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Title: THE CONSEQUENCE OF SINGLE SESSION PSYCHOLOGICAL COUNSELING AT THE BEGINNING OF FERTILITY TREATMENT ON THE PREGNANCY : A RETROSPECTIVE COHORT STUDY USING COX PROPORTIONAL HAZARDS REGRESSION.

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Background and Aim

This study aimed to examine whether psychological counseling at the beginning of fertility treatment is effective for discontinuation of medically assisted reproduction with successful pregnancy.

Methods

This was a retrospective, cohort study. The sample-size analysis showed total 90 patients. The patients were divided into two groups, one that received a single session of psychological counseling within 3 months of the first visit to the HORAC Grand Front Osaka Clinic (n=33), and one that did not receive such counseling (n=33). The outcome variables were the duration from the first visit to the discontinued day and the duration from the first visit to the last visit for pregnancy or infertility. Survival analyses, such as Kaplan-Meier estimations and Cox proportional hazards models, were conducted.

Results

The results of the Kaplan-Meier estimation confirmed that the treatment continuation rate at 365 days was 96.3% for the counseling group and 74.4% for the non-counseling group, respectively. The results of the Kaplan-Meier estimation of the infertility rate showed the same 89.4% for both groups after 300 days; however, the difference began to widen thereafter. After two years, the infertility rate was 46.7% in the counseling group and 80.4% in the non-counseling group. The pregnancy rate showed that the counseling group was likely to be pregnant after controlling for age and AMH level at the first visit compared to the non-counseling group (Hazard Ratio=3.568, 95% CI: 1.238-10.286, p=.019).

Conclusion

Psychological counseling (focused on reducing stress and psychosomatic symptoms caused by fertility treatment) and self-help skill training received within 3 months of the first visit to a fertility treatment reduced early discontinuation of fertility treatment and improved the pregnancy rate. The effect of psychological counseling on pregnancy rate was observed even when controlling for age and AMH levels at the first visit.