



Approximately one in every three couples who suffer from infertility will have a male factor at the cause of their problem. The introduction of ICSI in the early 1990's revolutionised the treatment of male infertility and has offered men with sperm disorders a real opportunity of fathering children.

## Semen analysis

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The most useful test of male infertility is semen analysis. A semen analysis measures the amount of semen a man produces and determines the number and quality of sperm in a semen sample.

A semen analysis is usually one of the first tests done to help determine whether a man has a problem fathering a child. A problem with the semen or sperm affects more than one-third of the couples who seek assisted reproduction services.

Tests undertaken during a semen analysis include:

- **Volume** a measure of how much semen is present in one ejaculation
- **Sperm count** a count of the number of sperm present per milliliter of semen in one ejaculation
- **Sperm morphology** a measure of the percentage of sperm that have a normal shape
- **Sperm motility** a measure of the percentage of sperm that can move forward normally
- The results of these tests are compared against the normal range of values for the different measurements of sperm quality

## Treatment

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The optimum approach to treatment will be decided in consultation with a fertility specialist. Treatment options for male infertility include intrauterine insemination (IUI), in vitro insemination (IVF) with or without sperm microinjection into the egg (ICSI).

## Surgical sperm retrieval

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Surgical sperm retrieval (SSR) is a method of trying to retrieve sperm directly from the testis itself or the epididymis. SSR is generally performed for men who have no sperm in their ejaculated semen or who have a failed vasectomy reversal. It may also be used for spinally injured men and where there are problems with normal ejaculation (e.g. MS or Diabetes).

SSR is normally performed with the benefit of sedation and pain relief, provided by an anaesthetist. The aspirates retrieved are processed by our laboratory team and any motile sperm found are prepared and frozen for future use in an ICSI cycle. The number of sperm is generally small and the motility reduced so ICSI is required to facilitate the best chance of fertilisation with your partner's eggs.