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Dear Colleague

DEFERRAL OF FERTILITY TREATMENT FOR PATIENTS WHO ARE NOT VACCINATED AGAINST COVID-19 - REVIEW

You will recall that I wrote to you on 7 January 2022 (SGHD/CMO(2022)1) setting out my recommendation for the temporary deferral of NHS fertility treatment for patients who are not fully vaccinated against COVID-19. In my letter I advised that the recommendation would be reviewed alongside emerging evidence of risk, as well as the prevailing levels of COVID-19, during January and February 2022. The purpose of the review was to decide for how long this recommendation for temporary deferral should remain in place.

The review is now complete and I am recommending that fertility treatment for unvaccinated patients no longer be deferred.

I recommend that clinicians:

- continue to fully inform patients, prior to their treatment, of the evidence concerning the safety of vaccines in those planning pregnancy, undergoing fertility treatment and the pregnant population in respect of maternal and perinatal outcomes, including evidence for continued vaccine effectiveness against symptomatic COVID-19 disease.
- continue to advise patients at the start of the fertility pathway and at every opportunity thereafter (making every contact count) about the risks of non-vaccination.
- ask patients to sign an informed consent form acknowledging that they are aware of the risks prior to treatment, similar to other aspects of the fertility pathway.

Data from PHS demonstrates that both COVID-19 cases and hospitalisations are stabilising, and a reduced proportion of cases are resulting in hospitalisations, following the emergence of Omicron as the dominant variant. While data specifically on pregnant women is very limited, the available data on unvaccinated individuals suggests that the risk of severe disease requiring hospital or

From the Chief Medical Officer Professor Sir Gregor Smith

4th March 2022

SGHD/CMO(2022)7

Addresses

For action
Chief Executives, NHS Boards
Medical Directors, NHS Boards
Primary Care Leads, NHS Boards
Directors of Nursing & Midwifery,
NHS Boards
Chief Officers of Integration
Authorities
Chief Executives, Local Authorities
Directors of Pharmacy
Directors of Public Health
General Practitioners
Practice Nurses
Immunisation Co-ordinators
Operational Leads

For information
Clinical Directors
Heads of Midw ifery
Obstetric Clinical Directors
Heads of Midw ifery
Board Vaccination coordinators
Chairs, NHS Boards
Infectious Disease Consultants
Consultant Physicians
Chief Executive, Public Health
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critical care admission has reduced over the last four to six weeks.

The <u>JCVI advice on vaccinating pregnant women</u>, namely that pregnant women should now be considered as a clinical risk group and part of priority group 6 within the vaccination programme remains the same and I strongly support the recommendation that people get the vaccine when offered.

The COVID-19 vaccines are safe and effective and there is no evidence to suggest that the COVID-19 vaccines will affect fertility in women or men. More information is available on this at NHS Inform Pregnancy, breastfeeding and the coronavirus vaccine | The coronavirus (COVID-19) vaccine (nhsinform.scot).

I know that the safety of women and babies remains the focus for clinicians providing fertility treatment. Thank you for your continued commitment to this and to providing high quality, compassionate care whilst the impacts of the Covid-19 pandemic are kept under review.

Yours sincerely

Gregor Smith

Professor Sir Gregor Smith Chief Medical Officer





