## Study of Effectiveness of Addyzoa in Idiopathic Oligospermia at Hospital Tengku Ampuan Rahimah, Klang

### Izyani Z, Magendra R, Farouk A

Hospital Tengku Ampuan Rahimah, Klang

### **ABSTRACT**

Introduction: Approximately 15% of human couples are infertile and approximately 50% of this is because of male factors. Although overall human fertility does not appear to have declined, there is evidence for a decline in sperm quality and a simultaneous increase in the number of infertile couples for the last few decades. Objective: The objective of the study was to evaluate the efficacy of Addyzoa. Method: This is a prospective interventional study done in Infertility Clinic HTAR on the effect of Addyzoa on Sperm count in an idiopathic oligospermia from June 2016 – December 2016. Patients were recruited during screening in HTAR's Infertility Clinic. SFA will be reviewed and patient will be counselled before started on Addyzoa for 3 months. Patients were also asked regarding any changes in the libido after taking Addyzoa as well. Results: 32 patients were recruited from the HTAR infertility whereby all of them were diagnosed as oligospermia. However only 20 patients completed the treatment and came back for a repeat Seminal Fluid Analysis. There is an increase in the mean baseline of the sperm count between pre and post treatment from 5 to 10 million per mil (p<0.05). About 15% of the patients claimed that they had an increase in libido after taking the treatment. The pregnancy rate in this study is 9.3%. Conclusion: The target sample size is 45. The participant recruited was 32 and the dropout rate was 37%. Therefore, the total sample for this study is 20 patients. Thus, there may be bias. However it is shown that Addyzoa has some value in improving the sperm count in patient with idiopathic oligospermia.

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# Male Infertility: Azoospermia among Male Patients attending Infertility Clinic, Hospital Sultanah Bahiyah, Alor Setar from 2015-2017

Nor Liana Nisa Othman, Nabilah Azman, Murizah Mohd Zain

Infertility and Reproductive Clinic, O&G Department, Hospital Sultanah Bahiyah, Alor Setar

#### **ABSTRACT**

Introduction: Azoospermia is the absence of sperm in ejaculated semen. It is the most severe form of male factor infertility and is present in 5% of all investigated infertile couples. Azoospermia is classified as "obstructive" or "non-obstructive". Aetiology of each case needs to be ascertained. The objective of this study is to classify the type of azoospermia and to predict the chance of finding the sperm via surgical retrieval technique based on the clinical, hormonal and histopathological findings. Methodology: Data was collected retrospectively from patients with azoospermia attending the Infertility Unit, Hospital Sultanah Bahiyah from 2015 to 2017. Result: A total of 43 patients with azoospermia underwent sperm surgical retrieval technique. From this total, 41.86% had obstructive azoospermia, and PESA was the method of choice for sperm retrieval. Whereas the remaining 58.14% who were diagnosed with non-obstructive azoospermia had to undergo TESE. Among those who underwent TESE, sperm was successfully yielded in only 28% of cases. In cases when sperm was not retrieved, HPE results showed two pathological variants that includes germ cell maturation arrest (83.33% of cases) and Sertoli only cell Syndrome (16.67% of cases). High level of FSH did not predict the yield of sperm retrieval. Size of testes correlated well with the number of sperm collected. Conclusion: The size of the testis and the FSH level correlate with the chance of sperm yield in TESE in non-obstructive azoospermia.