

ACADEMIC LEAGUE OF REPRODUCTIVE  
MEDICINE OF PUC-CAMPINAS

I International Congress  
of Reproductive Medicine  
of PUC-Campinas

PUC-Campinas | 16.06 > 08h00  
Monsenhor Salim Auditorium



ACADEMIC LEAGUE OF REPRODUCTIVE  
MEDICINE OF PUC-CAMPINAS

I International Congress of Reproductive  
Medicine of PUC-Campinas

# A qualidade de vida do homem e a interferência nos parâmetros seminais

**Edson Borges Jr.**

**Fertility Medical Group  
FERTGROUP  
Instituto Sapientiae**



FERTILITY



**FERTGROUP**  
MEDICINA REPRODUTIVA

## **Declaração:**

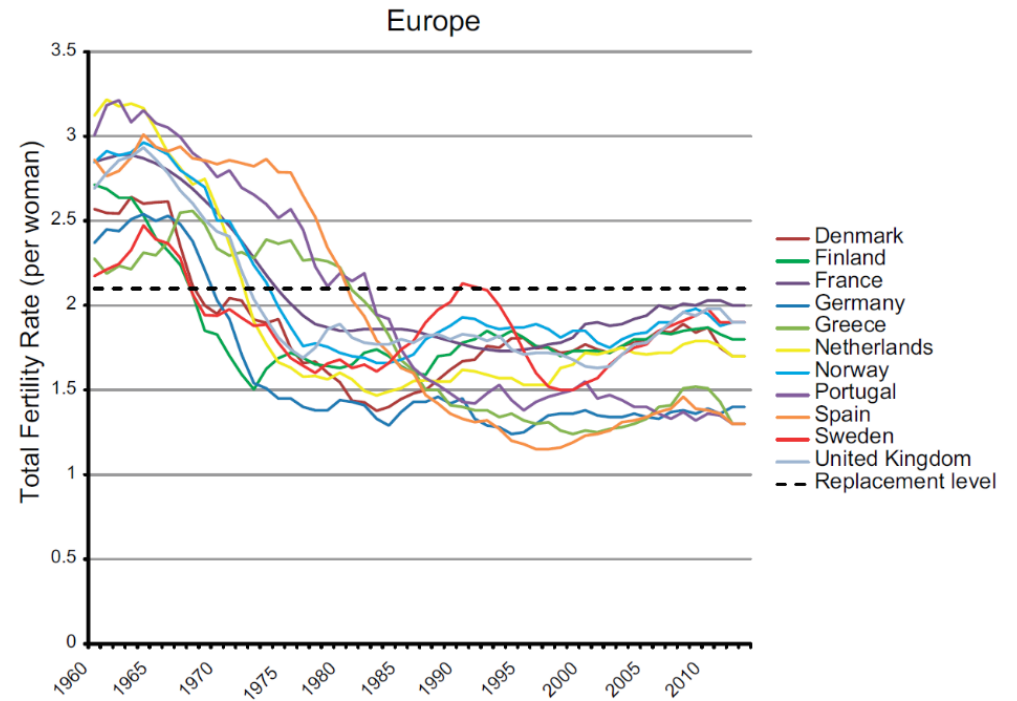
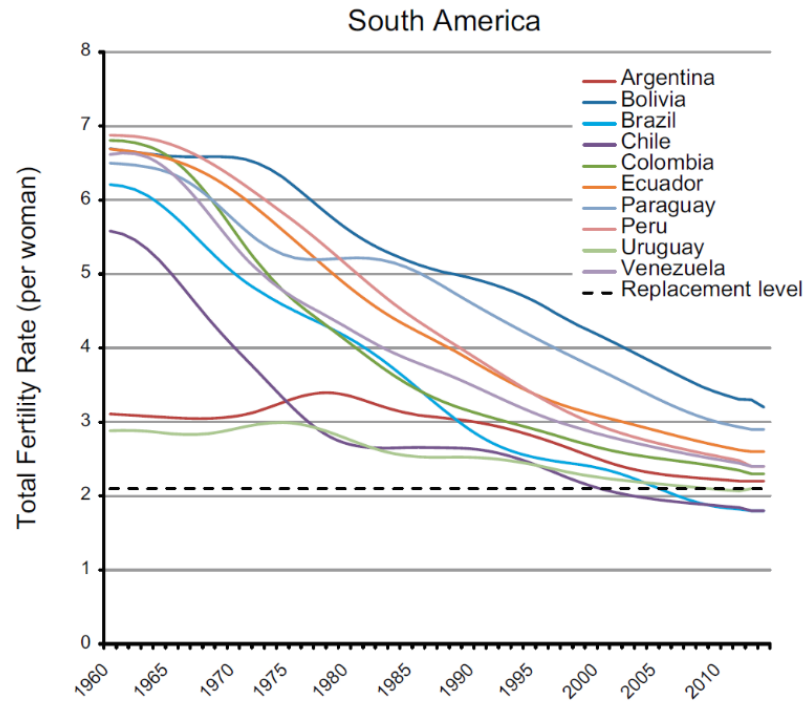
**Sem conflito de interesse para divulgar  
relacionado ao assunto desta palestra**

**Resolução do Conselho Federal de Medicina  
nº 1.595/2.000**

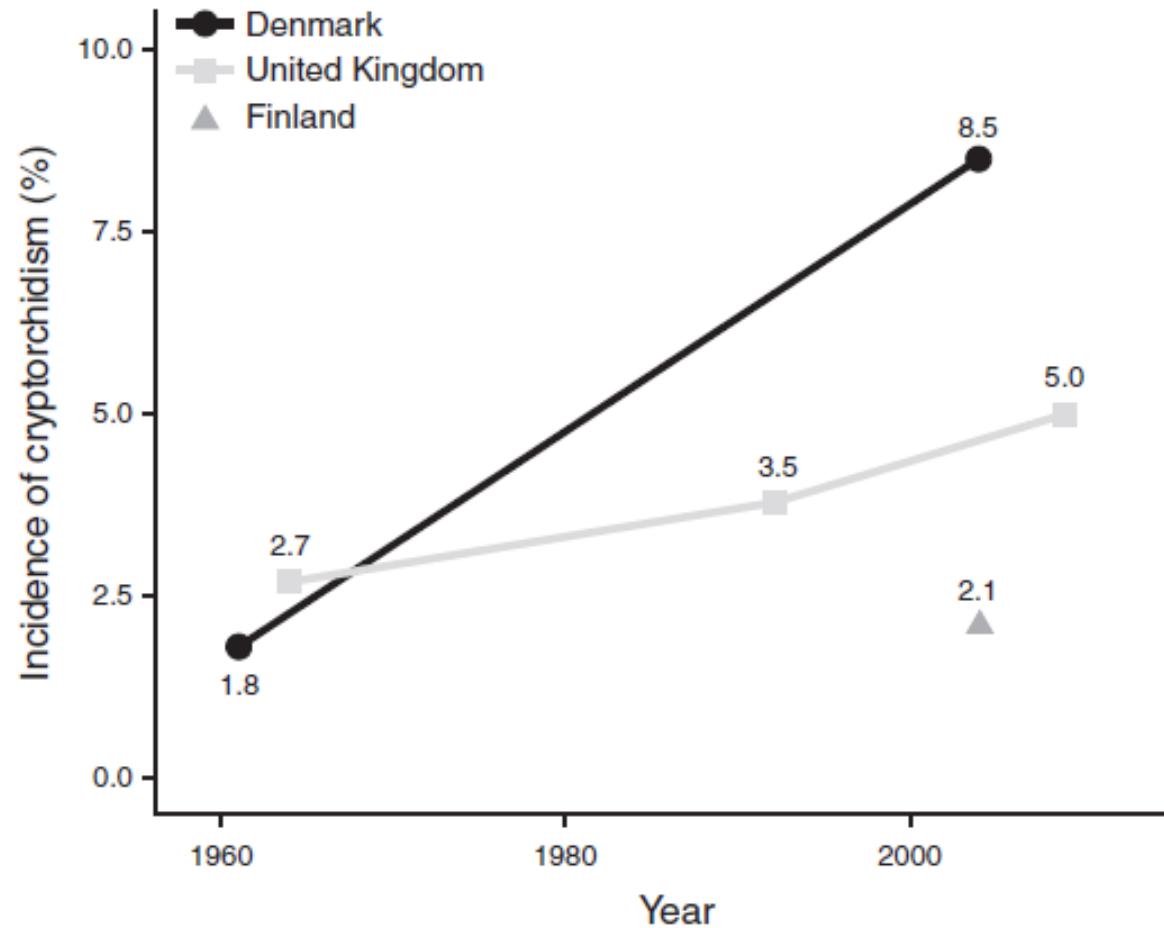
# MALE REPRODUCTIVE DISORDERS AND FERTILITY TRENDS: INFLUENCES OF ENVIRONMENT AND GENETIC SUSCEPTIBILITY

Niels E. Skakkebaek, Ewa Rajpert-De Meyts, Germaine M. Buck Louis, Jorma Toppari, Anna-Maria Andersson, Michael L. Eisenberg, Tina Kold Jensen, Niels Jørgensen, Shanna H. Swan, Katherine J. Sapro, Søren Ziebe, Lærke Priskorn, and Anders Juul

## Taxa de Fecundidade

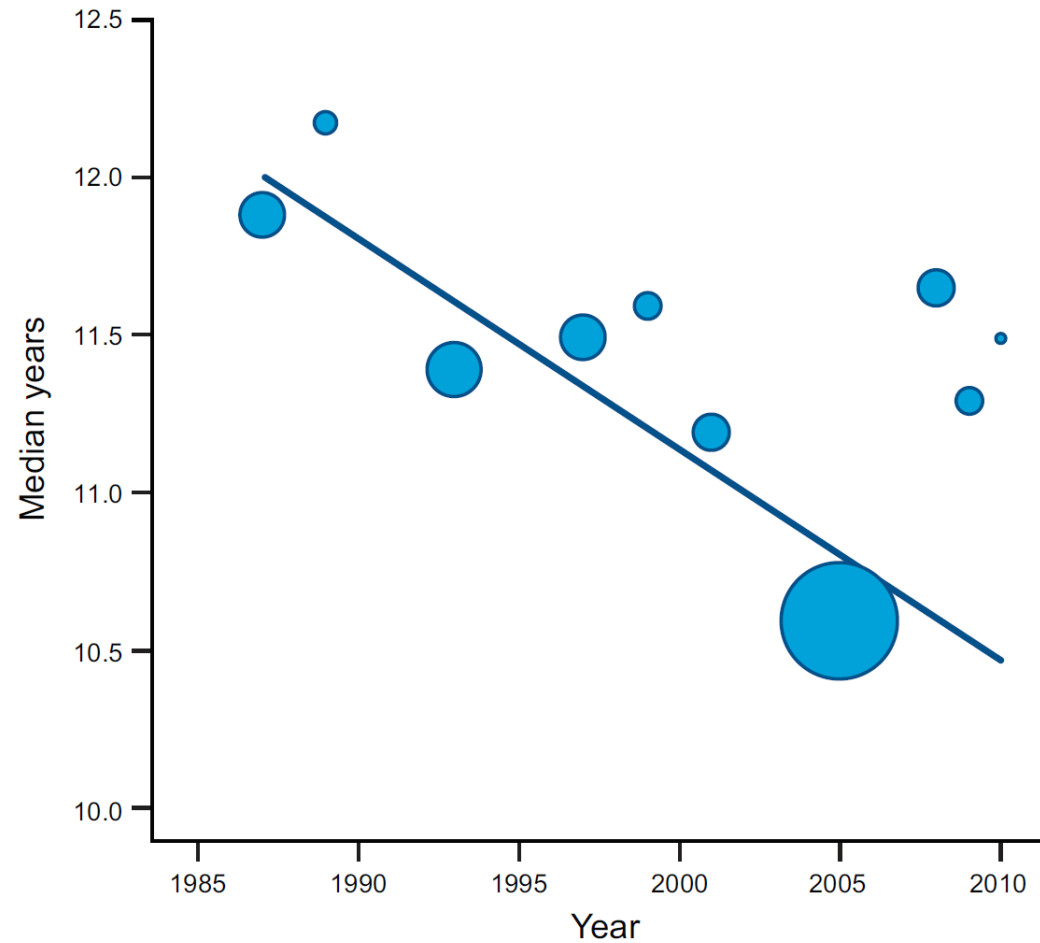


## *Incidência de Criptorquidia*



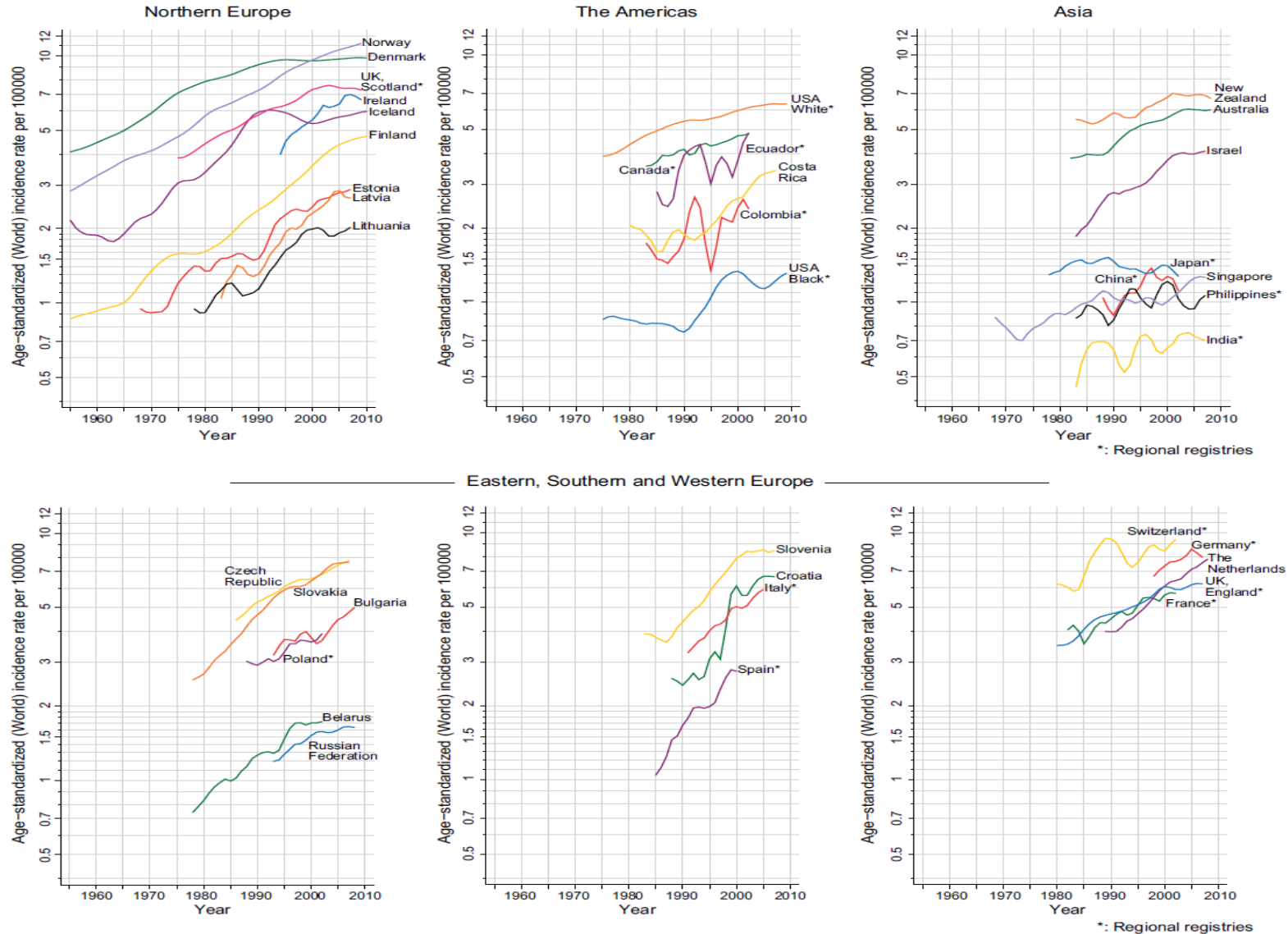
**FIGURE 7.** Incidence of cryptorchidism at birth on the basis of prospective clinical studies from the 1950s to the 2000s in Denmark, Finland, and United Kingdom. The data points are marked on the year of the publication of the study which represents the preceding incidence rate (3, 47, 61, 184, 377).

## Idade da Puberdade



**FIGURE 8.** Recent changes in male pubertal timing. Testicular volume was  $>3$  ml. [From Mouritsen et al. (293).]

# Incidência de Câncer de Testículo



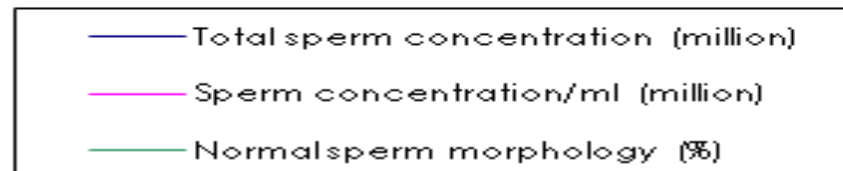
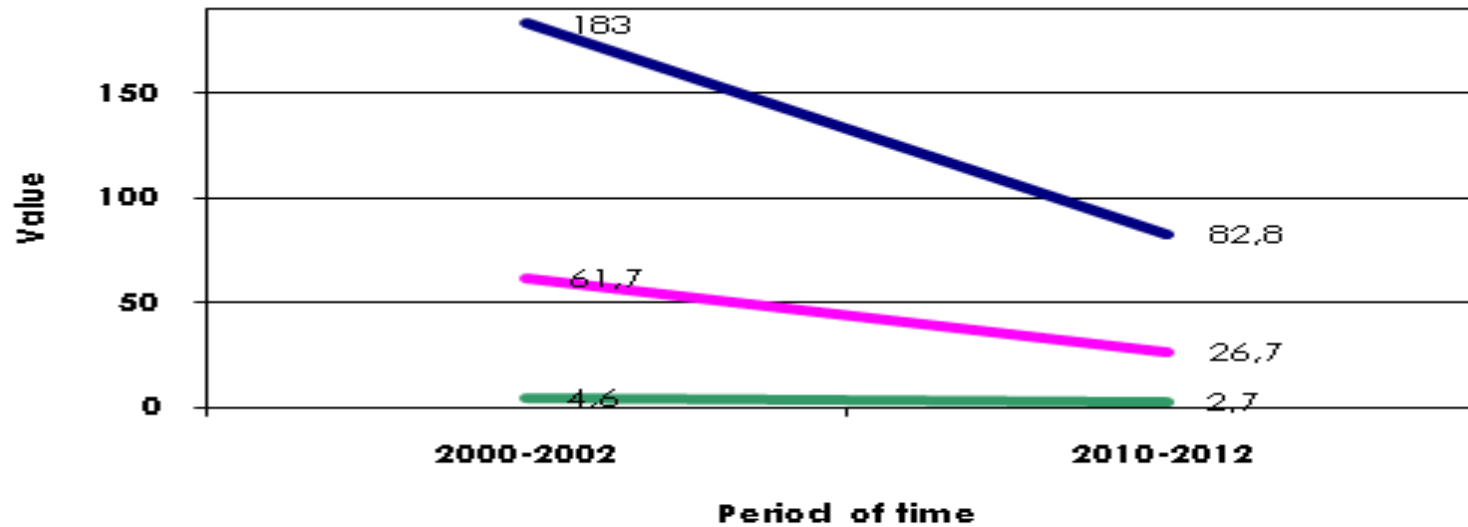
**FIGURE 4.** Trends in testicular cancer; age-standardized (world) incidence (regional or national), all ages. [Modified from Znaor et al. (481). Courtesy of Dr. Arinana Znaor and statistician Mathieu Laversanne, M.Sc., WHO, International Agency for Research in Cancer (IARC), Lyon, France.]





## Decline in semen quality among infertile men in Brazil during the past 10 years

Edson Borges Jr.<sup>1\*</sup>, Amanda Souza Setti<sup>1\*</sup>, Daniela Paes de Almeida Ferreira Braga<sup>1\*</sup>, Rita de Cassia Savio Figueira<sup>1</sup>, Assumpto Iaconelli Jr.<sup>1\*</sup>





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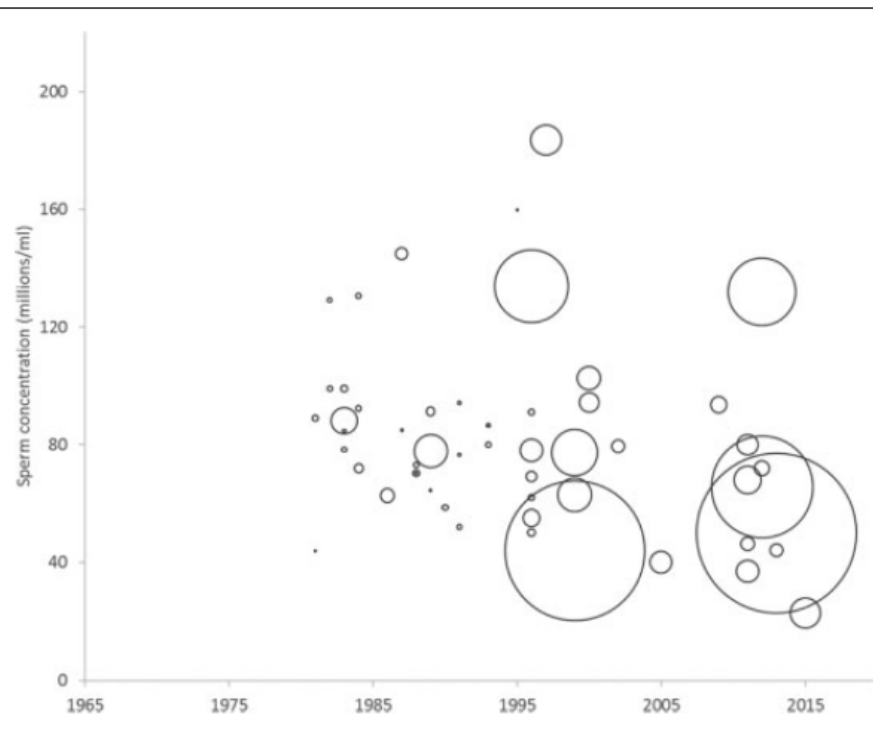
Variable	2000 - 2002 (n=764)	2010 - 2012 (n=1536)	<i>p</i>
Azoospermia	4.9%	8.5%	<0.001
Severe oligozoospermia	15.7%	30.3%	<0.001





## Decline in sperm count in European men during the past 50 years

P Sengupta<sup>1,2</sup>, E Borges Jr<sup>3</sup>, S Dutta<sup>4</sup> and E Krajewska-Kulak<sup>2</sup>



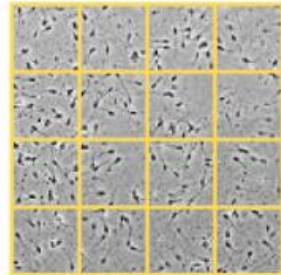
**A time dependent decline in sperm concentration was observed from 1965 to 2015 ( $r=0.307$ ,  $p=0.02$ )**

**An overall 32.5% decrease in mean sperm concentration**

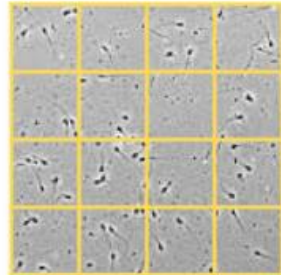
**Figure 1.** Temporal decline in sperm concentration ( $\times 10^6/\text{ml}$ ) from 1965 to 2015, bubble size corresponds to the number of men in the study.

## GRAPHICAL ABSTRACT

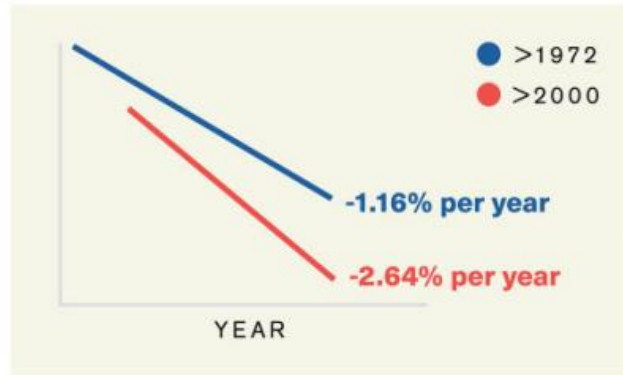
# Sperm count is declining at an accelerated pace **globally**



101 mill/ml  
(1973)



49 mill/ml  
(2018)



Sperm count is declining at an accelerated pace globally.



FERTILITY

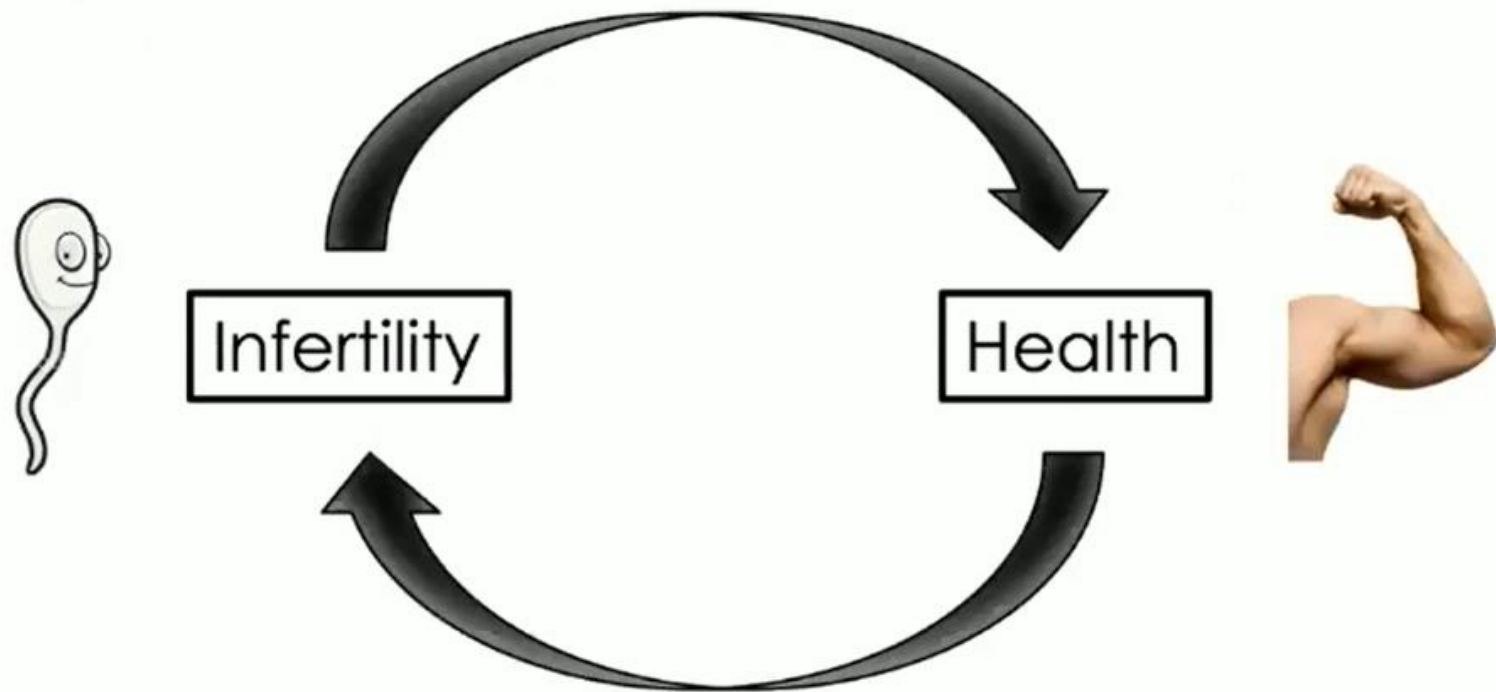
**Human Reproduction Update, Vol.29, No.2, pp. 157–176, 2023**

Advance Access Publication on November 15, 2022 <https://doi.org/10.1093/humupd/dmac035>

**O sexto sinal vital:**

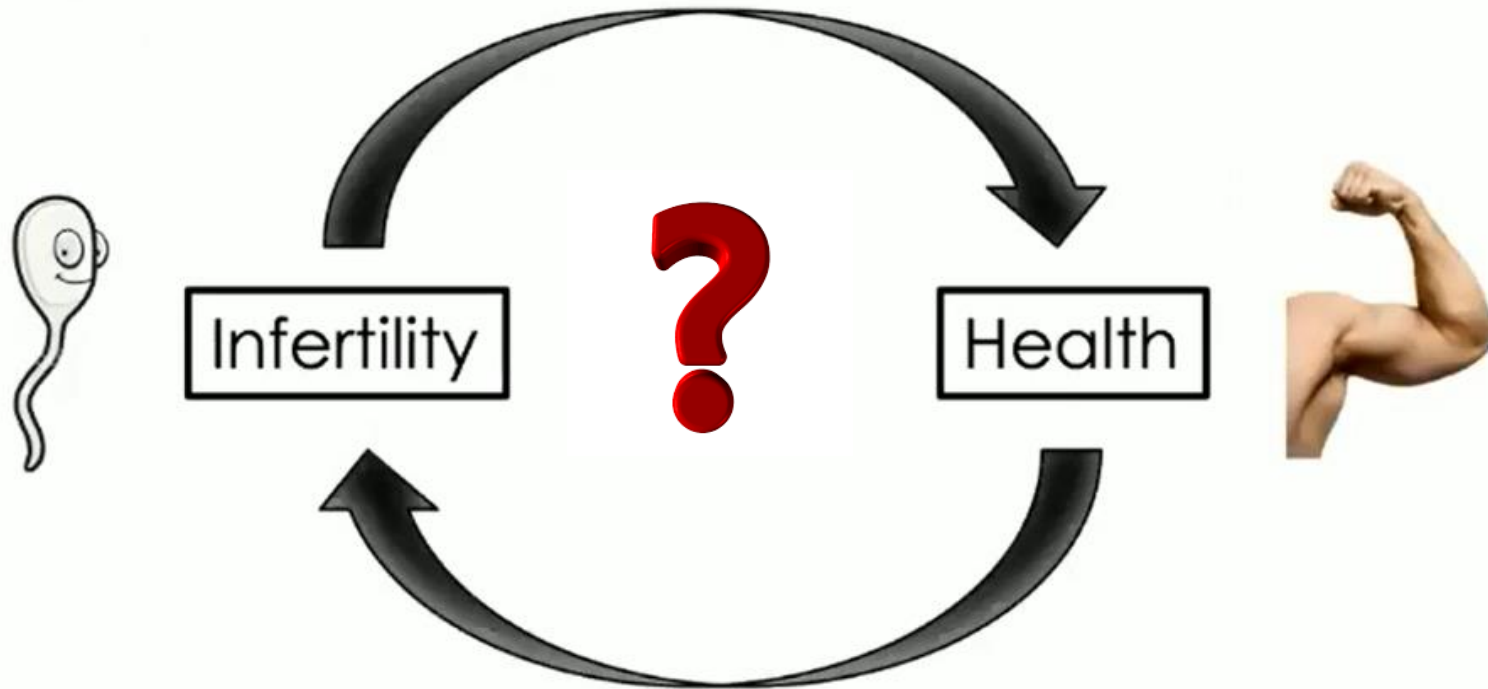
**O que o  
espermatozoide está  
tentando nos dizer?**

# Understanding the Relationship



FERTILITY

# Understanding the Relationship



# Infertilidade e saúde futura



FERTILITY

# Implicações biológicas

- **Genéticos**
- **Hormonais**
- **Intraútero**
- **Social**
- **Estilo de vida/saúde**

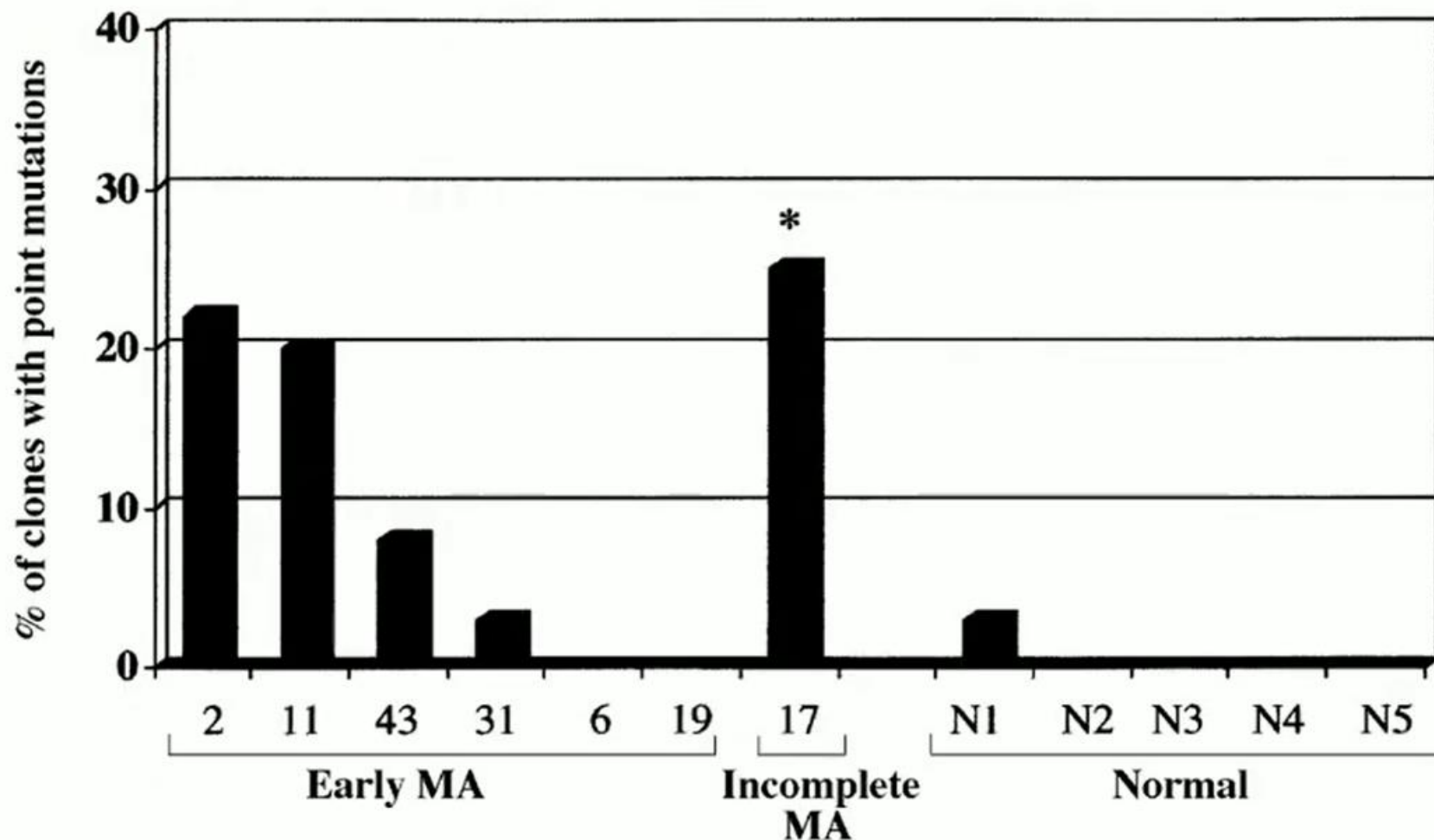


# Implicações biológicas

- **Genéticos**
- Hormonais
- Intraútero
- Social
- Estilo de vida/saúde



The percentage of clones with point mutations in DNA cloned from the D19S49 marker of men with early MA (meiotic arrest), incomplete MA, or normal spermatogenesis



Nudell D et al. Hum. Reprod. 2000;15:1289-1294



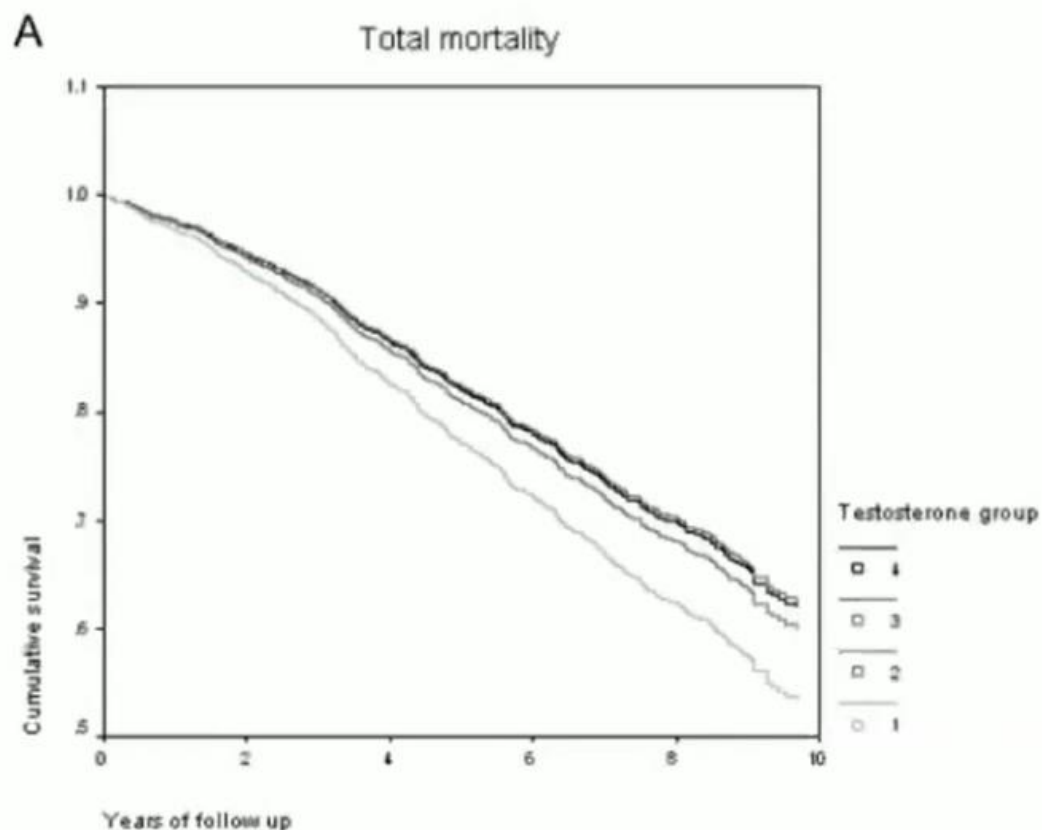
FERTILITY

# Implicações biológicas

- Genéticos
- **Hormonais**
- Intraútero
- Social
- Estilo de vida/saúde

# Hormonal Factors

## Low testosterone and Overall Mortality



Khaw et al, 2007



FERTILITY

# Implicações biológicas

- Genéticos
- Hormonais
- **Intraútero**
- Social
- Estilo de vida/saúde

NOVEMBER 9, 2009

**Environment Special:**  
The oceans—why 70%  
of our planet is in danger

**The Facebook Movie:**  
The secret history of  
social networking

# TIME

## How the first nine months shape the rest of your life

The new science  
of fetal origins

BY ANNIE MURPHY PAUL

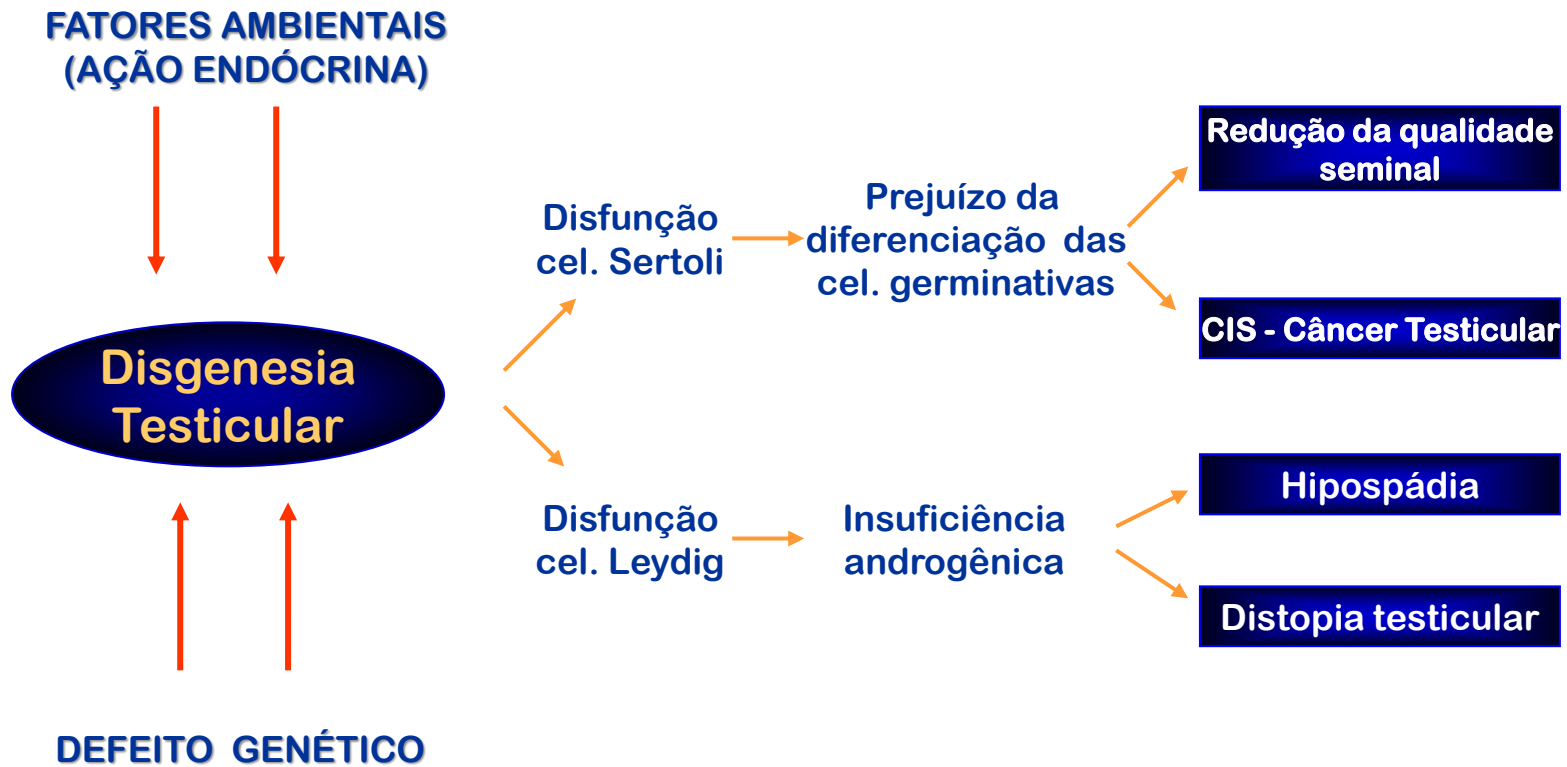


WWW.TIME.COM



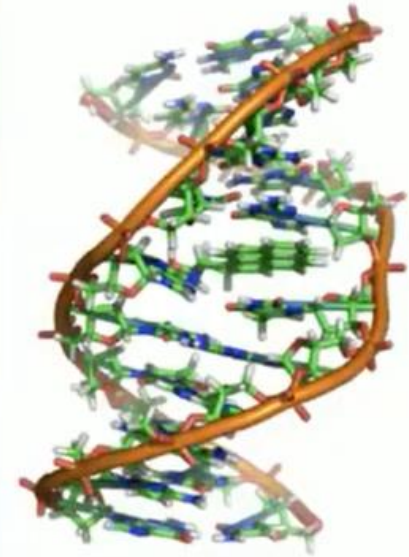
FERTILITY

# Lesão do Sistema Reprodutor Masculino



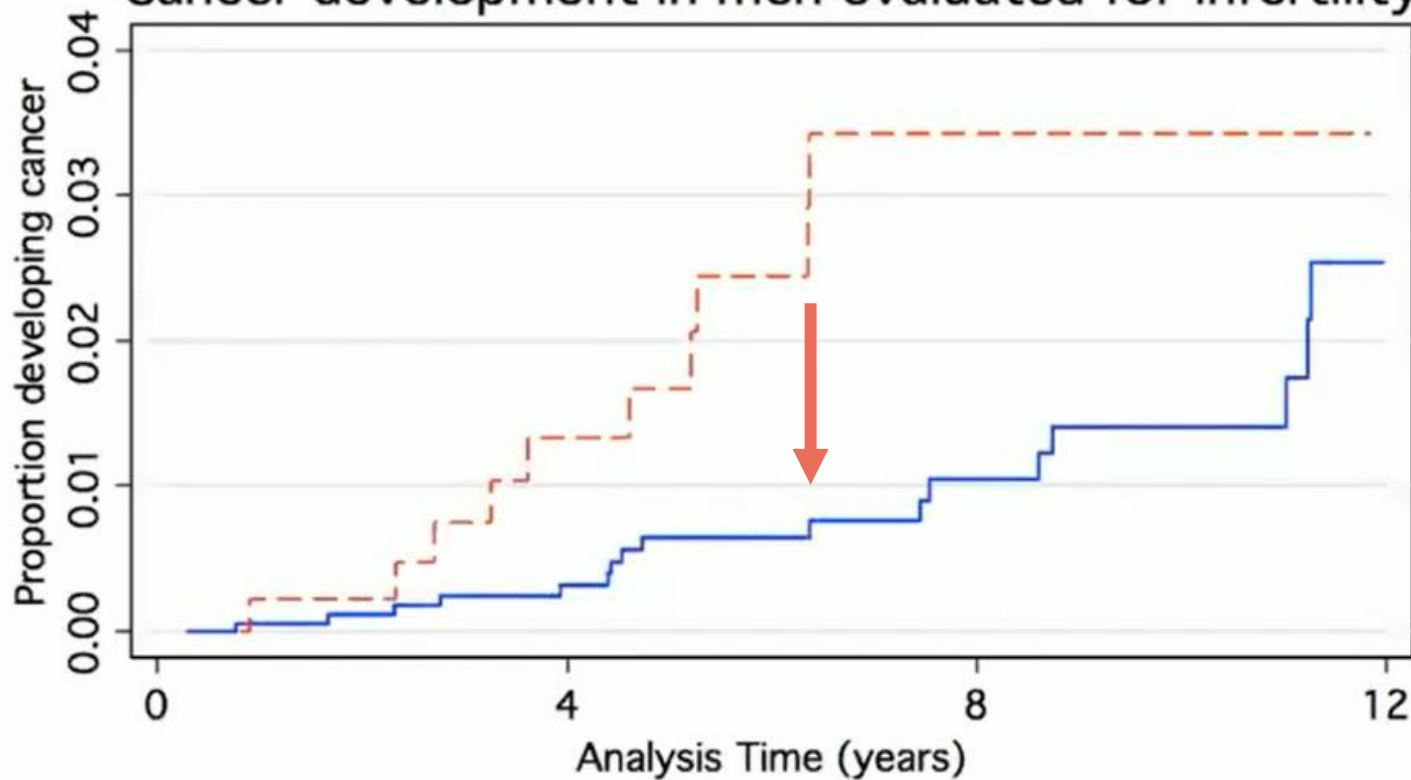
*Skakkebaek NE. Hum Rep 16(5): 972-8, 2001*

# Infertilidade risco de câncer



FERTILITY

# Cancer development in men evaluated for infertility

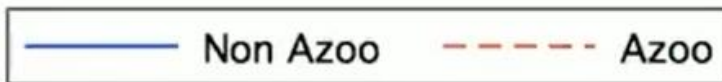


Number at risk  
 Non Azoo 1787  
 Azoo 451

1343  
 316

625  
 158

180  
 35



Eisenberg et al, 2013



# Infertility and Testis Cancer

- Examined >30,000 men who had a semen analysis in Copenhagen from 1963-1995
- Linked to Danish Cancer Registry



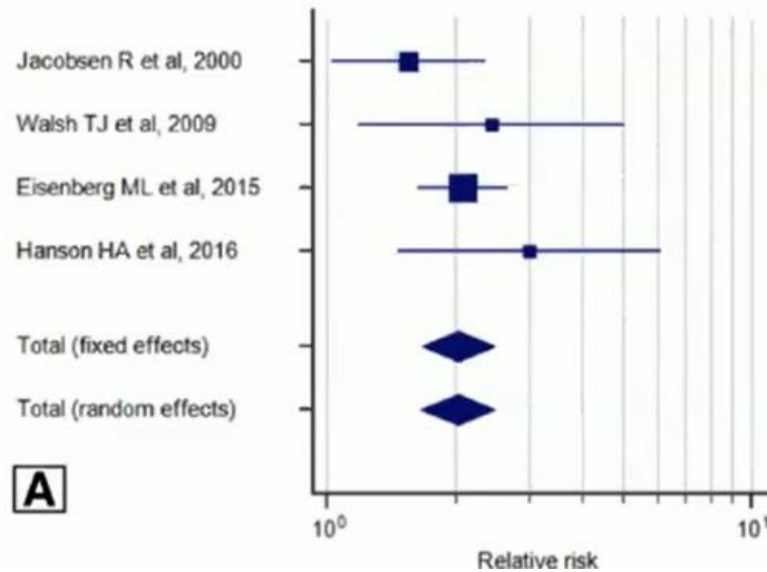
Jacobsen et al, BMJ, 2000

# Infertility and Testis Cancer

Semen parameter		n	Observed cases	Expected cases	SIR
Concentration	0-20	10,509	33	14.4	<b>2.3 (1.6,3.2)</b>
	>20	18,668	42	36.9	1.1 (0.8, 1.5)
Motility	Poor	1,312	7	2.8	<b>2.5 (1.0, 5.2)</b>
	Good	19,362	44	28	1.6 (1.1, 2.1)
Morphology (% abnormal)	>75	528	4	1.4	<b>3.0 (0.8, 7.6)</b>
	0-75	27,618	64	47.8	1.3 (1.0, 1.7)

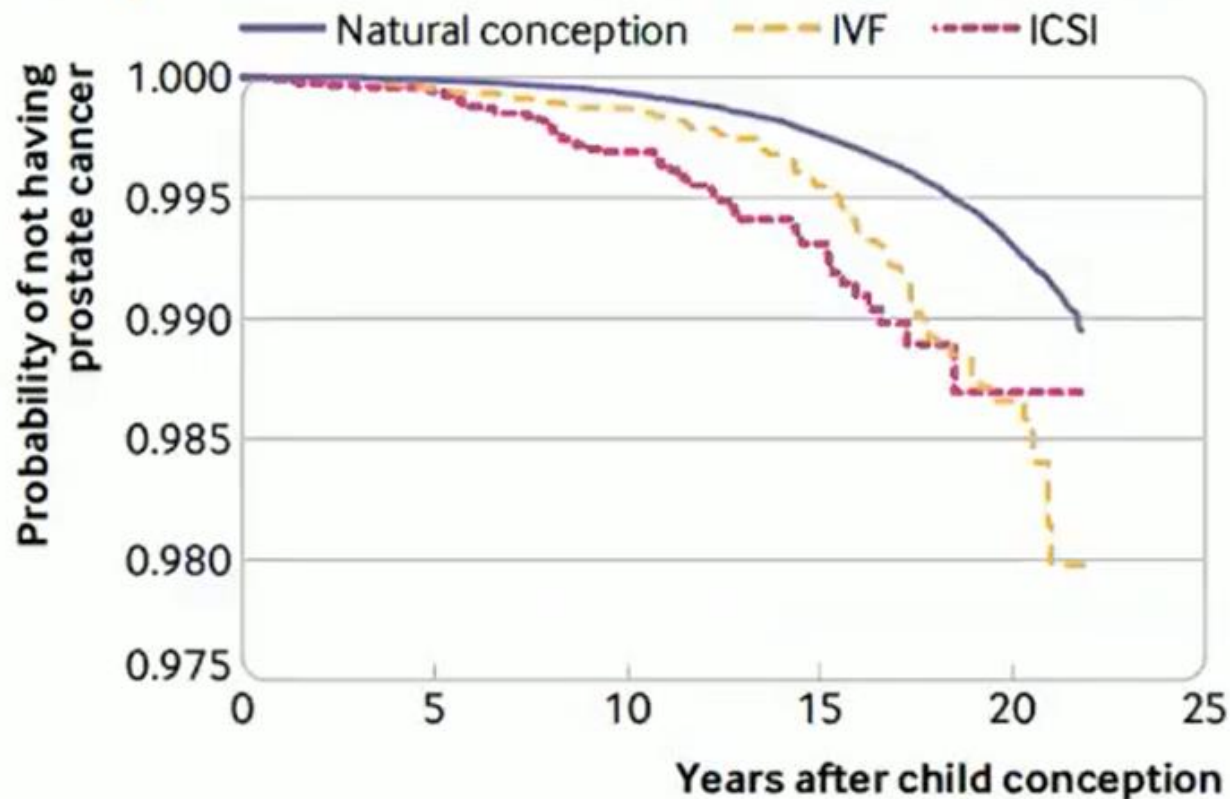
# Infertility and Testis Cancer

Author, Year,	Infertile	Controls	Relative risk	95% CI	p value
Jacobsen R et al <sup>37</sup> , 2000	46/13184	42/18667	1.551	1.021 to 2.355	
Walsh TJ et al <sup>38</sup> , 2009	13/4549	17/14556	2.447	1.189 to 5.034	
Eisenberg ML et al <sup>19</sup> , 2015	85/123467	251/760829	2.087	1.632 to 2.669	
Hanson HA et al <sup>39</sup> , 2016	30/20432	10/20432	3.000	1.467 to 6.135	
<b>Total (fixed effects)</b>	174/161632	320/814484	2.033	1.671 to 2.474	<0.001
<b>Total (random effects)</b>	174/161632	320/814484	2.033	1.665 to 2.481	<0.001



Del Giudice et al, Fert Ster, 2020

# Infertility and Prostate Cancer



## Natural conception

1 145 962 940 084 692 333 454 698 181 249

## IVF

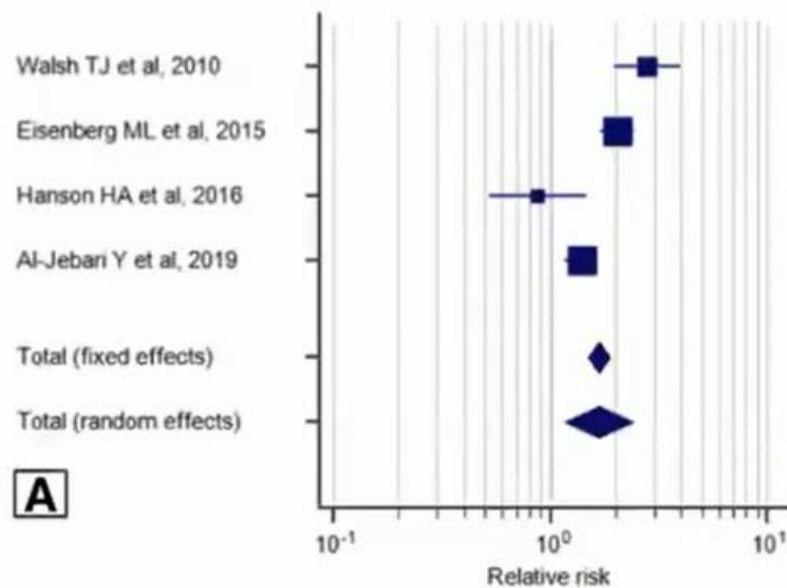
20 617 15 274 9 504 5 007 1 535

## ICSI

14 873 10 509 6 099 2 593 184

# Infertility and Prostate Cancer

Author, year	Infertile	Controls	Relative risk	95% CI	p value
Walsh TJ et al <sup>29</sup> , 2010	56/4549	64/14556	2.800	1.959 to 4.002	
Eisenberg ML et al <sup>19</sup> , 2015	154/123467	464/760829	2.045	1.705 to 2.454	
Hanson HA et al, <sup>39</sup> 2016	27/20432	31/20432	0.871	0.520 to 1.459	
Al-Jebari Y et al, <sup>40</sup> 2019	140/35499	3244/1145990	1.393	1.177 to 1.649	
<b>Total (fixed effects)</b>	<b>377/183947</b>	<b>3803/1941807</b>	<b>1.681</b>	<b>1.501 to 1.882</b>	<b>&lt;0.001</b>
<b>Total (random effects)</b>	<b>377/183947</b>	<b>3803/1941807</b>	<b>1.678</b>	<b>1.170 to 2.407</b>	<b>0.005</b>



Del Giudice et al, Fert Ster, 2020



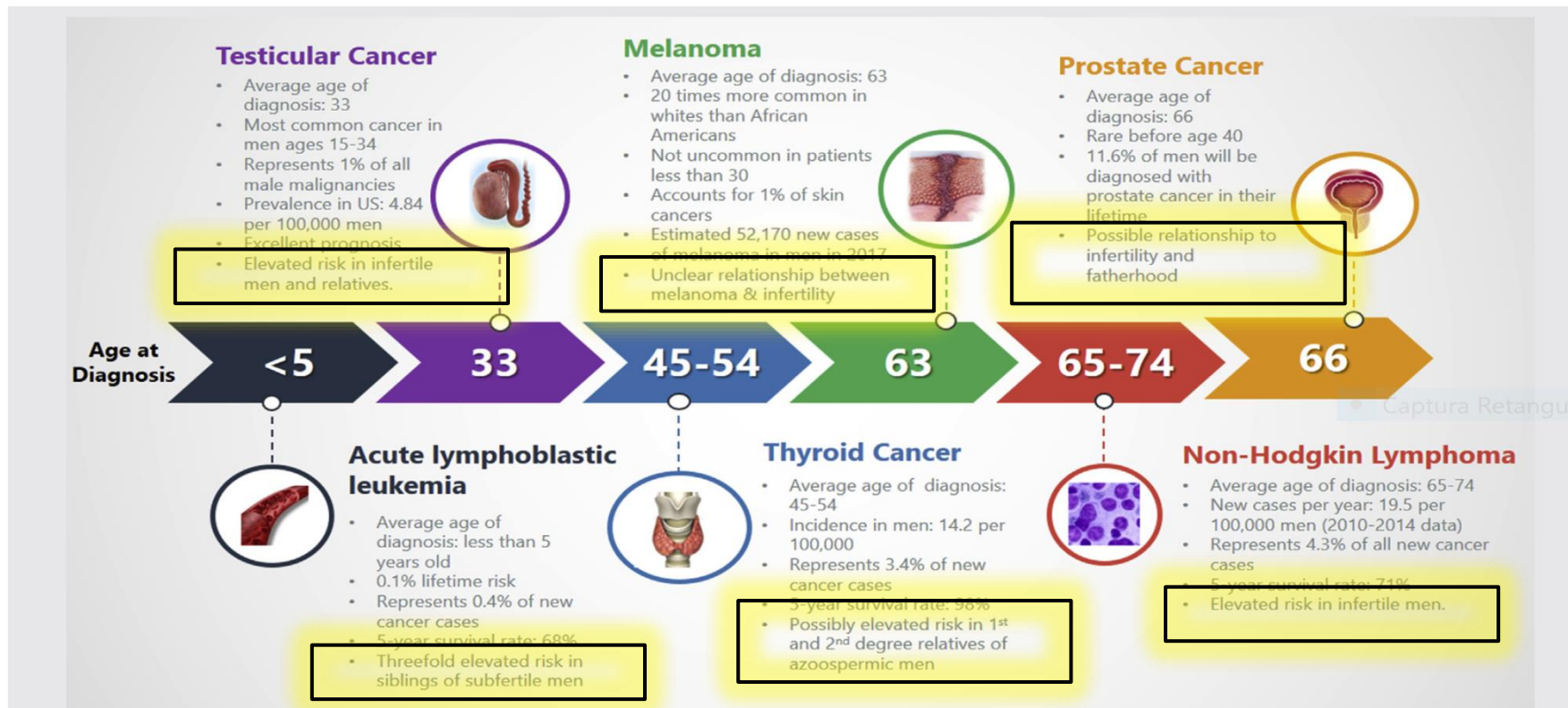


# Male infertility: a biomarker of individual and familial cancer risk

Brent M. Hanson, M.D.,<sup>a</sup> Michael L. Eisenberg, M.D.,<sup>b</sup> and James M. Hotaling, M.D., M.S., F.E.C.S.M.<sup>c</sup>

<sup>a</sup> Department of Obstetrics and Gynecology, University of Utah, Salt Lake City, Utah; <sup>b</sup> Male Reproductive Medicine and Surgery Program, Departments of Urology and Obstetrics and Gynecology, Stanford University, Stanford, California; and <sup>c</sup> Center for Reconstructive Urology and Men's Health, Department of Surgery-Urology, University of Utah, Salt Lake City, Utah

Fertility and Sterility® Vol. 109, No. 1, January 2018



Specific malignancies associated with infertile men and their family members by average age at diagnosis.

Hanson. Male infertility and cancer risk. Fertil Steril 2017.



# Implicações biológicas

- Genéticos
- Hormonais
- Intraútero
- **Social**
- Estilo de vida/saúde





# Social Factors

## Partners & Kids

- Cohabitation lowers mortality
- Children lower mortality

### All Cause Mortality

Male characteristics	HR (95% CI)
Cohabiting custodial fathers	Reference
Lone custodial fathers	1.6 (1.4-1.9)

Weitoff et al, 2004

# Social Factors

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Lone custodial fathers	1.6 (1.4-1.9)
Lone non custodial fathers	2.7 (2.5-2.8)

Weitoff et al, 2004

# Social Factors

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Cohabiting childless men	1.6 (1.5-1.7)

Weitoff et al, 2004



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Weitoff et al, 2004

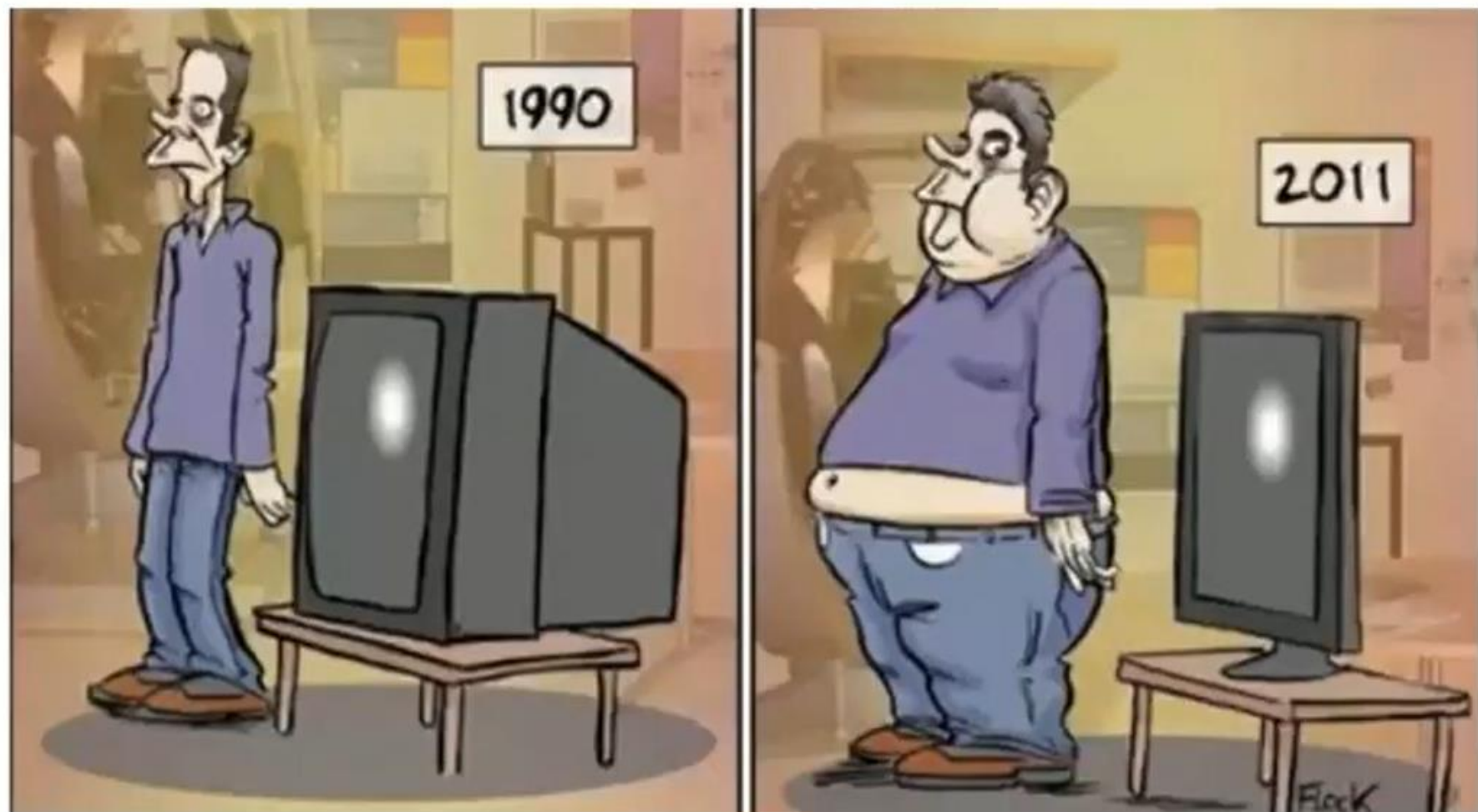


FERTILITY

# Implicações biológicas

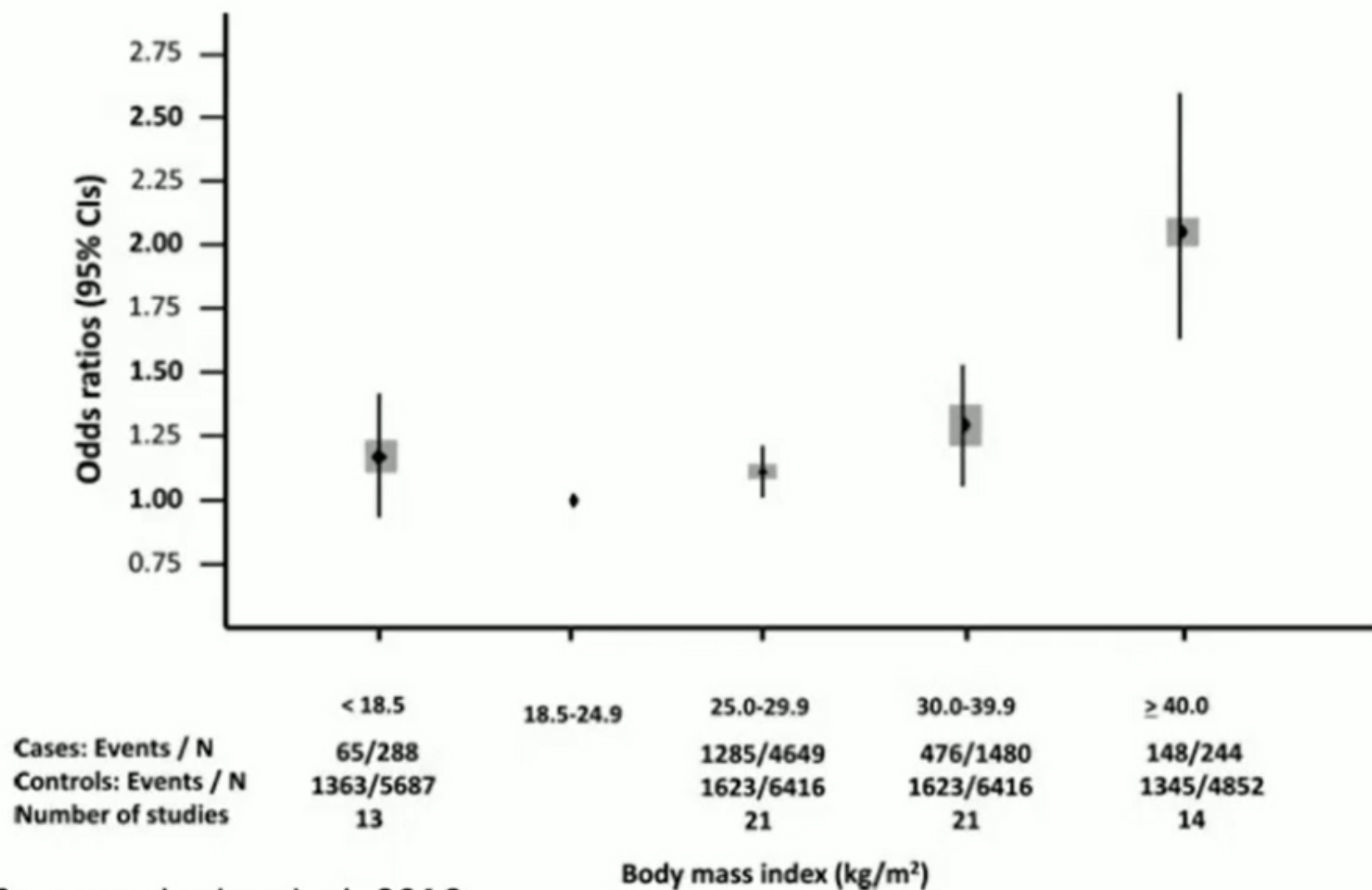
- Genéticos
- Hormonais
- Intraútero
- Social
- **Estilo de vida/saúde**

# Obesity



FERTILITY

# BMI and Low Sperm Counts



Sermondade et al, 2012



## BMI in relation to sperm count: an updated systematic review and collaborative meta-analysis

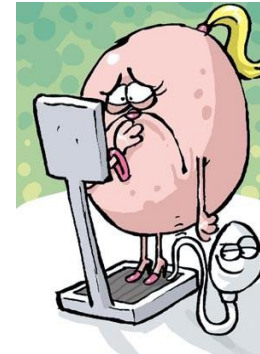
N. Sermondade<sup>1,2</sup>, C. Faure<sup>1,2</sup>, L. Fezeu<sup>2</sup>, A.G. Shayeb<sup>3</sup>, J.P. Bonde<sup>4</sup>,  
T.K. Jensen<sup>5</sup>, M. Van Wely<sup>6</sup>, J. Cao<sup>7</sup>, A.C. Martini<sup>8</sup>, M. Eskandar<sup>9</sup>,  
J.E. Chavarro<sup>10,11</sup>, S. Koloszar<sup>12</sup>, J.M. Twigt<sup>13</sup>, C.H. Ramlau-Hansen<sup>14</sup>,  
E. Borges Jr<sup>15</sup>, F. Lotti<sup>16</sup>, R.P.M. Steegers-Theunissen<sup>13</sup>, B. Zorn<sup>17</sup>,  
A.J. Polotsky<sup>18</sup>, S. La Vignera<sup>19</sup>, B. Eskenazi<sup>20</sup>, K. Tremellen<sup>21</sup>,  
E.V. Magnúsdóttir<sup>22</sup>, I. Fejes<sup>23</sup>, S. Hercberg<sup>2,24</sup>, R. Lévy<sup>1,2†</sup>,  
and S. Czernichow<sup>25,26,\*†</sup>

→ 21 estudos, 13.077 homens da população geral e em investigação de infertilidade

→ Estudo da relação entre BMI e incidência de oligozoospermia / azoospermia

→ Comparados com homens com peso normal:

- ❖ Sobpeso: OR= 1,15 (0,93-1,43)
- ❖ Sobrepeso: OR= 1,11 (1,01-1,21)
- ❖ Obeso: OR= 1,28 (1,06-1,55)
- ❖ Obeso mórbido: OR= 2,04 (1,59-2,62)







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ARTICLE

The impact of food intake and social habits on embryo quality and the likelihood of blastocyst formation



Daniela Paes Almeida Ferreira Braga <sup>a,\*</sup>, Gabriela Halpern <sup>a</sup>, Amanda S Setti <sup>b</sup>, Rita Cássia S Figueira <sup>a</sup>, Assumpto Iaconelli Jr <sup>a</sup>, Edson Borges Jr <sup>a</sup>

→ 2659 embriões – 269 pacientes submetidas a ICSI

- **Qualidade embrionária em estágio de clivagem:** negativamente influenciada pelo álcool e cigarro; positivamente influenciada pelo consumo de cereal, vegetais e frutas
- **Formação de blastocisto:** negativamente influenciada pelo consumo de carne vermelha, perda de peso (dieta), álcool e cigarro; positivamente influenciada pelo consumo frutas e peixes



FERTILITY



ELSEVIER

www.sciencedirect.com  
www.rbmonline.com



ARTICLE

The impact of food intake and social habits on embryo quality and the likelihood of blastocyst formation



Daniela Paes Almeida Ferreira Braga <sup>a,\*</sup>, Gabriela Halpern <sup>a</sup>, Amanda S Setti <sup>b</sup>, Rita Cássia S Figueira <sup>a</sup>, Assumpto Iaconelli Jr <sup>a</sup>, Edson Borges Jr <sup>a</sup>

- Consumo de carne vermelha, peso e dietas influenciam **negativamente as taxas de implantação e gestação**

# Food intake and social habits in male patients and its relationship to intracytoplasmic sperm injection outcomes

Daniela Paes de Almeida Ferreira Braga, D.V.M., M.Sc.,<sup>a,b</sup> Gabriela Halpern, M.Sc.,<sup>a</sup> Rita de Cássia S. Figueira, M.Sc.,<sup>a</sup> Amanda S. Setti, B.Sc.,<sup>b</sup> Assumpto Iaconelli Jr., M.D.,<sup>a</sup> and Edson Borges Jr., M.D., Ph.D.<sup>a,b</sup>

Fertility and Sterility® Vol. 97, No. 1, January 2012

- ➔ Influência dos hábitos sociais e alimentares no sêmen e nos resultados de ICSI
- ➔ Estudo coorte observacional com 250 homens tratados com ICSI

# Food intake and social habits in male patients and its relationship to intracytoplasmic sperm injection outcomes

Daniela Paes de Almeida Ferreira Braga, D.V.M., M.Sc.,<sup>a,b</sup> Gabriela Halpern, M.Sc.,<sup>a</sup> Rita de Cássia S. Figueira, M.Sc.,<sup>a</sup> Amanda S. Setti, B.Sc.,<sup>b</sup> Assumpto Iaconelli Jr., M.D.,<sup>a</sup> and Edson Borges Jr., M.D., Ph.D.<sup>a,b</sup>  
Fertility and Sterility® Vol. 97, No. 1, January 2012

- **Concentração**: negativamente influenciada pelo IMC e álcool; positivamente influenciada pelo consumo de cereal e no. refeições/dia
- **Motilidade**: negativamente influenciada pelo IMC, álcool e cigarro; positivamente influenciada pelo consumo de cereal e frutas

# Food intake and social habits in male patients and its relationship to intracytoplasmic sperm injection outcomes

Daniela Paes de Almeida Ferreira Braga, D.V.M., M.Sc.,<sup>a,b</sup> Gabriela Halpern, M.Sc.,<sup>a</sup> Rita de Cássia S. Figueira, M.Sc.,<sup>a</sup> Amanda S. Setti, B.Sc.,<sup>b</sup> Assumpto Iaconelli Jr., M.D.,<sup>a</sup> and Edson Borges Jr., M.D., Ph.D.<sup>a,b</sup>  
Fertility and Sterility® Vol. 97, No. 1, January 2012

- **Álcool:** *impacto negativo na fertilização*
- **Carne vermelha e dieta (perda peso):** impacto negativo na implantação / diminui as chances de gestação

# Impacto da orientação nutricional em resultados de ciclos de reprodução assistida

JBRA Assist. Reprod. | V. 17 | nº1 | Jan-Feb / 2013

## Nutritional Counseling Impact on Assisted Reproduction Treatment Outcomes

Gabriela Halpern<sup>1</sup>, Fátima Aparecida Arantes Sardinha<sup>2</sup>, Amanda Setti<sup>3</sup>, Assumpto Iaconelli Jr,<sup>4</sup> Edson Borges Jr<sup>5</sup>


- Fertilização (81.0% and 67.1% p = 0.0225)
- Gestação (46.9% and 28.6% p = 0.0396)
- ✓ Pacientes que receberam esta orientação tiveram **2X mais chances de engravidar** (OR: 2.27, p = 0.0408)



**ORIGINAL ARTICLE**

WILEY **ANDROLOGIA**

## Paternal lifestyle factors in relation to semen quality and in vitro reproductive outcomes

Edson Borges Jr<sup>1,2</sup>  | Daniela Paes de Almeida Ferreira Braga<sup>1,2</sup> |  
Rodrigo R. Provenza<sup>1</sup> | Rita de Cassia Savio Figueira<sup>1</sup> | Assumpto Iaconelli Jr<sup>1,2</sup> |  
Amanda Souza Setti<sup>1,2</sup>

- 965 homens estudados
- 233 fizeram ICSI
- Fator masculino isolado
- 1<sup>o</sup> ciclo de tratamento
- Idade mulher < 36 anos

1. Quantos cigarros/dia?
2. Consumo semanal de álcool?
3. Frequência de exercícios ?
4. Medicações nos últimos 3 meses? Qual?
5. Exposição a agentes tóxicos, pesticidas, radiação etc..

**TABLE 2** Linear regression analyses' results for the influence of paternal lifestyle factors on semen quality (n = 965)

Lifestyle factors	Cigarette smoking		Alcohol consumption		Occupation exposure		Physical activity		Medication use	
	<i>B</i>	<i>p</i>	<i>B</i>	<i>p</i>	<i>B</i>	<i>p</i>	<i>B</i>	<i>p</i>	<i>B</i>	<i>p</i>
Semen quality										
Semen volume	-0.417	0.047	-0.1363	0.592	-0.2611	0.702	0.1146	0.436	0.0219	0.880
Sperm count/ml	-7.363	0.014	-12.527	0.040	-31.10	0.169	-3.329	0.494	0.984	0.838
Total sperm count	-4.43	0.023	-34.91	0.156	-80.79	0.299	5.85	0.728	-2.75	0.868
Total sperm motility	2.316	0.347	0.342	0.895	-7.362	0.285	-0.728	0.617	-0.595	0.684
Progressive sperm motility	-0.369	0.887	2.547	0.240	-7.660	0.297	-0.983	0.528	-0.225	0.885
TMSC	-1.38	0.045	-16.33	0.278	-43.23	0.330	0.094	0.992	-1.319	0.889
Sperm morphology	-0.0563	0.779	0.3751	0.180	0.2071	0.713	-0.1977	0.098	-0.0633	0.598
SDF	0.014	0.033	5.833	0.002	-2.334	0.586	-1.1684	0.221	0.6005	0.521

Note. B: unstandardised regression coefficient; SDF: sperm DNA fragmentation; TMSC: total motile sperm count.



**TABLE 3** Linear regression analyses' results for the association between paternal lifestyle factors and ICSI outcomes (n = 233)

Lifestyle factors	Cigarette smoking		Alcohol consumption		Occupation exposure		Physical activity		Medication use		
	B	p	B	p	B	p	B	p	B	p	
ICSI outcomes											
Fertilisation rate	-1.349	0.039	-3.617	0.041	3.71	0.759	1.600	0.473	-2.236	0.406	
High-quality embryos rate on day 3	4.383	0.450	9.559	0.166	-11.24	0.619	1.359	0.704	6.925	0.182	
Blastocyst formation rate on day 5	-14.244	0.025	-34.801	0.042	0.13	0.996	-6.411	0.111	-3.691	0.548	
Implantation rate	5.384	0.451	-0.770	0.190	-23.94	0.475	-2.913	0.469	9.502	0.142	

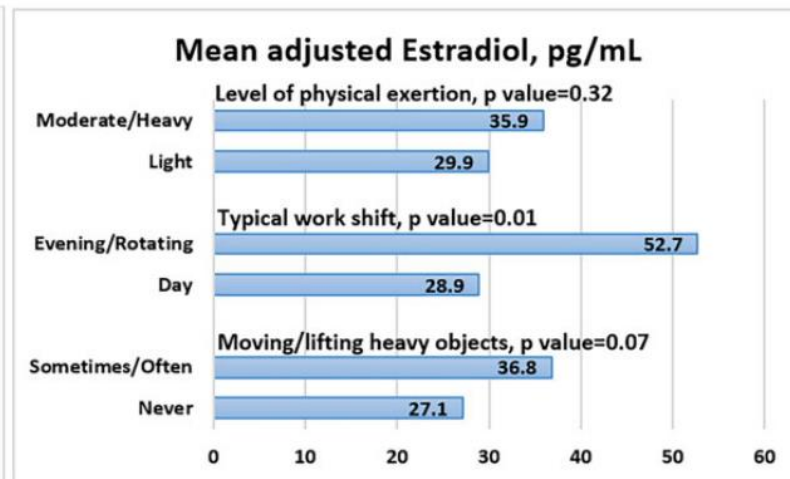
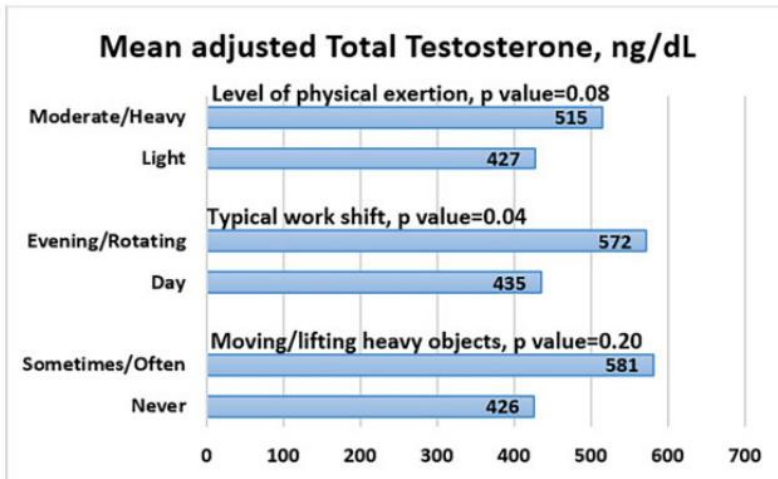
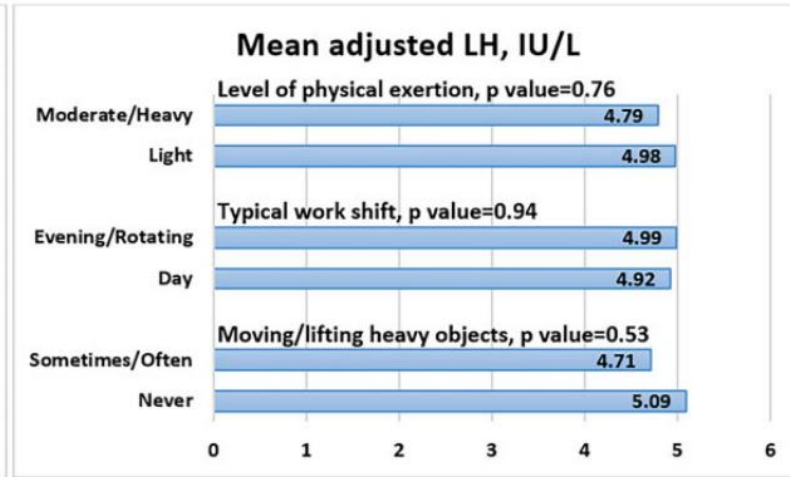
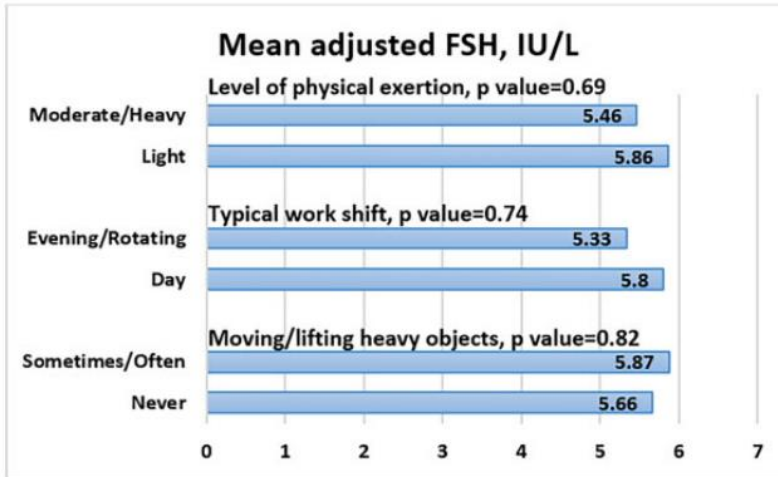
Note. B: unstandardised regression coefficient; ICSI: intracytoplasmic sperm injection

# Occupational factors and markers of testicular function among men attending a fertility center

Lidia Mínguez-Alarcón <sup>1,2,\*</sup>, Paige L. Williams<sup>3,4</sup>, Irene Souter<sup>5</sup>, Jennifer B. Ford<sup>1</sup>, Ramy Abou Ghayda<sup>6</sup>, Russ Hauser<sup>1,3,7</sup>, and Jorge E. Chavarro <sup>2,3,8</sup>; for the Earth Study Team

- ❑ Self-reported information on lifting/moving heavy objects, typical shift, and physical level of exertion at work was collected from a take-home questionnaire.
- ❑ Semen samples were analyzed following World Health Organization guidelines.
- ❑ Enzyme immunoassays were used to assess reproductive hormone concentrations.





Human Reproduction, Vol.38, No.4, pp. 529–536, 2023

# Use of laptop computers connected to internet through Wi-Fi decreases human sperm motility and increases sperm DNA fragmentation

Conrado Avendaño, M.S.,<sup>a</sup> Ariela Mata, M.S.,<sup>a</sup> César A. Sanchez Sarmiento, M.D., Ph.D.,<sup>a</sup> and Gustavo F. Doncel, M.D., Ph.D.<sup>b</sup>

<sup>a</sup> Nascentis Medicina Reproductiva, Córdoba, Argentina; and <sup>b</sup> CONRAD, Department of Obstetrics and Gynecology, Eastern Virginia Medical School, Norfolk, Virginia

Fertility and Sterility® Vol. 97, No. 1, January 2012

- ❑ Donor sperm samples, mostly normozoospermic, exposed ex vivo during 4 hours to a wireless internet-connected laptop showed a significant decrease in progressive sperm motility and an increase in sperm DNA fragmentation.
- ❑ Keeping a laptop connected wirelessly to the internet on the lap near the testes may result in decreased male fertility.



# EFFECT OF ELECTROMAGNETIC RADIATION EMITTED BY CELL PHONES ON SPERM MOTILITY AND VIABILITY - AN IN VITRO STUDY

**Kajal Khodamoradi**

University of Miami Miller School of Medicine



- Cell phones emit radiofrequency–electromagnetic radiation (RF-EMR) to transmit data for social media, web browsing, and music / podcast streaming.
- The advent of Bluetooth earbuds has presumably prolonged the amount of time the cell phone resides in the trouser pockets of men. This places the cell phone and its respective RF-EMR near the testicles for prolonged times.
- RF-EMR is considered an environmental pollutant and has been postulated to **increase oxidative stress and induce free radical formation**



# EFFECT OF ELECTROMAGNETIC RADIATION EMITTED BY CELL PHONES ON SPERM MOTILITY AND VIABILITY - AN IN VITRO STUDY

Kajal Khodamoradi

University of Miami Miller School of Medicine



- In this pilot, but adequately powered study, we observed that sperm motility and viability are negatively impacted with smartphones that utilized data **on the WIFI spectrum.**
- It appears that heat that is emanated from the device contributes to this effect, as the device was noted to be warmer than when phones were used only with either 4G or 5G.

# Other Health Conditions

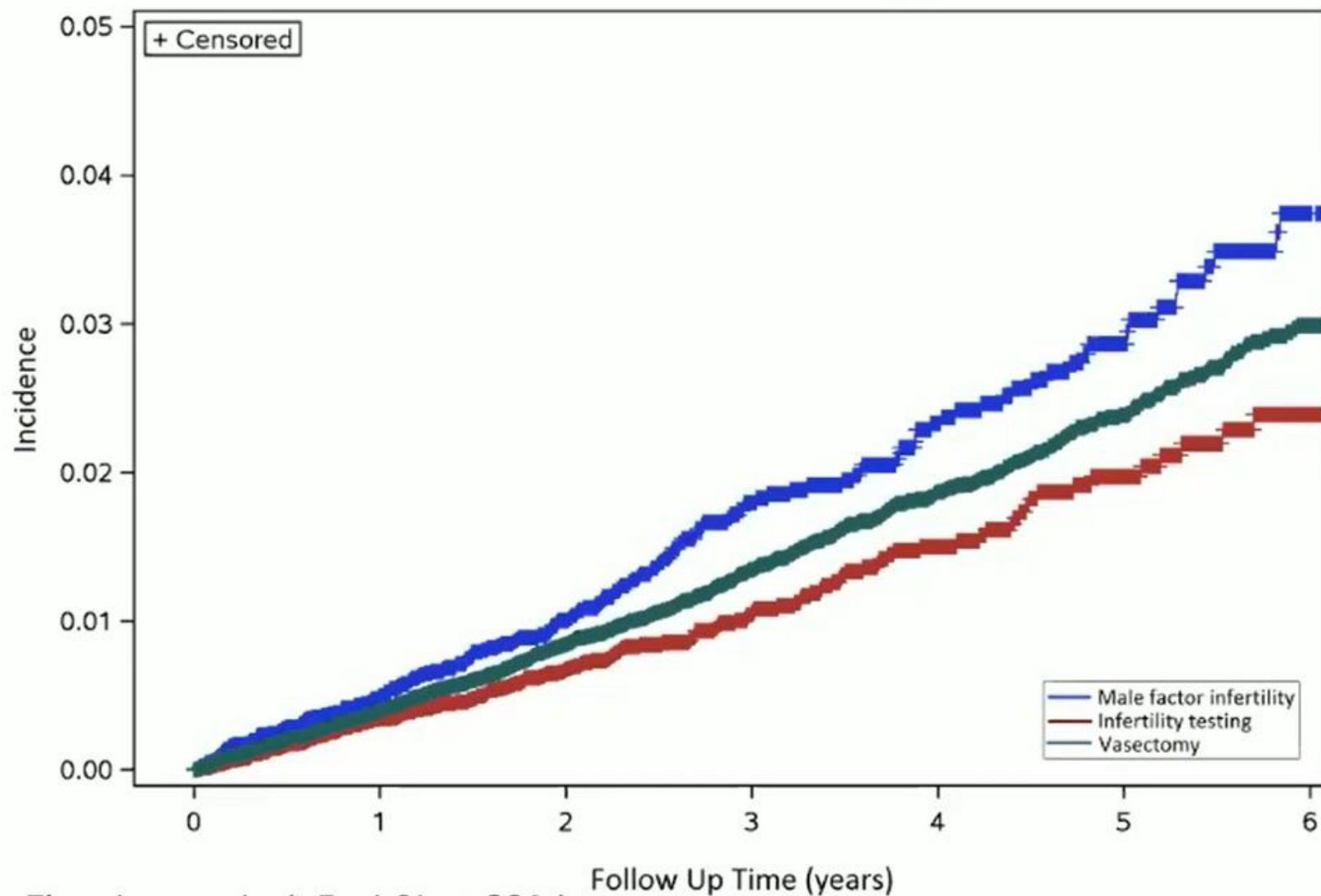
## Vascular and Metabolic Disease



FERTILITY



## Ischemic Heart Disease Incidence Estimate



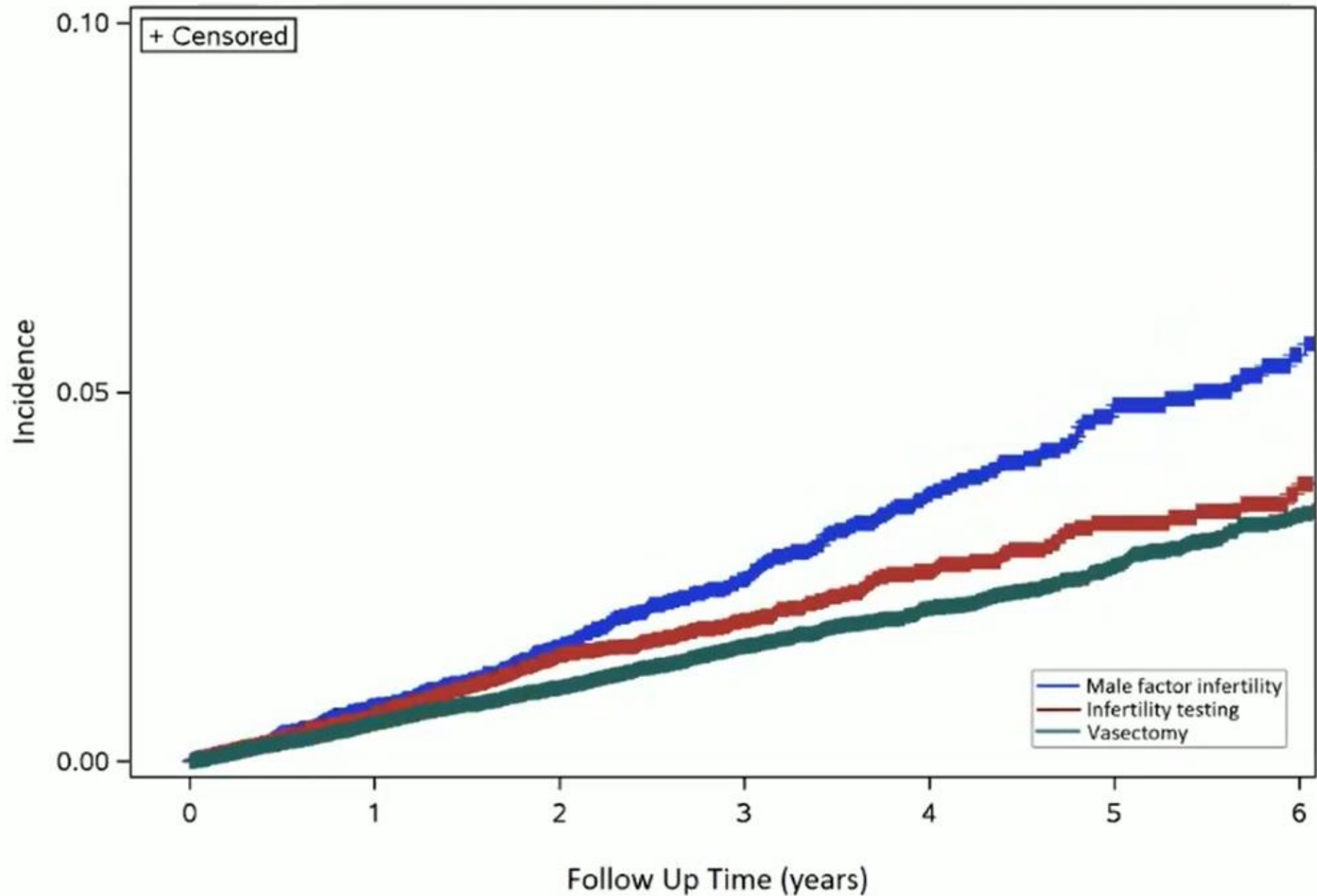
Eisenberg et al, Fert Ster, 2016



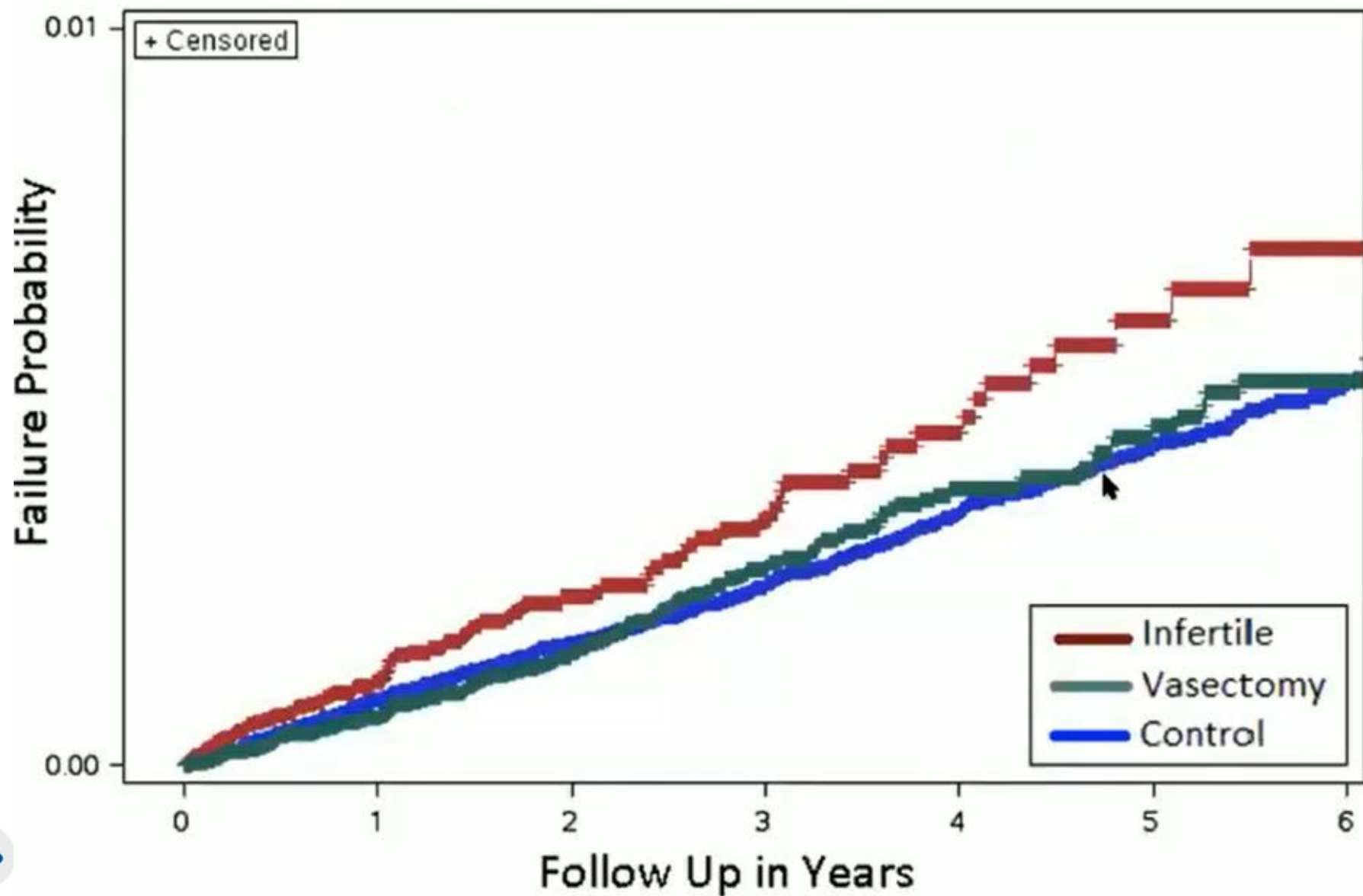
FERTILITY



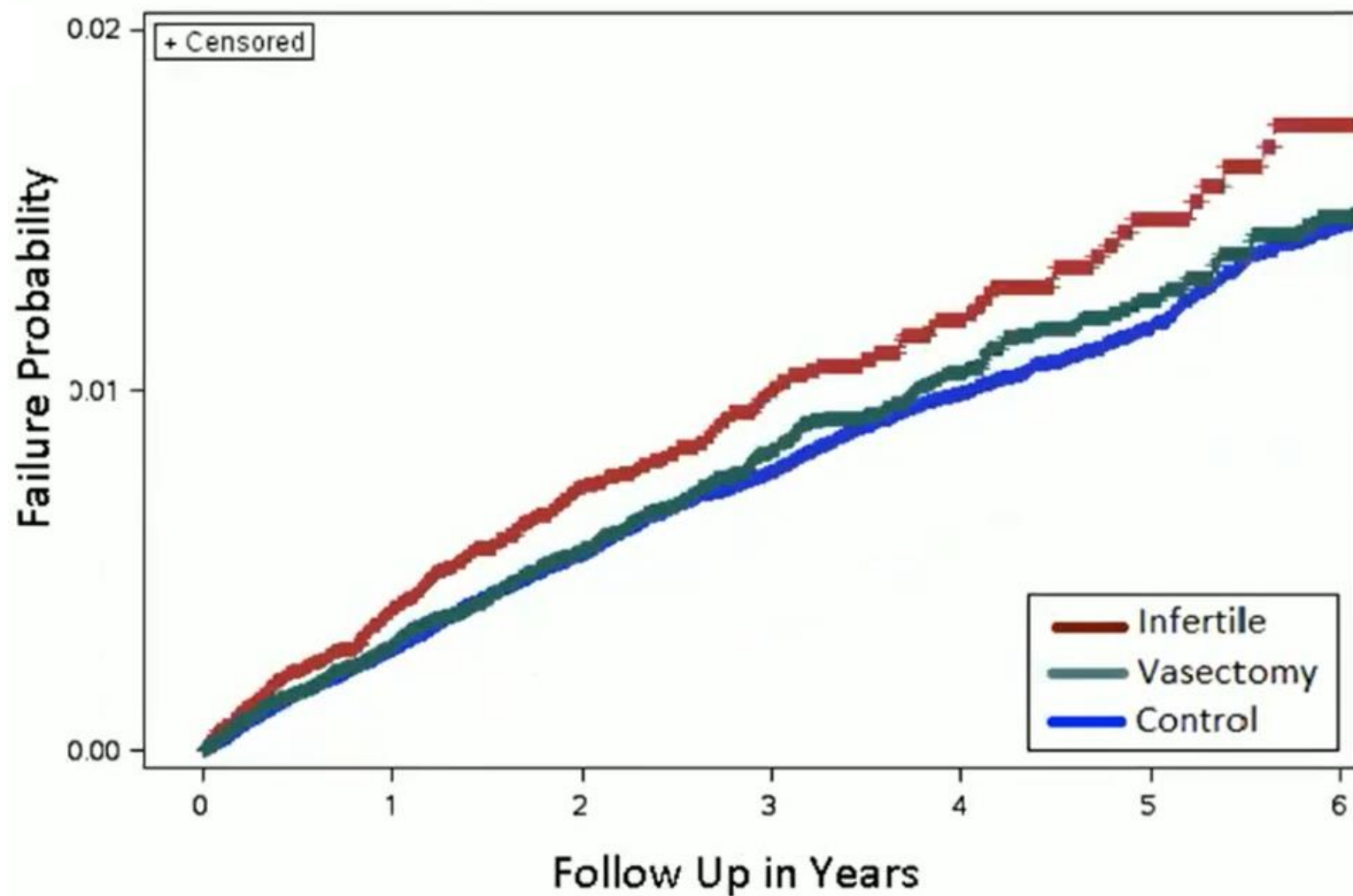
# Diabetes Incidence Estimate



# Rheumatoid Arthritis & Other Inflammatory Polyarthropathies Incidence Estimate



## Psoriasis Incidence Estimate



Brubaker et al, Andrology, 2018



FERTILITY

## Infertility and Mortality



FERTILITY

# Relationship between Semen Quality and Mortality



American Journal of Epidemiology

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Vol. 170, No. 5

DOI: 10.1093/aje/kwp168

Advance Access publication July 27, 2009

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## Original Contribution

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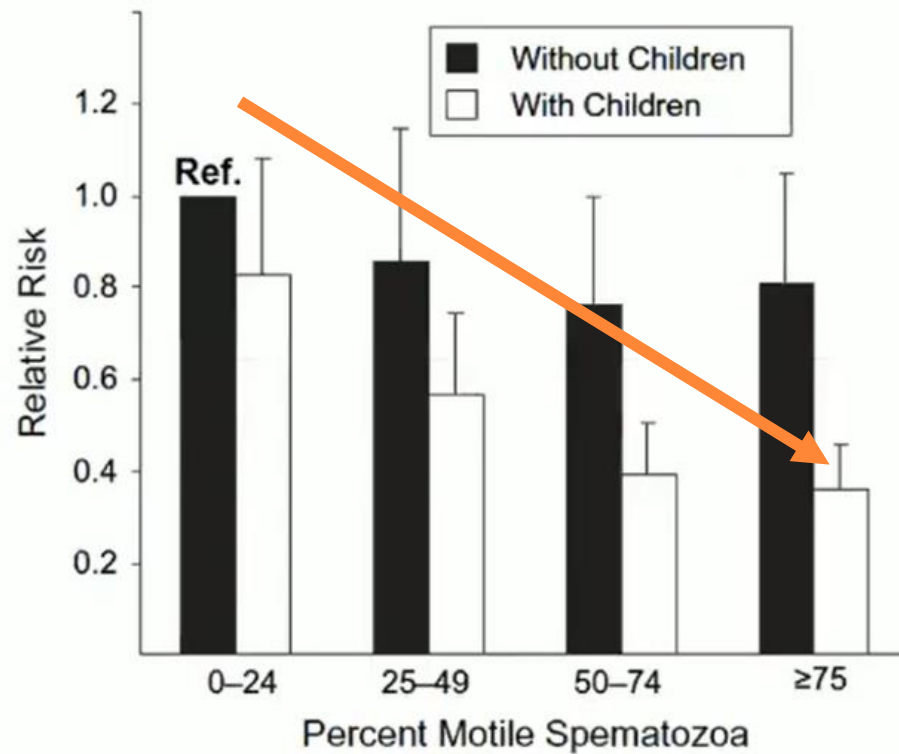
### Good Semen Quality and Life Expectancy: A Cohort Study of 43,277 Men

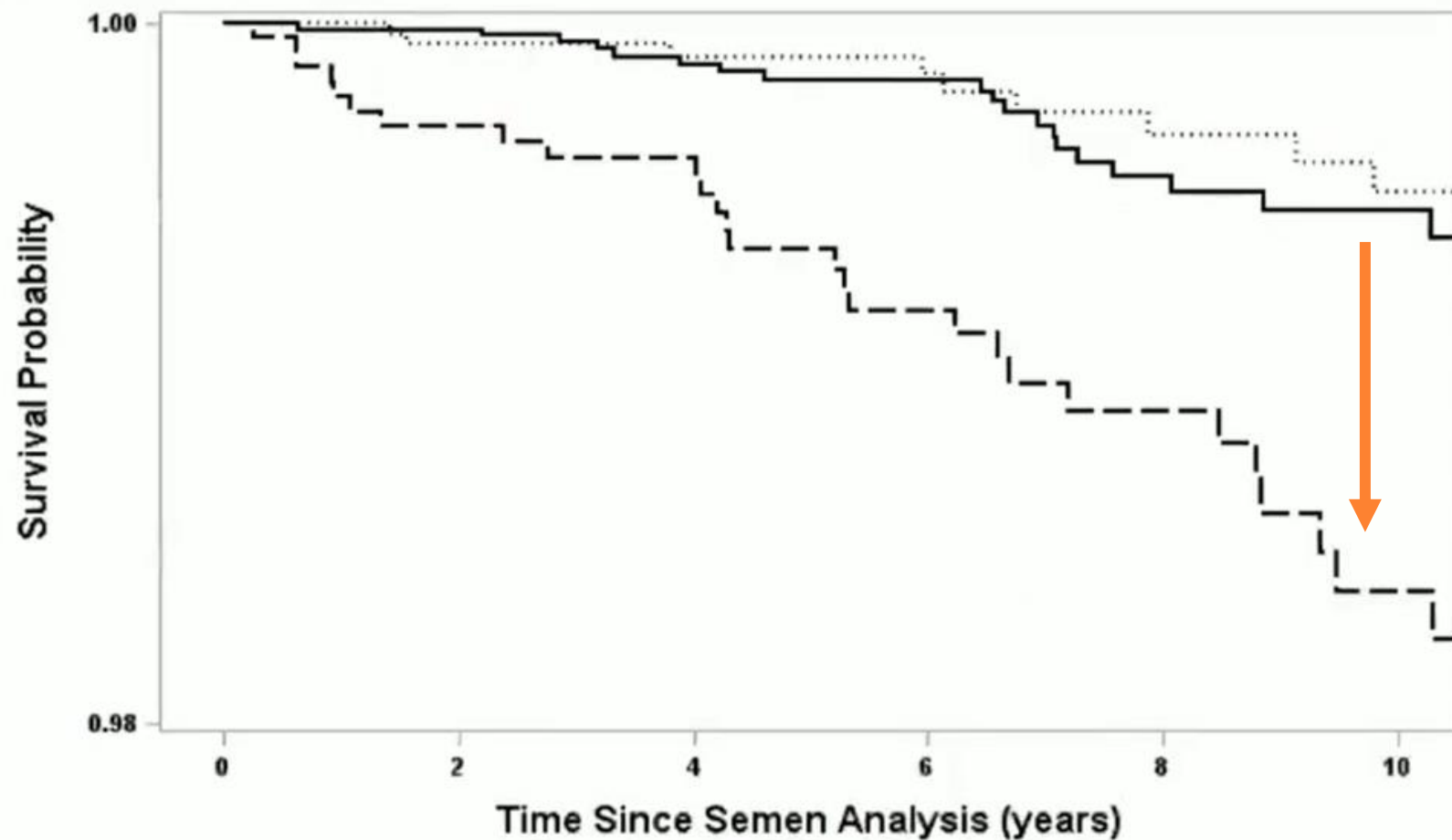
Tina Kold Jensen, Rune Jacobsen, Kaare Christensen, Niels Christian Nielsen, and Erik Bostofte



FERTILITY

# Comparison of semen parameters to mortality



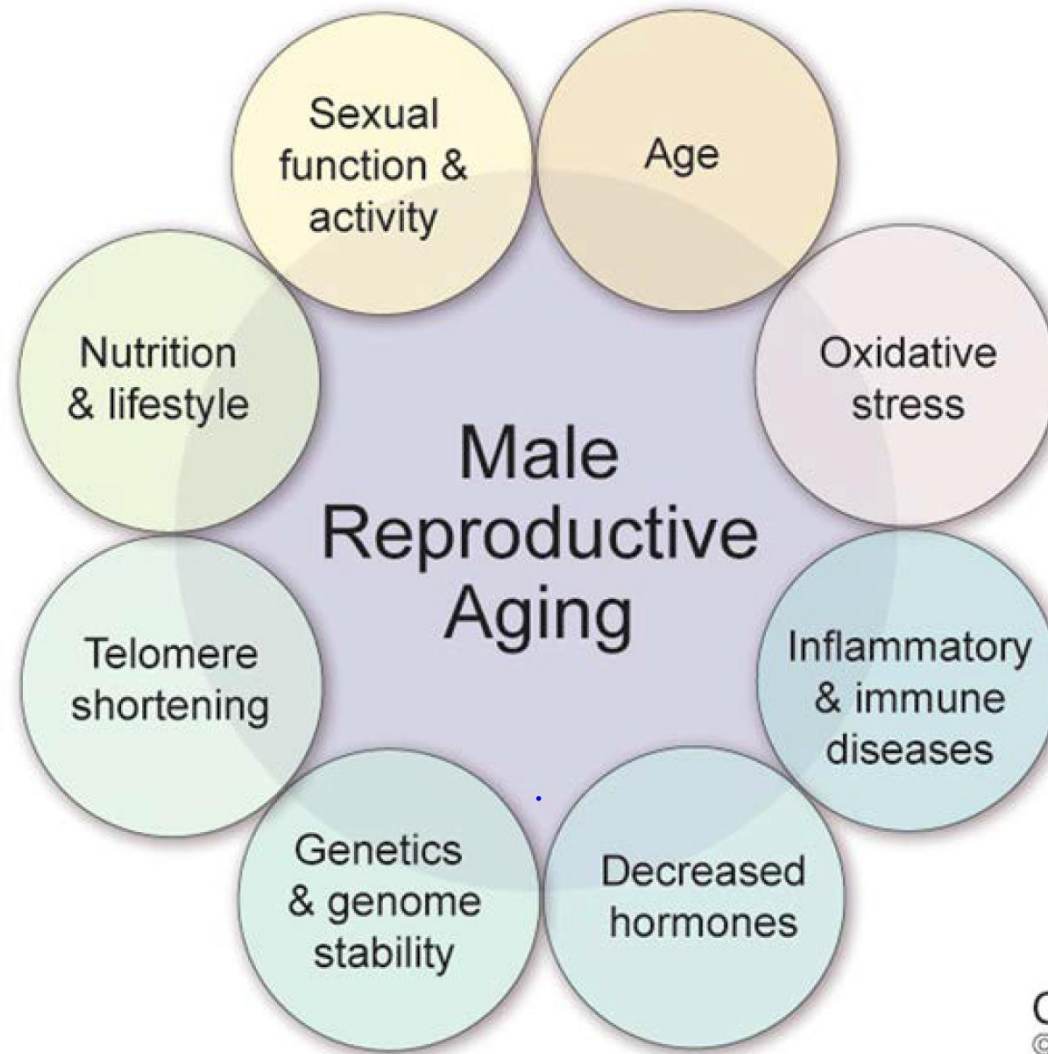


Life Table of Number of Abnormalities

	0	1	2+
0	5687	5539	4581
1	3318	3235	2675
2+	2391	2311	1952

c






CCF  
© 2014

**Figure 1** Main factors involved in impaired male infertility due to reproductive aging.



# The effect of paternal factors on perinatal and paediatric outcomes: a systematic review and meta-analysis

**Nan B. Oldereid** <sup>1,\*</sup>, **Ulla-Britt Wennerholm**<sup>2</sup>, **Anja Pinborg**<sup>3</sup>,  
**Anne Loft**<sup>4</sup>, **Hannele Laivuori**<sup>5,6,7,8</sup>, **Max Petzold**<sup>9</sup>,  
**Liv Bente Romundstad**<sup>10,11</sup>, **Viveca Söderström-Anttila**<sup>12</sup>,  
and **Christina Bergh**<sup>13</sup>

<sup>1</sup>Livio IVF-klinikken Oslo, Sørkedalsveien 10A, 0369 Oslo, Norway <sup>2</sup>Department of Obstetrics and Gynaecology, Institute of Clinical Sciences, Sahlgrenska Academy, Gothenburg University, Sahlgrenska University Hospital East, SE 416 85 Gothenburg, Sweden <sup>3</sup>Department of Obstetrics and Gynecology, Hvidovre Hospital, Institute of Clinical Medicine, Copenhagen University Hospital, Copenhagen, Denmark <sup>4</sup>Fertility Clinic, Section 4071, Copenhagen University Hospital, Rigshospitalet, Blegdamsvej 9, DK-2100 Copenhagen, Denmark <sup>5</sup>Department of Obstetrics and Gynecology, Tampere University Hospital, Teiskontie 35, FI-33521 Tampere, Finland <sup>6</sup>Faculty of Medicine and Life Sciences, University of Tampere, Arvo Ylpön katu 34, FI-33520 Tampere, Finland <sup>7</sup>Medical and Clinical Genetics, University of Helsinki and Helsinki University Hospital, Haartmaninkatu 8, FI-00290 Helsinki, Finland <sup>8</sup>Institute for Molecular Medicine Finland, Helsinki Institute of Life Science, University of Helsinki, Tukhomankatu 8, FI-00290 Helsinki, Finland <sup>9</sup>Swedish National Data Service and Health Metrics Unit, University of Gothenburg, 405 30 Gothenburg, Sweden <sup>10</sup>Spiren Fertility Clinic, Norwegian University of Science and Technology, Trondheim NO-7010, Norway <sup>11</sup>Department of Public Health, Norwegian University of Science and Technology, Trondheim, Norway <sup>12</sup>Mehiläinen Felicitas, Mannerheimintie 20A, 00100 Helsinki, Finland <sup>13</sup>Department of Obstetrics and Gynaecology, Institute of Clinical Sciences, Sahlgrenska Academy, Gothenburg University, Reproductive Medicine, Sahlgrenska University Hospital, SE-413 45 Gothenburg, Sweden

➔ 14.371 artigos, 238 incluídos, 81 para a meta-análise

➔ Idade, estilo de vida, peso, altura, gordura corporal, cigarro



**Table XI Summary results of the meta-analyses of the association between paternal factors and perinatal and paediatric outcomes.**

Exposure	Outcome	Pooled estimate (with 95% CI)	Certainty of evidence GRADE
Paternal age	PTB	1.02 (1.00–1.05)	⊕⊕○○
	Low BW	1.00 (0.97–1.03)	⊕⊕○○
	Stillbirth	1.19 (1.10–1.30)	⊕⊕○○
	★ Children with any birth defects	1.05 (1.02–1.07)	⊕⊕⊕○
	★ CHDs	1.03 (0.99–1.06)	⊕⊕⊕○
	Orofacial clefts	0.99 (0.95–1.04)	⊕⊕○○
		1.14 (1.02–1.29)*	
	★ Gastroschisis	0.88 (0.78–1.00)	⊕⊕⊕○
	★ Spina bifida	0.97 (0.90–1.04)	⊕⊕⊕○
	★ Trisomy 21	1.13 (1.05–1.23)	⊕⊕⊕○
	★ Acute lymphoblastic leukaemia	1.08 (0.96–1.21)	⊕⊕⊕○
	★ Autism and ASDs	1.25 (1.20–1.30)	⊕⊕⊕○
★ Schizophrenia	1.31 (1.23–1.38)	⊕⊕⊕○	
Paternal BMI	No meta-analysis		
Paternal smoking	PTB	1.16 (1.00–1.35)	⊕⊕○○
	Low BW	1.10 (1.00–1.21)	⊕⊕○○
	SGA	1.22 (1.03–1.44)	⊕⊕○○
	CHDs	1.75 (1.25–2.44)	⊕⊕○○
	Orofacial clefts	1.51 (1.16–1.97)	⊕⊕○○
	Brain tumours	1.12 (1.03–1.22)	⊕⊕○○

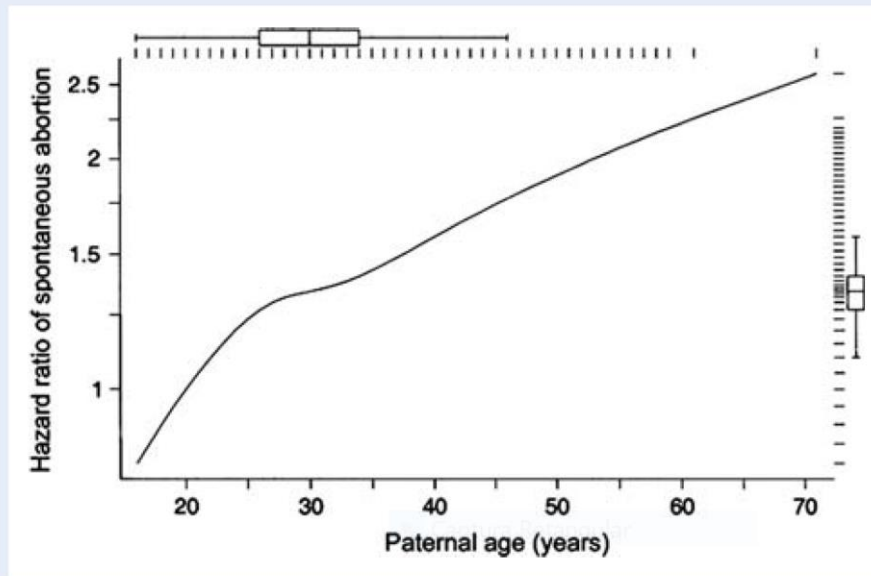


\*Exposure: Paternal age >45 years.

## Paternal age and reproduction

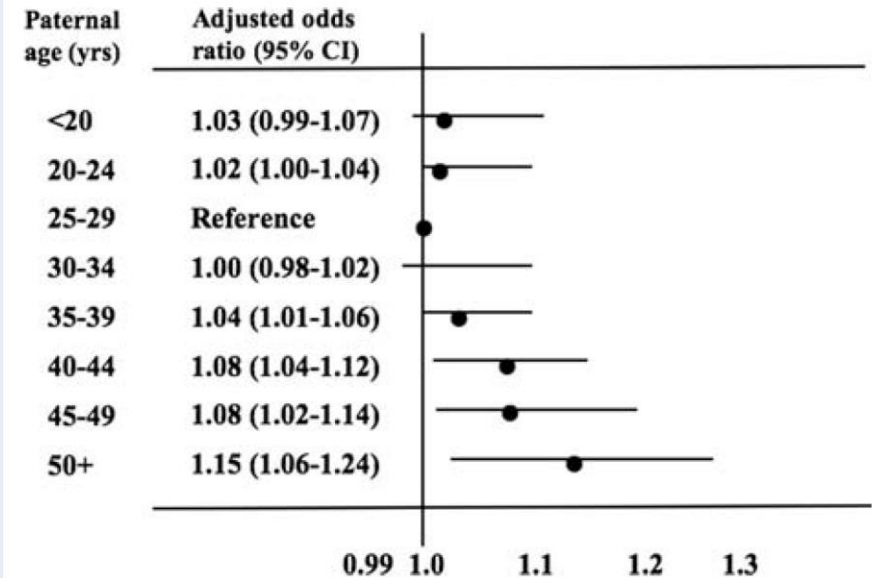
Gideon A. Sartorius<sup>1,2</sup> and Eberhard Nieschlag<sup>1,3</sup>

<sup>1</sup>Centre of Reproductive Medicine and Andrology of the University, Domagkstrasse 11, D-48149 Muenster, Germany <sup>2</sup>Present address: <sup>3</sup>University Women's Hospital Basel, Spitalstrasse 21, CH-4031 Basel, Switzerland

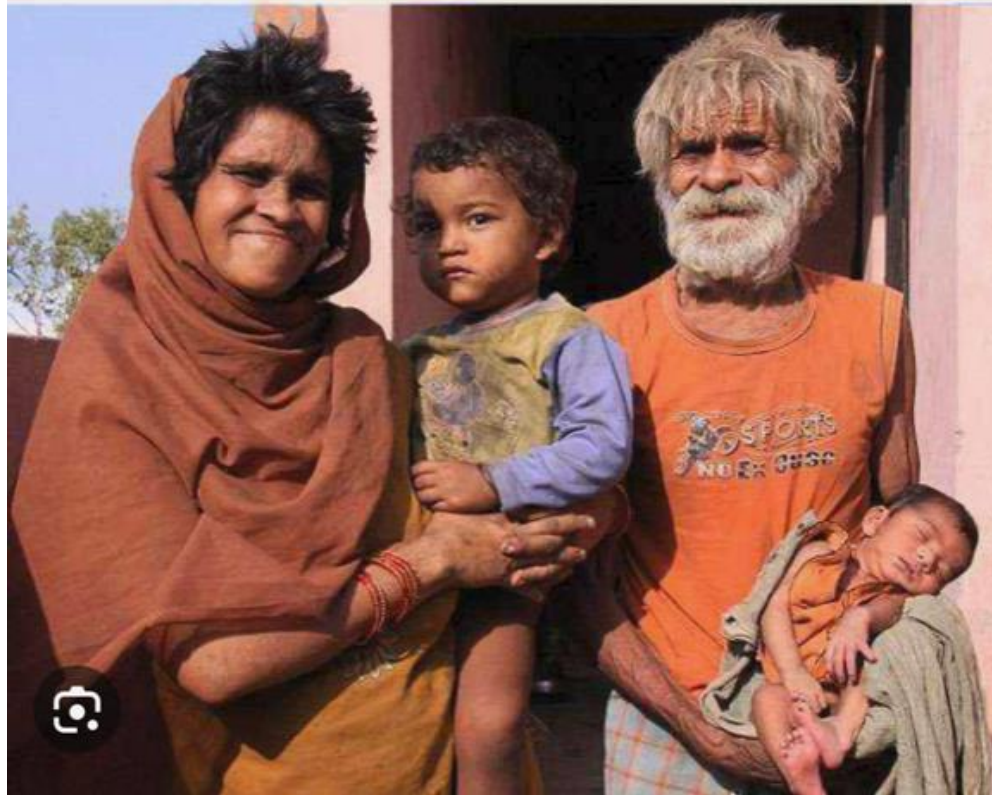


**Figure 3** Hazard ratios of spontaneous miscarriages between 6 and 20 weeks according to paternal age adjusted for different confounders including maternal age (using prospective data from 5121 Californian women, men aged 20 years as referent).

Boxplots along the top and right side indicate data distribution according to each axis (with permission from Slama *et al.*, 2005).



**Figure 4** Relative risk of birth defects depending on paternal age. Retrospective analysis of 5 213 248 subjects in the USA. Increased risk for heart defects, circulatory/respiratory defects, diaphragmatic hernia, tracheo-oesophageal fistulas, musculo-skeletal anomalies (data extracted from Yang *et al.*, 2007).

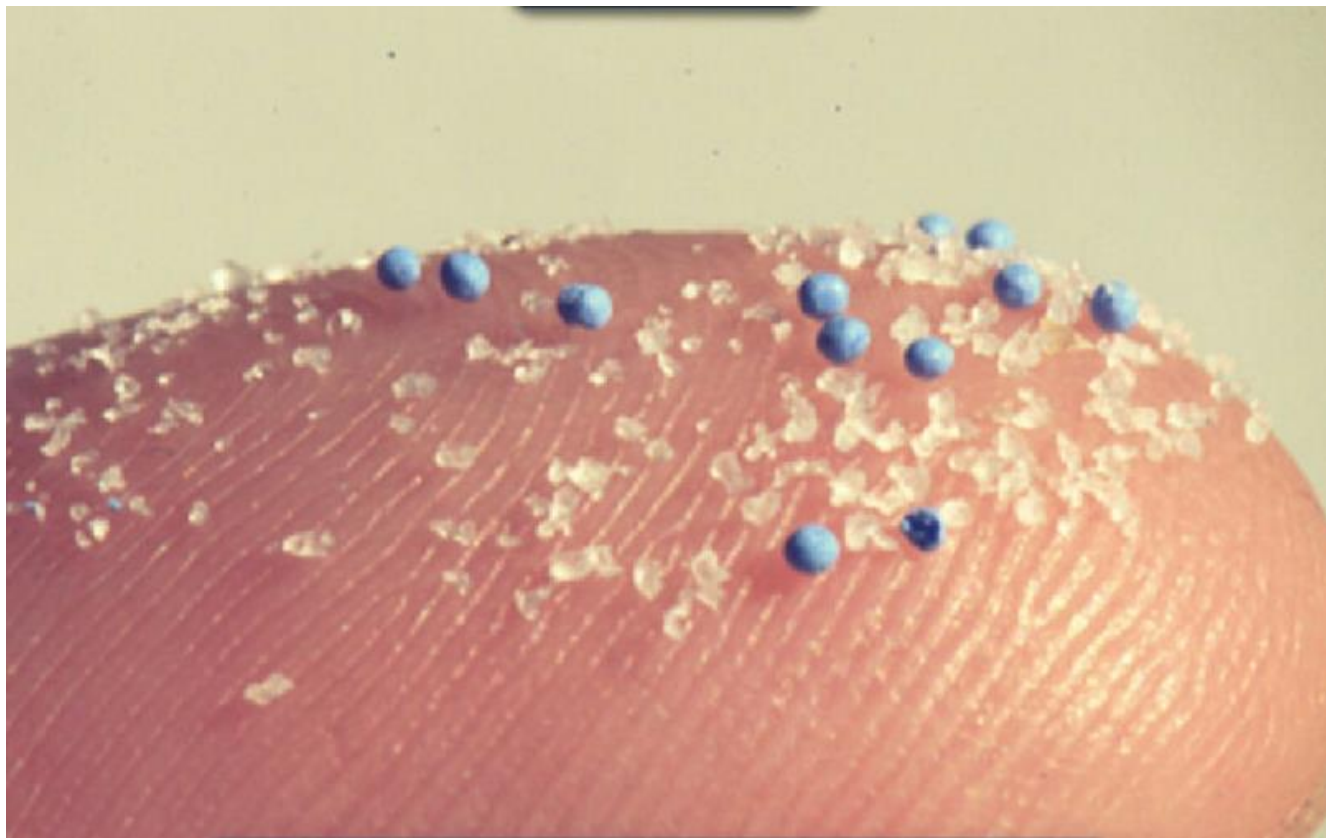


Aos 96 anos, indiano é o pai  
mais velho do mundo -...



FERTILITY





- ❑ O estudo foi realizado com moradores da região da Campânia e detectou no sêmen de seis pacientes **16 fragmentos de microplásticos com dimensões entre dois e seis micrômetros**, ou seja, menores que um grão de poeira.
- ❑ Entre as substâncias encontradas **estão polipropileno, polietileno, poliestireno, cloreto de polivinila, policarbonato e material acrílico.**

# Summary

- Infertility = Health
- Infertility may provide window into health
  - Cancer
  - Cardiovascular Disease
  - Metabolic Disease
  - Immune Deficiency
  - Hormonal Imbalances
  - Genetic Defects
  - Environmental Factors
  - Lifestyle Choices
  - Psychological Health

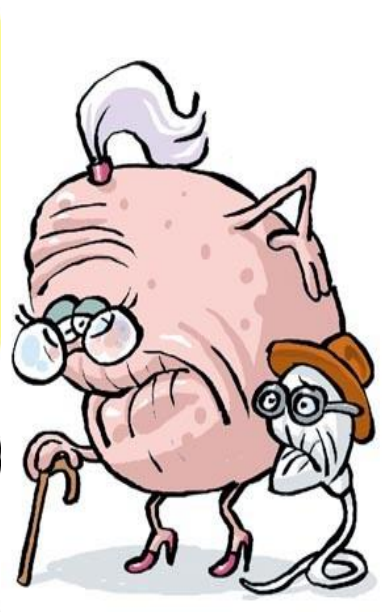
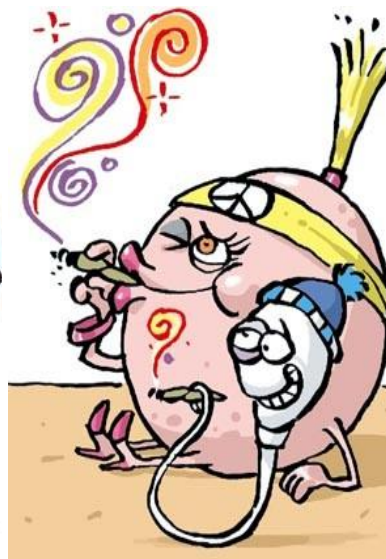
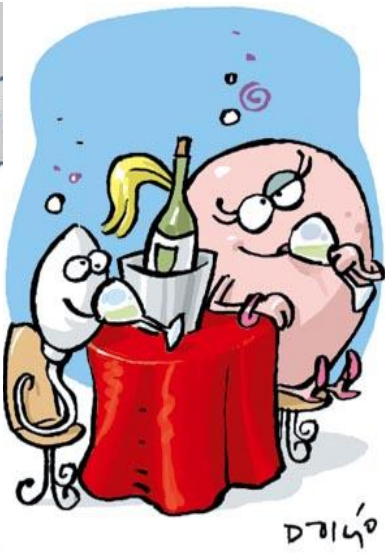


**Male infertility as a window to health**





# Dez mandamentos para preservar sua Fertilidade



# Thank you! Obrigado!

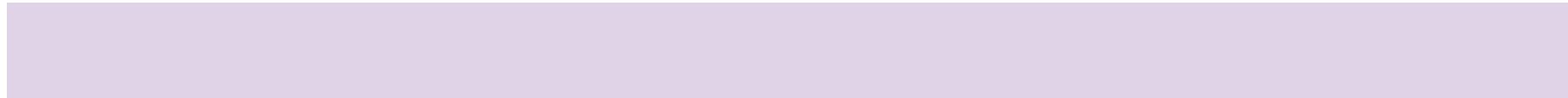
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