



JANUARY 2022



## President's Greeting

**Divya K. Shah, M.D., M.M.E.**  
*President 2021-22*

Dear P.A.R.E.S. members,

Hope this newsletter finds you well.

While we were initially optimistic that the high vaccination rates in the Philadelphia region would enable us to resume in person meetings in early 2022, the ongoing rise in caseloads and the omicron variant have required us to reconsider. We have therefore made the difficult decision to convert the January and March 2022 meetings to a virtual format. While we are certainly disappointed that we will miss the opportunity to gather as a group, we think this is a necessary precaution based on the information that we currently have.

In January 2022, we are excited to welcome Elizabeth Ginsburg, M.D., Medical Director of ART and Professor of Obstetrics, Gynecology and Reproductive Biology at Brigham and Women's Hospital/Harvard Medical School, who will speak to us about PGT-A outcomes in poor responder patients. We will wrap up in March 2022 with Amy Sparks, Ph.D., Past President of SART and Laboratory Director at the University of Iowa who will discuss the complexity of measuring ART outcomes and update us on both the challenges and future capabilities of the SART Clinic Outcome Reporting System (SART CORS) platform.

As always, we look forward to awarding our annual Luigi Mastroianni Prize to a local student, resident, or REI fellow at our final meeting in March 2022. The Mastroianni Award is a funded award that rewards the research efforts of a promising trainee and encourages further research and publications.

Hope everyone has a safe and happy holiday season.

Sincerely,  
Divya K. Shah, MD, MME  
President, 2021-2022

## January Meeting

**Thursday,  
January 27, 2022  
Program 7PM**

*PGT-A Outcomes in  
Poor Responders*

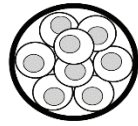
## Join Zoom Meeting

**Elizabeth S. Ginsburg, M.D.**

*Medical Director, Assisted Reproductive Technologies  
Professor of Obstetrics, Gynecology  
and Reproductive Biology  
Brigham and Women's Hospital*

*Harvard Medical School*

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- President's Greeting
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  - Meeting invitation for Jan 27
  - Call For Papers
  - ASRM Update
  - Meeting schedule for remainder of year
  - Meet the Board



**P.A.R.E.S.**  
Philadelphia Area Reproductive Endocrine Society

*You are cordially invited to*  
**PGT-A Outcomes in Poor Responders**



**Elizabeth S. Ginsburg, M.D.**  
**Medical Director, Assisted Reproductive Technologies**  
**Professor of Obstetrics, Gynecology and Reproductive Biology**  
**Brigham and Women's Hospital/Harvard Medical School**

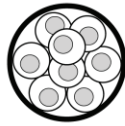
**Thursday, January 27, 2022, Program 7:00 p.m.**

Topic: PGT Outcomes in Poor Responders  
Time: Jan 27, 2022 07:00 PM Eastern Time (US and Canada)

Join Zoom Meeting  
<https://us02web.zoom.us/j/89322878252?pwd=NGd1YVFyTE16UkdWTk9sbDZlTzhjdz09>

Meeting ID: 893 2287 8252  
Passcode: 294547  
One tap mobile  
+13126266799,,89322878252#,,, \*294547# US (Chicago)  
+16465588656,,89322878252#,,, \*294547# US (New York)

Dial by your location  
+1 312 626 6799 US (Chicago)  
+1 646 558 8656 US (New York)  
+1 301 715 8592 US (Washington DC)  
+1 346 248 7799 US (Houston)  
+1 669 900 9128 US (San Jose)  
+1 253 215 8782 US (Tacoma)  
Meeting ID: 893 2287 8252  
Passcode: 294547  
Find your local number: <https://us02web.zoom.us/j/89322878252?pwd=NGd1YVFyTE16UkdWTk9sbDZlTzhjdz09>



**P.A.R.E.S.**  
Philadelphia Area Reproductive Endocrine Society

## ***CALL FOR PAPERS***

### ***PARES RESEARCH AWARD***

The Luigi Mastroianni Research Award was established by P.A.R.E.S. to recognize excellence in research in the discipline of reproductive endocrinology. The award is open to all current medical students, obstetrics and gynecology residents and reproductive endocrinology fellows in programs associated with the Philadelphia Reproductive Endocrine Society. Original research manuscripts not published prior to January 15, 2022 will be accepted for review. The medical student, resident or fellow must be the first author of the paper. It is expected that the medical student, resident or fellow will have primary responsibility for the literature review, implementation of the study and final drafting of the discussion section. Review articles will not be accepted. Papers should be written in a scientific format to include title, authors, institution, abstract, introduction, materials and methods, results, and discussion and should confirm with the instructions for the American Journal of Obstetrics and Gynecology. *Two copies should be submitted. Both should be saved under the article's title. One copy should have all institution and author information removed.* The award and the stipend will be announced in April, 2022.

**Manuscripts must be received no later than April 1, 2022 to allow adequate time for review. Any manuscripts received after April 1, 2022 are ineligible for consideration.**

*Divya Shah, M.D., President*

Manuscripts should be submitted to:

**pares.office@yahoo.com**

# ASRM Update

## UPDATE No. 19 – Awareness of Complexity in Uncertain Times

UPDATE No. 19 – Awareness of Complexity in Uncertain Times

Dec 17, 2021

By: ASRM

Origin: ASRM COVID-19 Task Force Update

### **Epidemiology**

- The COVID-19 pandemic in the US has been severe with nearly 50 million cases and 800,000 deaths since 2020. Among women who are pregnant, there have been 150,000 cases and 248 deaths.<sup>1</sup>
- The newest COVID-19 variant, Omicron (B.1.1529), was first identified in November 2021. As of mid-December, the omicron variant has spread to 63 countries with cases confirmed in 28 US states. Information about transmissibility and severity with Omicron continues to emerge but the new variant appears to be highly transmissible.
- At this time, the delta variant is still 99% of circulating COVID-19 virus in the US with more than 118,000 new cases reported daily and increasing infection rates over the past several weeks.

### **Erosion of the American Healthcare System**

- An unanticipated consequence of the ongoing pandemic is a shrinking pool of healthcare providers and the adverse impact on the mental health of healthcare workers. COVID-19 hospitalizations remain primarily among the unvaccinated.
- Operating rooms are going unused, and the impact is borne by patients whose surgical treatment is being delayed.

### **Surgery in infertility patients**

- Due to increases in COVID-19 admissions, or in some cases, limited resources, many hospitals are reducing non-essential elective cases.
- Delays in surgical treatment may lead to further downstream delay in access or pursuit to fertility treatment.
- Procedures being done in reproductive-aged women for infertility, pain or bleeding should not be considered elective and are essential and in accordance with the recommendations provided by a joint statement of the major gynecologic societies.<sup>2</sup>
- Cumulative delays in care may mean the difference between success and failure in patients with diminished ovarian reserve.

# ASRM Update

## UPDATE No. 19 – Awareness of Complexity in Uncertain Times

### **Prevention: COVID-19 Vaccination**

- COVID-19 vaccination is safe and highly effective at preventing infection and severe outcomes of COVID-19 infection, including death. Vaccination continues to be highly recommended by ASRM, ACOG, SMFM, and CDC for all persons who are pregnant or considering pregnancy.
- As of December 17, 2021, the Advisory Committee on Immunization Practices (ACIP) made a new recommendation to favor mRNA vaccines over Johnson & Johnson vaccines.<sup>3</sup>
- The latest numbers show 61% of the US population and only 35% of pregnant persons are fully vaccinated against COVID-19.<sup>4</sup> A total of 27% of adults have received a vaccine booster dose.
- Pregnancy is a well-recognized risk factor for severe maternal and neonatal COVID-19 infection outcomes. Providers are encouraged to continue to recommend COVID-19 vaccination, and boosters, and to discuss directly any concerns that patients and partners may have regarding vaccination.
- COVID-19 booster doses (6 months after a completed mRNA series or 2 months after a Johnson & Johnson vaccine) are now recommended for all adults.<sup>5</sup> Emerging data suggest the 3rd dose of an mRNA vaccine increases neutralizing antibody levels against the Omicron variant. CDC recommends receiving a booster dose with any of the COVID-19 vaccines authorized in the US: Pfizer/BioNTech, Moderna or Johnson & Johnson.<sup>5</sup> Some studies suggest an mRNA booster is beneficial for people who received the Johnson & Johnson vaccine.
- Vaccines and boosters not only protect the individual and those around them, but also are one of the best ways to prevent viral mutation and the evolution of new and potentially more contagious variants.
- In light of the new Omicron variant, we ask that every member of the ASRM community (doctors, patients, lab personal and staff) continue to adhere to COVID-19 mitigation strategies, including masking, physical distancing, hand hygiene, cleaning /disinfection, and respiratory etiquette). These proven mitigation strategies are effective. For more information, please review these CDC guidelines.<sup>6</sup>

### **Treatment: Monoclonal antibodies and oral antiviral therapy**

- Prevention of COVID-19 with vaccination is preferable to any COVID-19 treatment option.
- When administered early in adults with mild-moderate COVID-19 infection, monoclonal antibodies have up to 80% efficacy in preventing hospitalization and severe outcomes. Several small studies have shown safety with the administration of COVID-19 monoclonal antibody therapy in pregnancy. A number of monoclonal antibodies are currently available for IV and SQ administration in the outpatient setting. Studies are ongoing to test whether the efficacy of monoclonal antibody therapy will be maintained following infection with the Omicron variant. Of note, COVID-19 vaccination should not be given within 90 days of treatment with monoclonal antibodies.

# ASRM Update

## UPDATE No. 19 – Awareness of Complexity in Uncertain Times

- There are two new oral antiviral medications with efficacy in clinical trials when administered within 3-5 days of symptom onset. Molnupiravir is a five-day oral regimen that was recently approved by an FDA panel. It interferes with viral replication and has 30% efficacy in preventing disease progression. Safety with administration in pregnancy is not yet clear; ongoing data collected by Merck will assess safety endpoints. Paxlovid (nirmatrelvir/ritonavir) also has promising efficacy in early treatment studies to date, but is not yet available for use, and safety in pregnancy not available.

### REFERENCES

1. CDC COVID Data Tracker: Pregnancy Outcomes Data: <https://covid.cdc.gov/covid-data-tracker/#pregnant-population>
2. Joint Society Statement on Re-Introduction of Surgical Procedures in the Setting of Covid-19: <https://www.sgsonline.org/joint-statement-on-re-introduction-of-hospital-and-office-based-procedures-in-the-covid-19-climate>.
3. CDC Updated COVID-19 vaccine recommendations: <https://www.cdc.gov/media/releases/2021/s1216-covid-19-vaccines.html>
4. CDC Vaccine Safety Datalink - Vaccination Coverage in Pregnancy: <https://covid.cdc.gov/covid-data-tracker/#vaccinations-pregnant-women>
5. CDC Vaccine Booster Guidance: [https://www.cdc.gov/coronavirus/2019-ncov/vaccines/booster-shot.html?s\\_cid=11706:cdc%20covid%20booster%20dose:sem.ga:p:RG:GM:gen:PTN:FY22](https://www.cdc.gov/coronavirus/2019-ncov/vaccines/booster-shot.html?s_cid=11706:cdc%20covid%20booster%20dose:sem.ga:p:RG:GM:gen:PTN:FY22)
6. CDC Guideline – Mitigation Measures: <https://www.cdc.gov/coronavirus/2019-ncov/global-covid-19/global-urban-areas.html#:~:text=>

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*The ASRM Coronavirus/COVID-19 Task Force members are Amanda Adeleye, MD, Natan Bar-Chama MD, Marcelle Cedars MD, Christos Coutifaris MD, PhD, Mark Cozzi MBA, Jodie Dionne-Odom MD, Kevin Doody MD, Eve Feinberg MD, Elizabeth Hern MBA, Jennifer Kawwass MD, Sigal Klipstein MD, Paul Lin MD, Anne Malave PhD, Alan Penzias MD, John Petrozza MD, Samantha Pfeifer MD, Catherine Racowsky PhD, Enriquet Schisterman PhD, James Segars MD, Peter Schlegel MD, Hugh Taylor MD, and Shane Zozula BS.*

*This guidance document was developed under the direction of the COVID-19 Task Force of the American Society for Reproductive Medicine. These recommendations are being provided as a service to ASRM members, other practicing clinicians, and to the patients they care for, during the coronavirus pandemic. While this document reflects the views of members of the Task Force, it is not intended to be the only approved standard of practice or to dictate an exclusive course of treatment. Clinicians should always use their best clinical judgment in determining a course of action and be guided by the needs of the individual patient, available resources, and institutional or clinical practice limitations. The Executive Committee of the American Society for Reproductive Medicine has approved this guidance document.*

### For more information on these press releases, contact:

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Washington, DC 20003

Tel: (202) 863-2494

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### Contact

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E: [stipton@asrm.org](mailto:stipton@asrm.org)



## 2021-22 Meeting Schedule

### **PGT-A Outcomes in Poor Responders via Zoom**

Thursday, January 27, 2022,



**Elizabeth S. Ginsburg, M.D.**

**Medical Director, Assisted Reproductive Technologies  
Professor of Obstetrics, Gynecology and Reproductive Biology  
Brigham and Women's Hospital/Harvard Medical School**

### **Measuring ART Outcomes – It's Complicated via Zoom**

Thursday, March 3, 2022



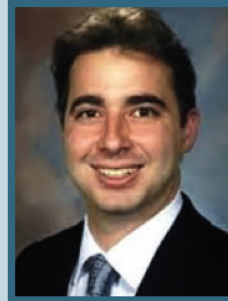
**Amy Sparks, Ph.D.**

**Past President, SART  
Assistant Professor of Obstetrics and Gynecology  
Division of Reproductive Endocrinology and Infertility  
University of Iowa**

# Meet the Board (2021-2022)



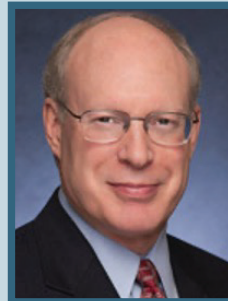
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President



**Oumar Kuzbari, M.D.**  
President-Elect



**Ron Feinberg, M.D., Ph.D.**  
Secretary-Treasurer



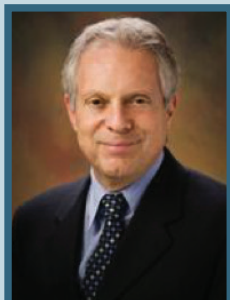
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**Allison Bloom, D.O., M.P.H.**  
Director at Large



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E.L.D., H.C.L.D.**  
Liaison, Delaware Valley  
Reproductive Biologists Group



**Jay Schinfeld, M.D.**  
Immediate Past President