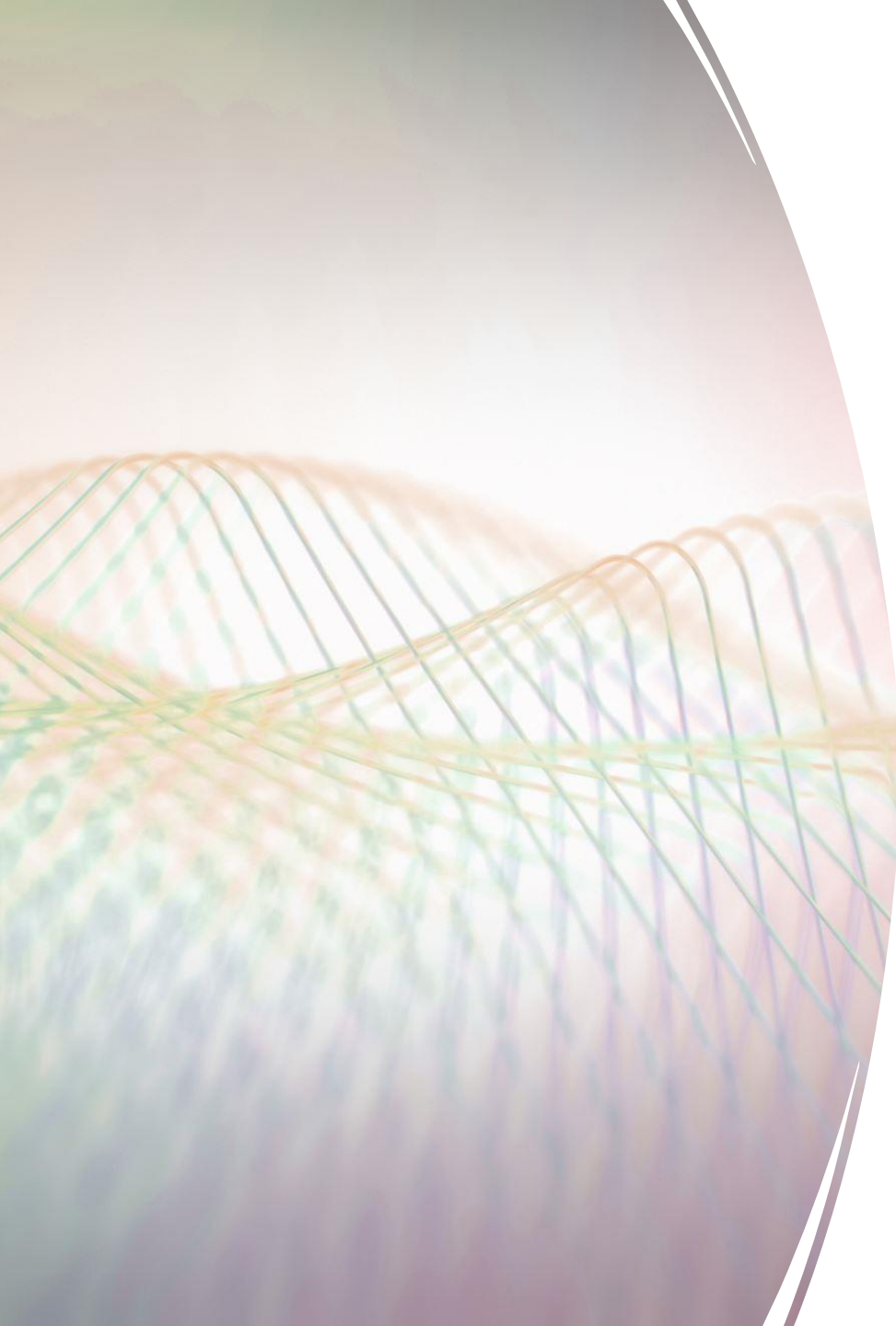




FACTORS AFFECTING NEW PATIENT CONVERSION TO IVF TREATMENT IN ART FERTILITY CLINICS- AHMEDABAD

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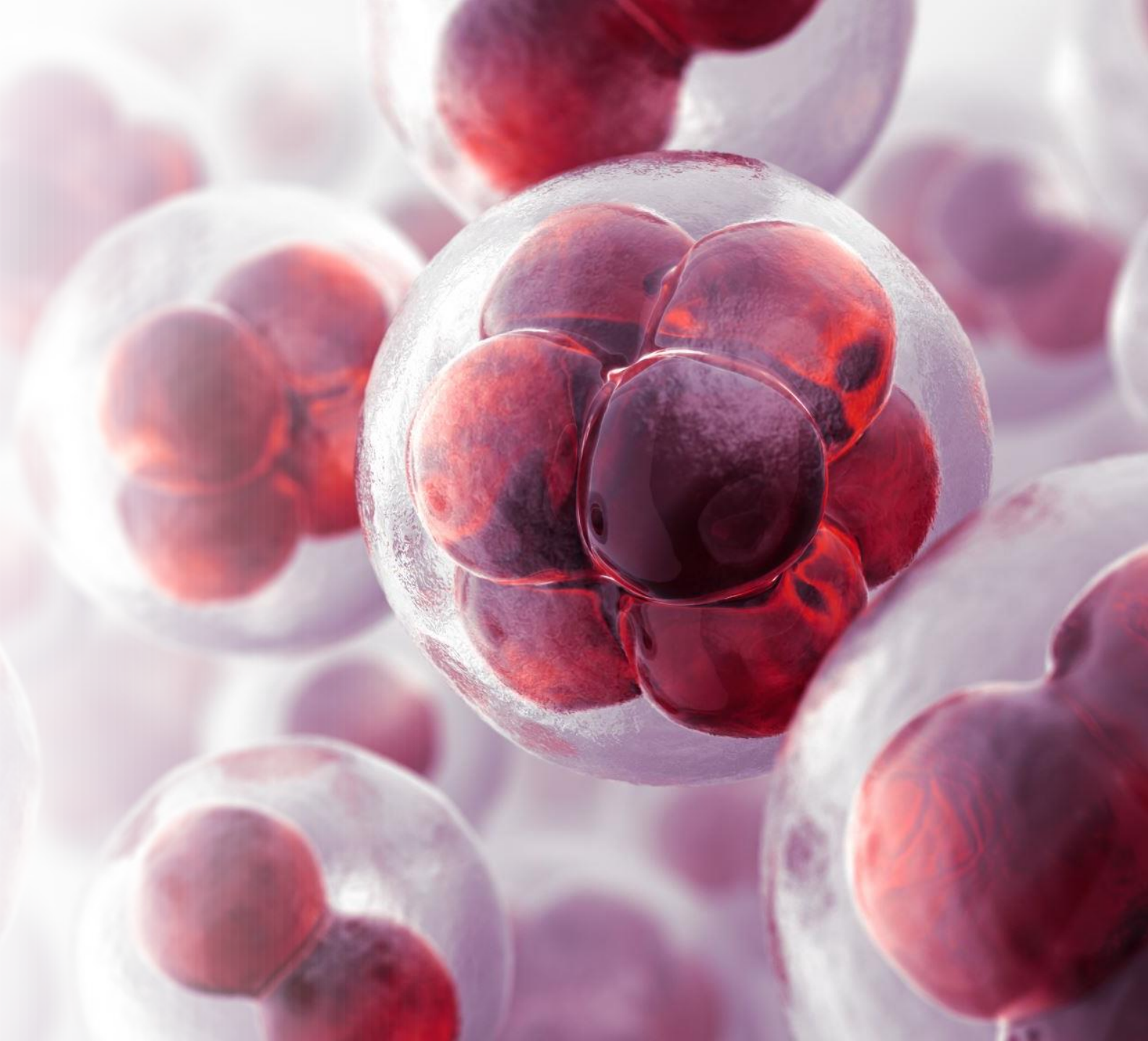


About the organization

- ART Fertility Clinics originated as an extension of IVI RMA Global in 2015 under the name IVI Middle East.
- They have clinics in UAE & India. In India they have 6 centres located in - Mumbai, Gurugram, Hyderabad, Chennai, Delhi & Ahemdabad.They have plans to open 12 more clinics by the end of 2022.
- ART Fertility Clinics is known for its clinical excellence, highest success rates, and advanced technology in delivering fertility treatments. They offer a wide range of services in Reproductive Medicine, including Assisted Reproductive Technologies (ART) such as in vitro fertilization (IVF) and other specialized procedures. Their clinics provide state-of-the-art infrastructure and follow rigorous processes, protocols, and policies to ensure the best outcomes for patients. Additionally, ART Fertility Clinics are actively involved in proprietary research and advancements in the field of reproductive medicine, contributing to global knowledge and innovation.

Introduction

Infertility is a widespread medical condition that affects millions of couples worldwide. It is defined as the inability to conceive a child after a significant period of unprotected intercourse. Infertility can have various causes, including reproductive system disorders, hormonal imbalances, genetic factors, age-related factors, lifestyle choices, and environmental influences



- The conversion of a new patient to IVF treatment is a complex process influenced by a multitude of factors. Understanding these factors is crucial for healthcare professionals, fertility clinics, and policymakers to provide optimal care and support to individuals seeking IVF treatment.
- By delving deeper into the factors influencing new patient conversion to IVF treatment, healthcare professionals and fertility clinics can tailor their services, address patients' concerns, and enhance the overall experience for individuals and couples seeking fertility assistance.

Aim & Objective

AIM: The aim of this study is to find out how new patients are chosen for IVF treatment and to analyse various factors that may affect the decision to move forward with the treatment.

OBJECTIVE:

1. To study the process of identifying new patient to IVF treatment.
2. To determine the factors that influences the decision making of the couple.

Methodology



Study Design

Observational Cross
Sectional study design.



Sampling Technique

Purposive Sampling



Sample Size

163 Patients



Study Population

All the patients visiting
the clinic

Data Collection Procedure

Data Collection:

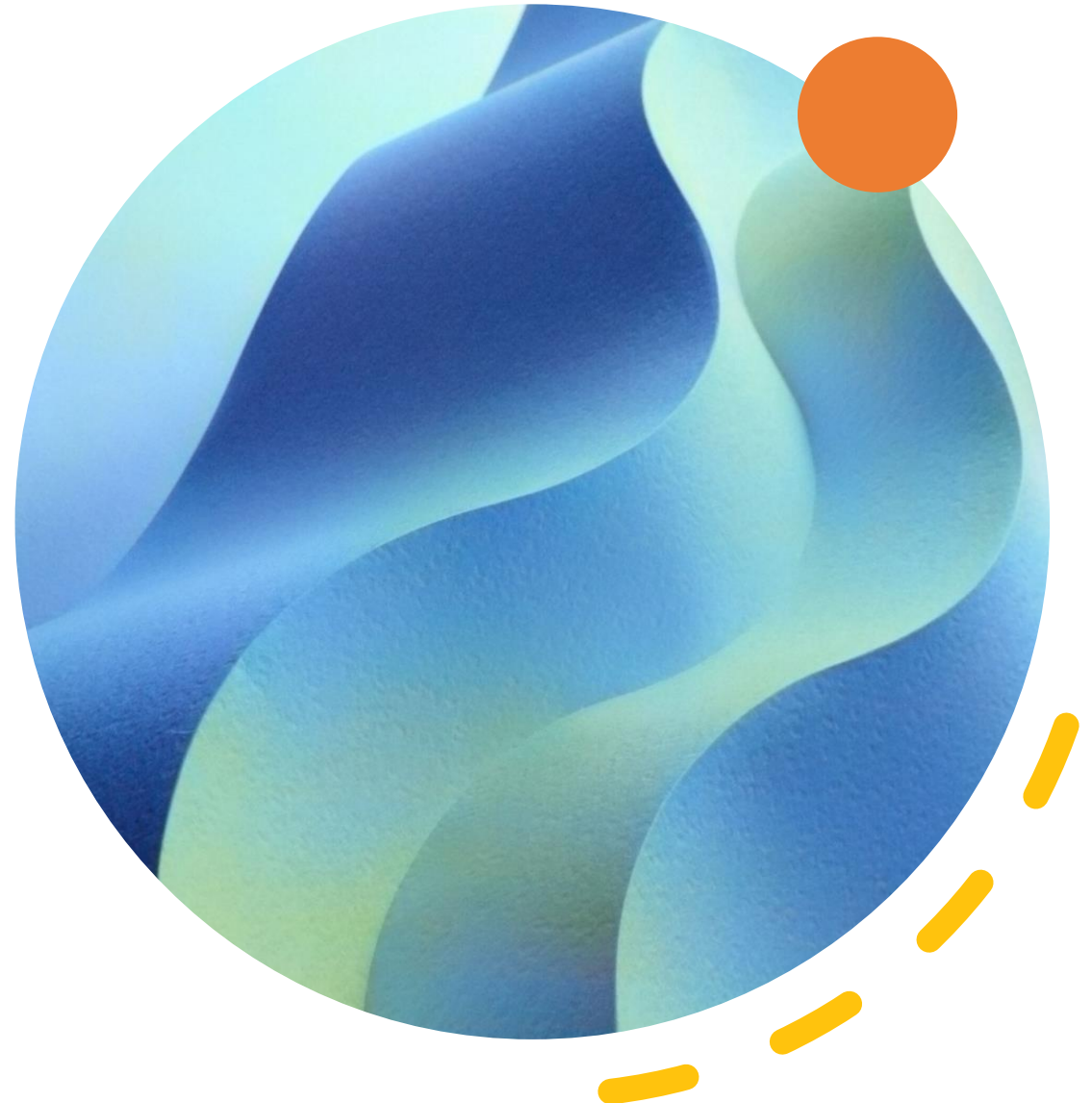
- Vrepro (HMS) system of the clinic was used to collect the data.
- The data included information on the total number of patients visiting the clinic and the number of patients opting for IVF treatment.

Categorization of Patients:

- Patients were categorized based on their advised treatment plan.
- The categorization was done using MS-Excel for analysis purposes.

Factors for Decision-Making Analysis:

- Patient interviews were conducted to gather information on factors influencing their decision-making process.
- Demographic details, such as age, income, marital status, family involvement were considered as factors.
- Parameters like unexplained infertility, male factor, female factor, and genetic factors were also taken into account.



Results

Process flow of identifying IVF patient in the clinic



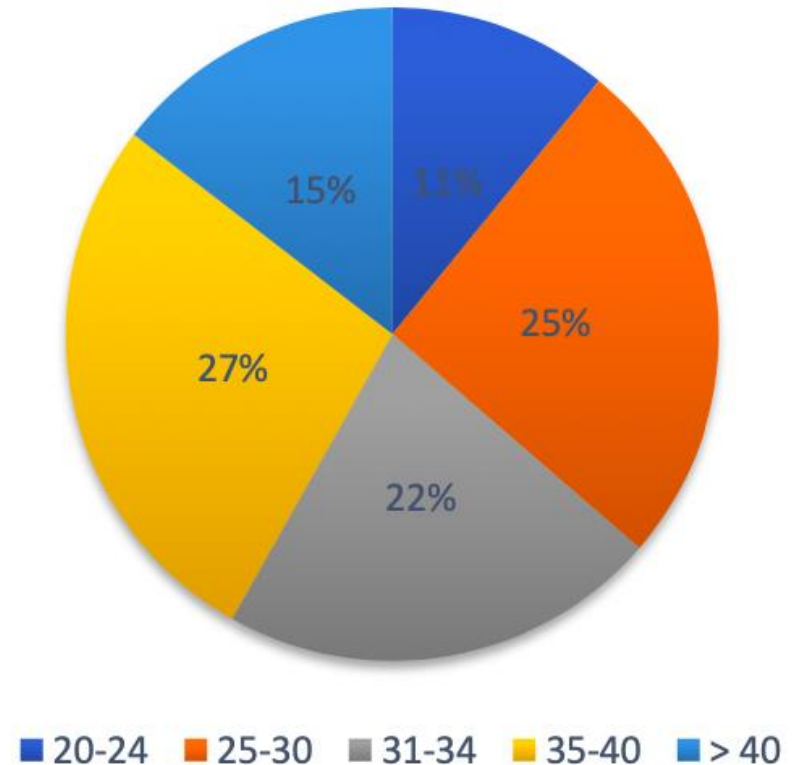
Steps of identifying IVF patient in a clinic

1. New Patient Evaluation:
 - Initial consultation and medical history assessment
 - Diagnostic tests and investigations
2. Classification of Patients:
 - Patients are categorized as gynecological patients or potential IVF patients based on evaluation results
3. IVF Patient Classification:
 - a) IVF Taking Patient:
 - b) Think and Decide:
4. IVF Taking Patient are identified from factors such as:
 1. Unexplained infertility
 2. Female factor infertility
 3. Male factor infertility
 4. Genetic factors
 5. Clinical indications
5. Ovarian Stimulation and Monitoring:
 - Stimulation injection for 9-10 days
6. Egg Retrieval:
 - Surgical procedure to retrieve mature eggs from the ovaries
7. Fertilization and Embryo Development:
 - Fertilization of eggs with sperm in a laboratory setting
 - Monitoring of embryo development
8. Embryo Transfer:
 - Placement of developed embryos into the uterus
 - Careful monitoring and support during the implantation period
9. Post-Treatment Care:
 - Ongoing monitoring for early pregnancy signs

Patient taking IVF treatment are classified according to the age group:

1. 20-24 years: 11% of patients
2. 25-29 years: 25% of patients
3. 30-34 years: 22% of patients
4. 35-39 years: 27% of patients
5. 40 years and above: 15% of patients

Pateint classification



Distribution of patient taking IVF treatment according to age group

Distribution
of identifying
patient taking
IVF
treatment
according to
5 major
factors

Unexplained Infertility

Female Factor

Male Factor

Genetic Factor

Clinical indication

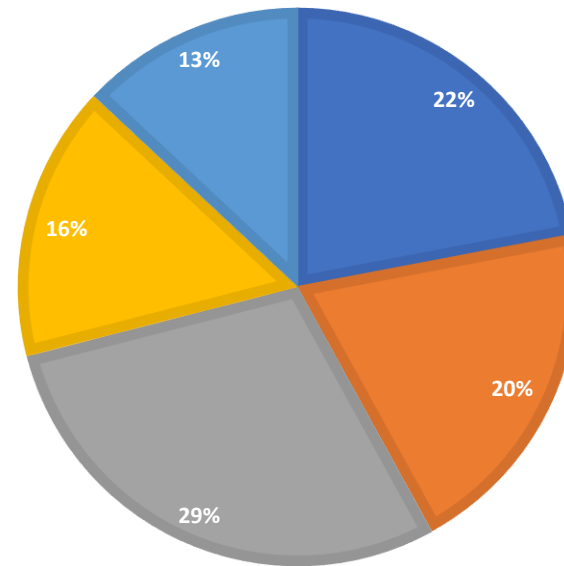
Patient taking IVF treatment are classified according to Major factors

Factors:

1. Unexplained Infertility: 22%
2. Female Factor: 29%
3. Male Factor: 20%
4. Genetic factor: 16%
5. Clinical Indications: 13%

TOTAL PERCENTAGE OF DIFFERENT FACTORS

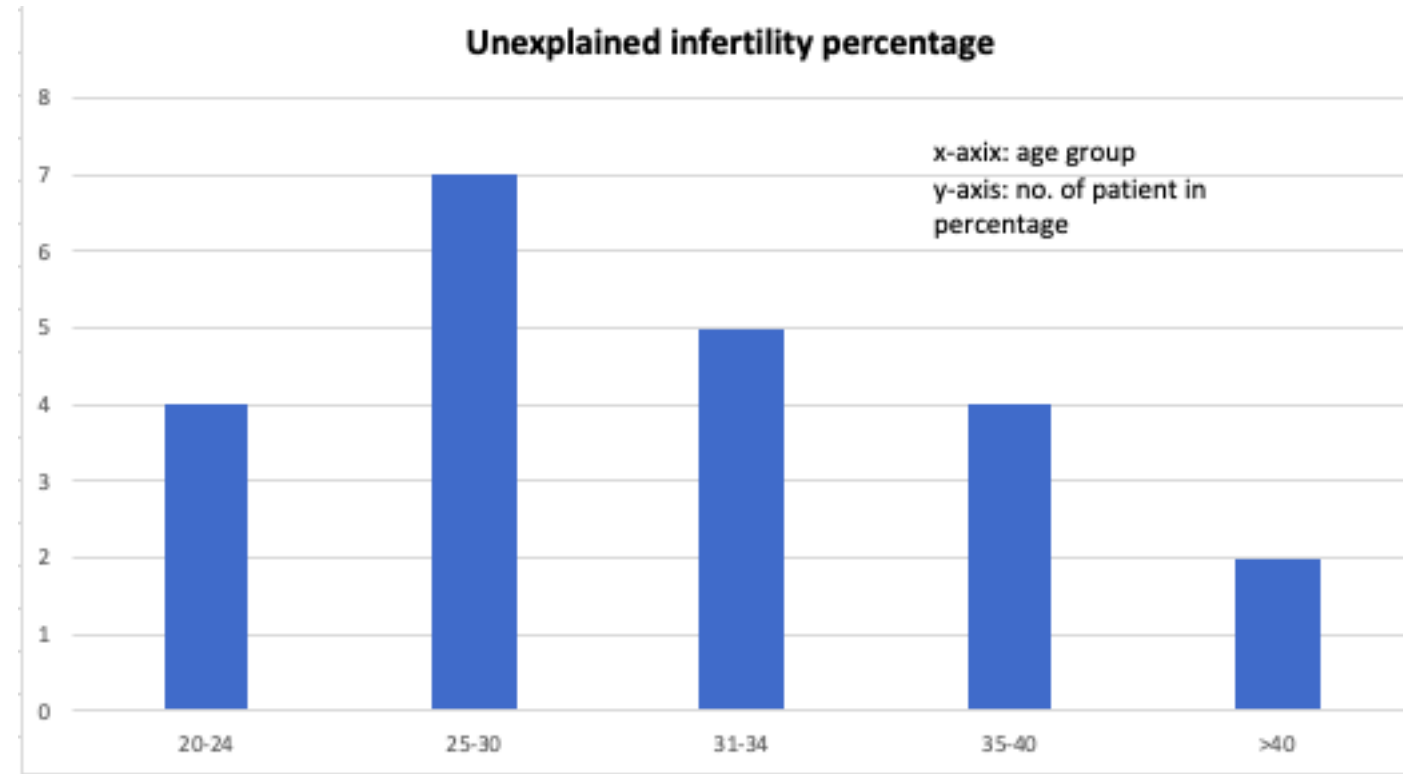
■ Unexplained Infertility ■ Male Factor ■ Female Factor ■ Genetic Factor ■ Clinical Indicator



Distribution of patient taking IVF treatment according to factors

Factor 1: Unexplained Infertility

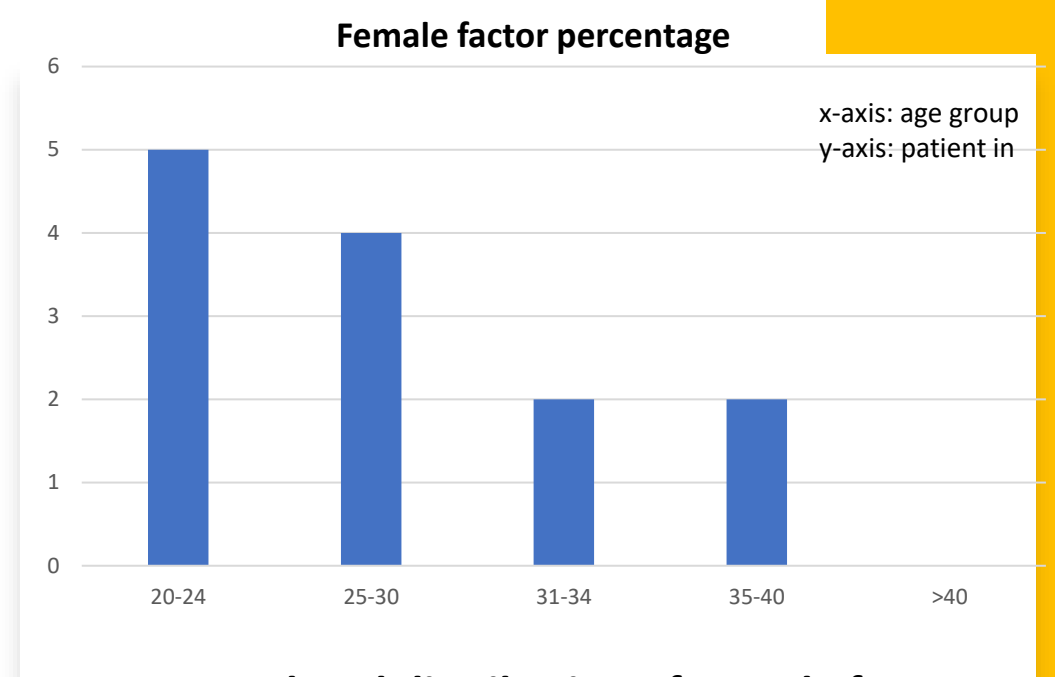
The majority of individuals with unexplained infertility who went for IVF treatment were between the ages of 25 and 30, followed by 31-34 and 35-40. The number was lowest in the over-40 age group.



Age related distribution of unexplained infertility

Factor 2: Female factor

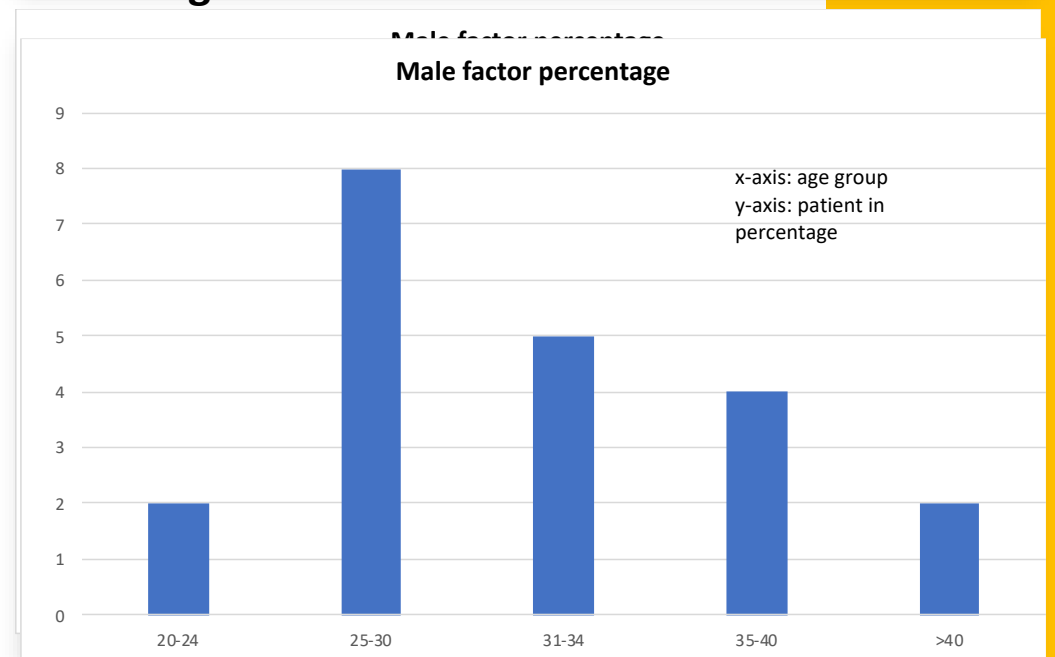
Female factor for infertility: The age group 35-40 had the most cases, followed by the age group beyond 40.



Age related distribution of Female factor

Factor 3: Male factor

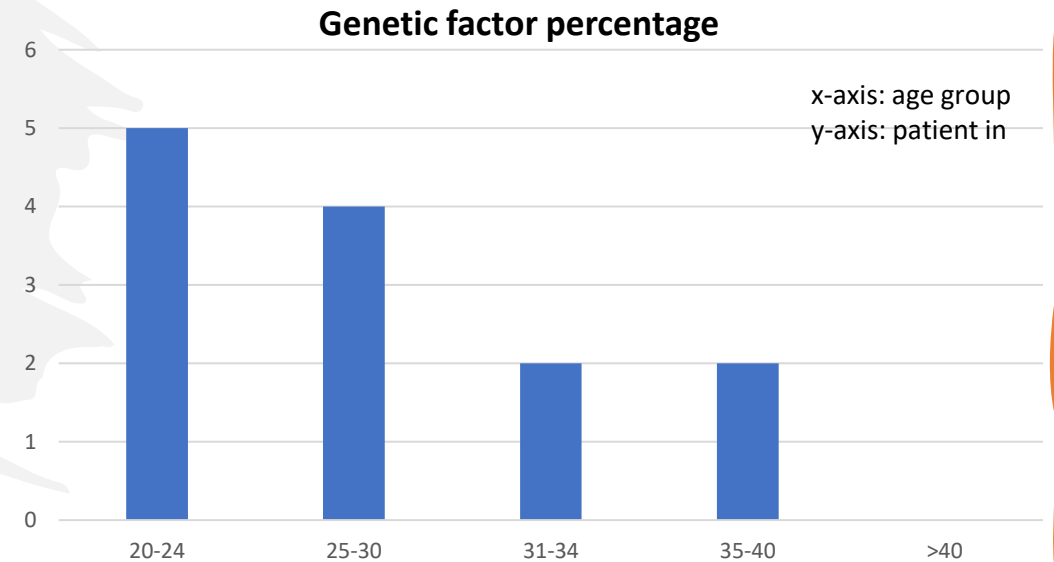
Male factor for infertility: Patients aged 25-30 had the highest number of cases, followed by those aged 31-34



Age related distribution of Male factor

Factor 4: Genetic Factor

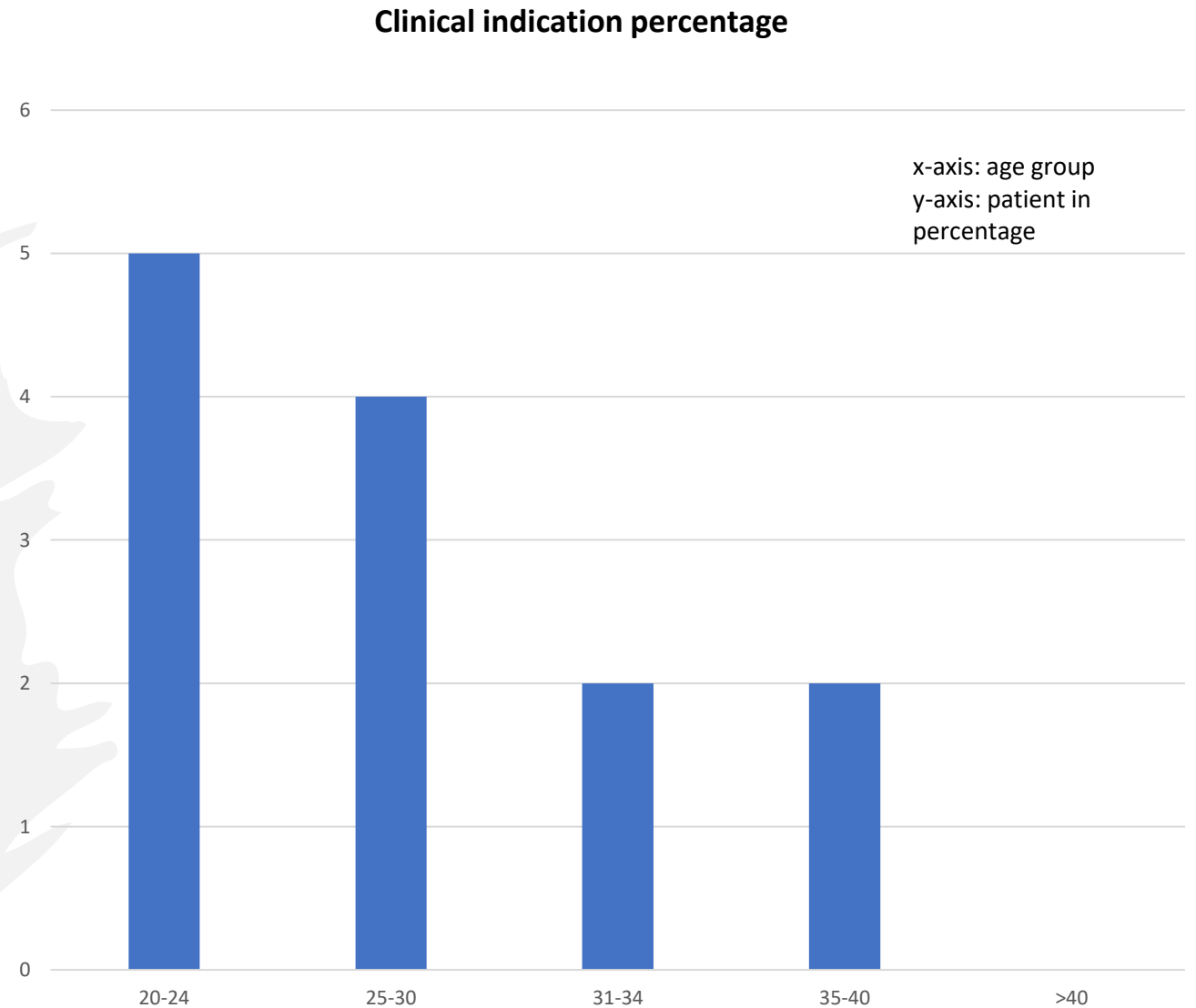
The higher number of instances of genetic factors in patients aged 35-40 can be attributed to the natural aging process and the increased likelihood of chromosomal abnormalities. As individuals age, the quality of their eggs and sperm may decline, leading to an increased risk of genetic abnormalities in embryos.



Age related distribution of Genetic factor

Factor 5: Clinical Indications

Patients aged 20-24 were the most likely to be advised for IVF, followed by those aged 25-30. Patients aged 31-34 and 35-40 had similar statistics, whereas patients above 40 were not encouraged to do IVF.



Distribution of patient according to decision making factors

	Patient to seek care(n=55)		Patient to return for care(n=108)	
	Enhancing driver	Non-Enhancing driver	Enhancing driver	Non-Enhancing driver
Age	45%	10%	35%	15%
Location	12%	5%	6%	10%
Income	5%	25%	3%	27%
Family member	5%	3%	14%	5%
Marital status	23%	2%	11%	1%
None of the above	10%	15%	31%	42%

Conclusion

- The data confirms that age, specifically in the late 20s to mid-30s with a peak in the 35-39 age group, plays a significant role in seeking and returning for IVF treatment.
- Female factor infertility is the most prevalent, followed by male factor infertility and unexplained infertility, aligning with existing research.
- Genetic factors and clinical indications emphasize the complexity of infertility cases and the need for specialized care.
- Other factors such as location, income, family member involvement, and marital status also show varying degrees of influence on patient decision-making.

Recommendation

Increase Patient Awareness

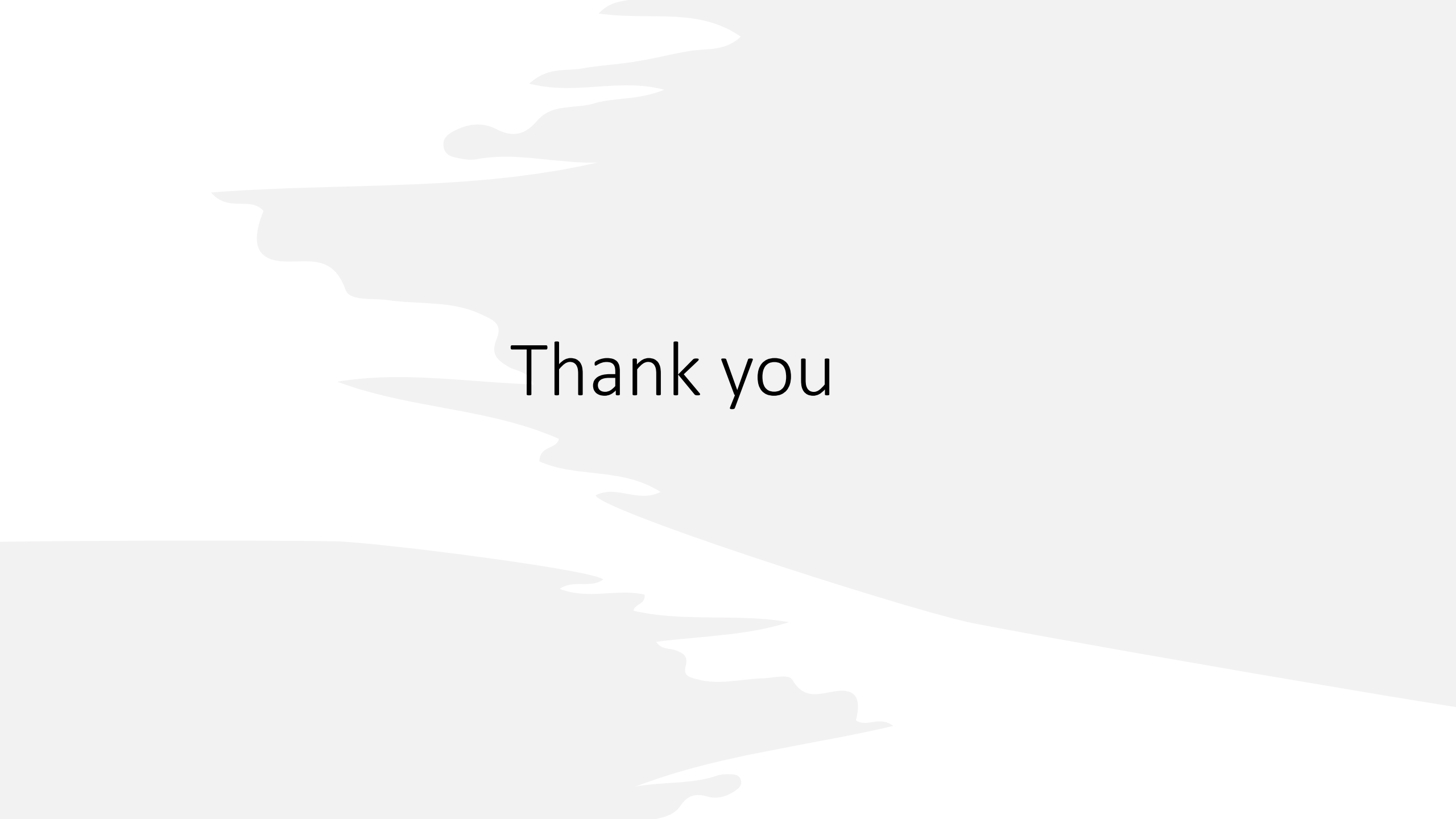
Counselling and follow-up techniques should be tailored

Create a systematic follow-up strategy for patients who have been advised to undergo treatment for IVF but have yet to do so.

Maintain Menstrual cycle data

Provide financial assistance option

Enhance patient education and counselling



Thank you