Round Table - Talk Show

COVID-19 and women's health

COVID-19 and stillbirth in Italy

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WHO declared SARS-CoV-2 infection as a pandemic in March 2020. The aim of this study is to compare SB occurrence and its features during pandemic period (March to December 2020) with the ones in the same period, in the previous 6 years, in Emilia Romagna region, Italy.

This study collected SB information by the Surveillance System, active since 2014. Each case was audited in a multidisciplinary meeting to evaluate the causes of SB according to ReCoDe classification, and the quality of care by using CESDI grade (grades 2 and 3 refer to substandard care = different management might/would have made a difference to outcome). SB was defined according to WHO recommendations (≥ 22 weeks or ≥ 500 g when gestational was unknown). The numbers of birth per years were obtained by birth certificates (CedAP).

During pandemic, there were 89 SB out of 25,225 births (3.52/1000) compared with the previous 6 years when SB rate ranged from 3.00 (83/27,625) in 2018 to 3.55 (91/26,493) in 2019. No cases of SB was detected in pregnant women affected by SARS-CoV-2 infection.

Maternal age, years of education, country of origin, gestational weight gain and smoking did not change, while an increased number of SB was recorded in multiparous women (OR 1.62; 95% CI: 1.02-2.55). The proportion of preterm births was not substantially different between pandemic period compared to the previous period (OR 1.34; 95% CI: 0.81-2.23). At multivariate analysis, a higher risk of SB was found in overweight mothers, in those at 22+0-24+6 weeks and in SGA infants.

There were not significant changes in the frequency of SB causes, compared to the previous period, although a trend toward an increase of the placental abruption cases (OR 1.72; 95% CIC 0.96-3.09). Cases with grade 2 or 3 during pandemic was 6%, similar to the reference period (10%). No significantly changes occurred in the number of obstetric evaluations as well as in the number of ultrasounds exams.

Globally, SARS-CoV-2 pandemic did not substantially influence SB incidence and pregnancy care. The pandemic restrictions might have affected the access of women at risk to pregnancy services, especially in the first half of gestation, with subsequent low detection rate of SGA.

COVID-19 and women's health

COVID-19 and menstruation

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Abnormal uterine bleeding (AUB) is a debilitating symptom that affects up to one in three women at some point in their reproductive lives. There are many anecdotal reports of experiencing AUB during the COVID-19 pandemic. This may have a significant negative effect on individual quality of life and have wider negative economic impacts on healthcare services and society.

This session will define typical and problematic menstrual bleeding before exploring the potential association between COVID-19 and AUB, including possible causal mechanisms. Effects of the pandemic, acute COVID-19, Long COVID and COVID-19 vaccination will be addressed. Conversely, the impact of the menstrual cycle on COVID-19 symptoms will be reviewed. The current available evidence will be discussed throughout and gaps in our current knowledge and understanding will be signposted, highlighting specific priority areas for future research.

The aim of the presentation is to provide medical professionals with the evidence base to inform their clinical consultations and empower them to advocate for the inclusion of menstrual symptoms in future research.