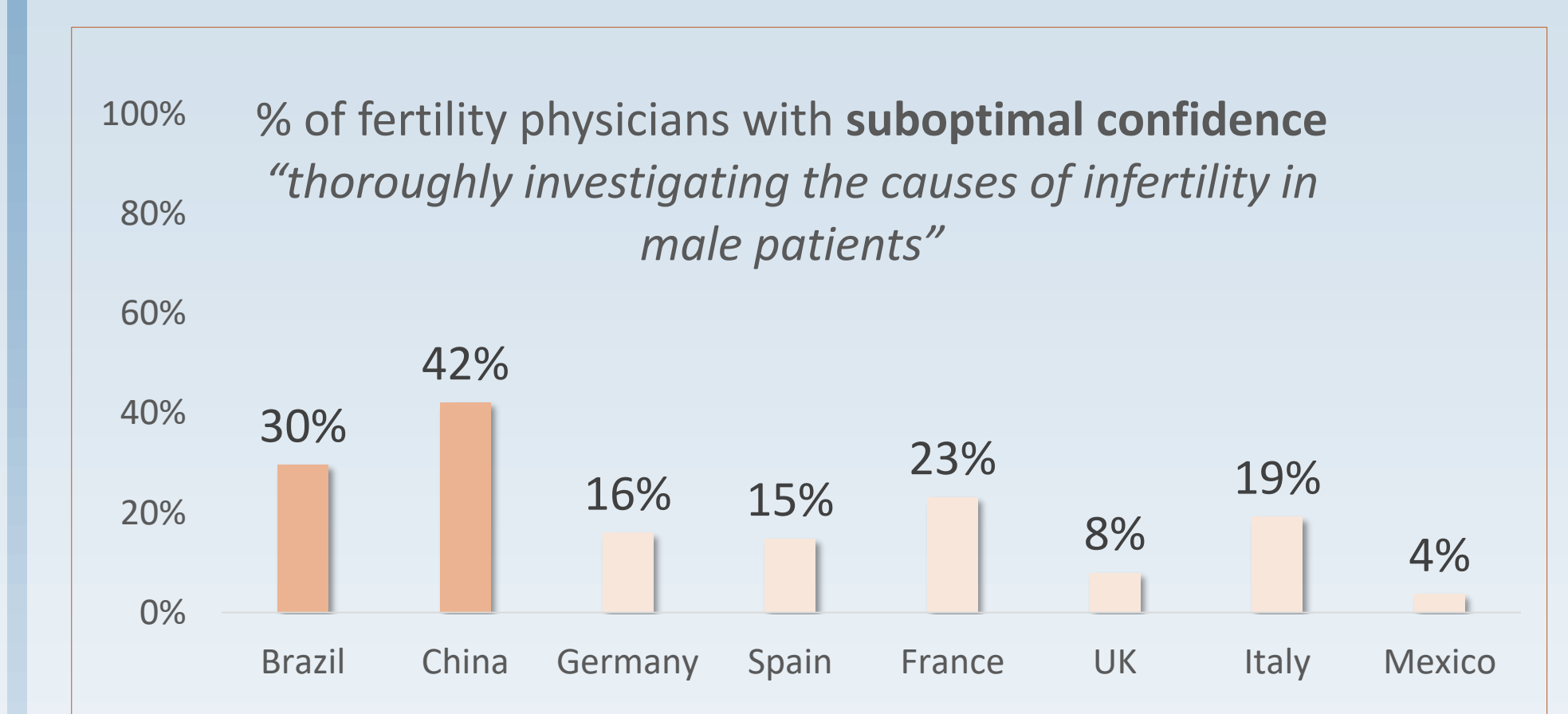


Attitudes such as the belief that “males are rarely the cause of infertility” were barriers to investigating male-related factors:

“My gynaecologist had not taken it very seriously either because we already had one child [...] Even my husband's urologist said he cannot imagine. You already have one child...”
 – Female patient, Germany

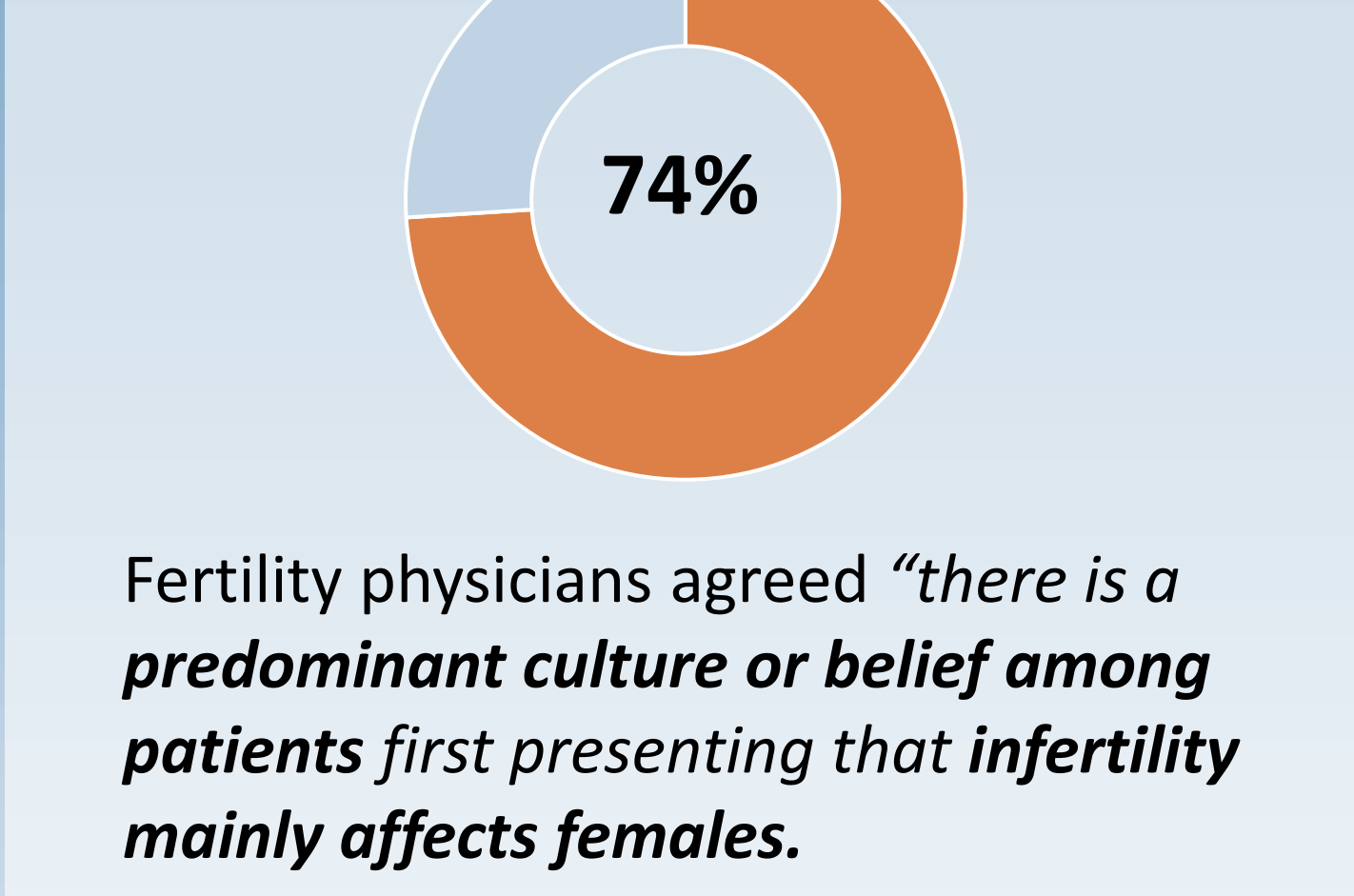
“Twenty years ago, we had very rigid protocols. Currently we do fewer tests, mainly because the main factor causing infertility is the patient's age.”
 – Fertility Specialist, Spain

Confidence gap to thoroughly investigate male infertility



Sub optimal: participants responded using a 5-point scale where ratings of 1=not very confident, 2=slightly confident or 3=somewhat confident are considered “sub optimal”, and 4=confident or 5=very confident was considered “optimal”

Attitudes:



Disclosure

This project was supported by educational research funds from Merck KGaA, Darmstadt, Germany

Conclusions

- Knowledge, skills, confidence, attitude gaps hinder the **investigation of male-related factors of infertility in couples seeking fertility care**
- Gaps can lead to inappropriate treatment plans, may have **negative consequences on the health and clinical outcomes of couples**
- Findings can be used to **inform appropriate CME and CPD activities** for HCPs in reproductive medicine **to bridge current gaps in fertility care**

Acknowledgements

Fertility Europe supported interpretation of patient-related findings; Olivier Jacob (AXDEV Group) supported participant recruitment and other project-related logistics. Morgan Peniuta (AXDEV Group) supported development of this poster.