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P-512 Video-Supported Medication Education for Women Undergoing in Vitro Fertilization (IVF): Quality of Life and Psychosocial Effects

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Study question: Does video-supported medication education in the in vitro fertilization (IVF) process affect psychosocial well-being and quality of life in women?

Summary answer: Video-supported medication education in IVF improves psychosocial well-being by reducing anxiety and increasing social support, but its impact on depression is limited, requiring further refinement.

What is known already: Infertility affects millions globally, causing emotional and psychological distress, especially in women. IVF treatment offers hope but also brings physical and psychosocial challenges, including stress, anxiety, and frequent medical monitoring. Managing these challenges is crucial for better treatment outcomes.

Video-assisted education helps patients understand the process, set expectations, and reduce stress. Studies show it is as effective as traditional methods, with many patients preferring videos over written or verbal instructions. However, research on its impact on IVF patients' quality of life and psychosocial well-being is limited. This study aims to address this gap.

Study design, size, duration: This study is a randomized controlled single-blind trial that began in July 2024. The sample size was calculated using the G*Power (3.1.9.7) program. The calculated sample size consists of 56 participants (28 in the intervention group and 28 in the control group). The data collection process is ongoing and is expected to be completed by May 2025. For the primary outcomes, an analysis has been conducted with 36% of the planned sample.

Participants/materials, setting, methods: Women aged 18-49 undergoing IVF were included, excluding those with psychiatric issues or prior treatments. Participants completed the introductory form and SCREENIVF, STAI, and FertiQol scales before ovulation induction. Both groups received face-to-face medication education, while the experimental group also accessed videos via QR code. After ovulation induction and oocyte aspiration, they completed the scales and satisfaction form. Statistical analyses, including correlation and Chi-square tests, were performed using SPSS.

Main results and the role of chance: In the study, no significant difference was found between the experimental and control groups in scale assessments ($p > 0.05$), which is thought to be due to the ongoing data collection process. According to the subdimensions of the SCREENIVF scale, the experimental group had lower anxiety and helplessness scores and higher social support and acceptance scores. However, given that the experimental group initially had higher depression scores, their depression scores remained higher than those of the control group even after the intervention.

In quality of life assessments, the experimental group had higher scores than the control group. A significant reduction in state anxiety levels was observed among women who completed the video education program. Correlation analyses revealed a negative relationship between anxiety, helplessness, and depression and quality of life, while social support and acceptance were positively associated with quality of life in the experimental group ($p < 0.05$). In the control group, no significant relationship was found between anxiety and quality of life ($p > 0.05$), whereas social support and acceptance were positively correlated, and helplessness was negatively

correlated with quality of life ($p < 0.05$). Finally, the satisfaction scores of women who completed the video education program were significantly higher than those of the control group ($p < 0.001$).

Limitations, reasons for caution: As data collection is ongoing, the analysis is based on limited data, which may limit generalizability. The study's conduct in a single hospital setting may also affect the findings' applicability to other regions. Additionally, the long-term effectiveness of the video-supported educational program could not be assessed.

Wider implications of the findings: The findings suggest that video education programs can effectively reduce anxiety and enhance social support, ultimately improving quality of life. These results highlight the potential for integrating such programs into psychological interventions, particularly for individuals undergoing stressful treatments. Future research should explore long-term effects and optimize strategies for addressing depression.

Trial registration number: Yes