CoVID-19 in OB/GYN

Between the end of 2019 and the beginning of 2020, a novel coronavirus, named SARS-CoV-2 (Severe Acute Respiratory Syndrome - Coronavirus 2) was identified and correlated to the new emerging viral pneumonia, consequently named CoVID-19 (Coronavirus Disease 2019).

A worldwide public health response has ensued to address the impact of the CoVID-19 pandemic. Unfortunately, the almost exclusive emphasis on high-risk populations, including older people and people with serious underlying medical conditions, resulted in a relative neglect of the specific risks and needs of other populations such as women, when in fact the CoVID-19 pandemic is affecting various areas of health care, including reproductive health.

The pandemic is associated with decreased desire for pregnancy, decreased use of contraception, and increased menstrual disorders. Fertility treatments have been postponed in order to support the healthcare system by avoiding placing it under increased pressure. In addition, an indirect effect of the virus on gametes and embryos during their manipulation cannot be ruled out.

In the field of gynaecologic oncology, from CoVID-19 pandemic outbreak, the highest priority is to achieve the maximum benefit from less demanding procedures. Extensive procedures should be avoided, in order to reduce the in-hospital spread of the virus. Nevertheless, surgery for some gynaecologic pathologies cannot be postponed.

CoVID-19 is associated with a systemic inflammatory response with activation of coagulation in symptomatic patients. The possibility of coagulopathies in peri- and post-menopausal women taking oestrogens makes it necessary to consider antithrombotic strategies.

Due to the physiological changes in the immune and cardiopulmonary systems, pregnant women are more likely to develop severe illness after infection with respiratory viruses. At the beginning of the epidemic, the possibility that CoVID-19 may adversely influence pregnancy was raised and guidelines were issued. More recently, a few systematic reviews have shown that, in most cases, in pregnancies complicated by CoVID-19 infection, foetal and neonatal outcomes appear good, although information gathered so far only include pregnant women infected in their third trimester. Furthermore, pregnancy-related complications appear to vary depending on settings and screening strategies for SARS-CoV-2 identification (universal, based on epidemiological risk, or on symptoms).

The goal of this special issue is to provide additional data, both original articles and comprehensive reviews, about women’s health in CoVID-19 era to develop effective preventive and clinical strategies.

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