



XV

JORNADA PAULISTA DE UROLOGIA

4 A 6 DE MAIO DE 2017

CENTRO DE CONVENÇÕES DE CAMPOS DO JORDÃO

BOAS PRÁTICAS E NOVAS TECNOLOGIAS

Colheita de espermatozóides para FIV: Punção de epidídimo e Microdissecção de Testículo

Edson Borges Jr.
FERTILITY MEDICAL GROUP



Acesse nosso blog  

Faça sua pesquisa...



FERTILITY ▾

SERVIÇOS ▾

TRATAMENTOS

ÁREA MÉDICA ▾

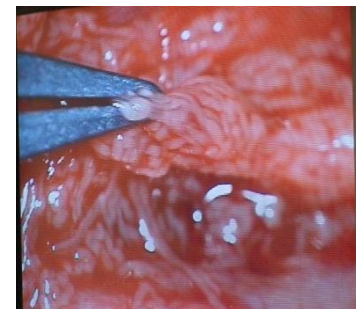
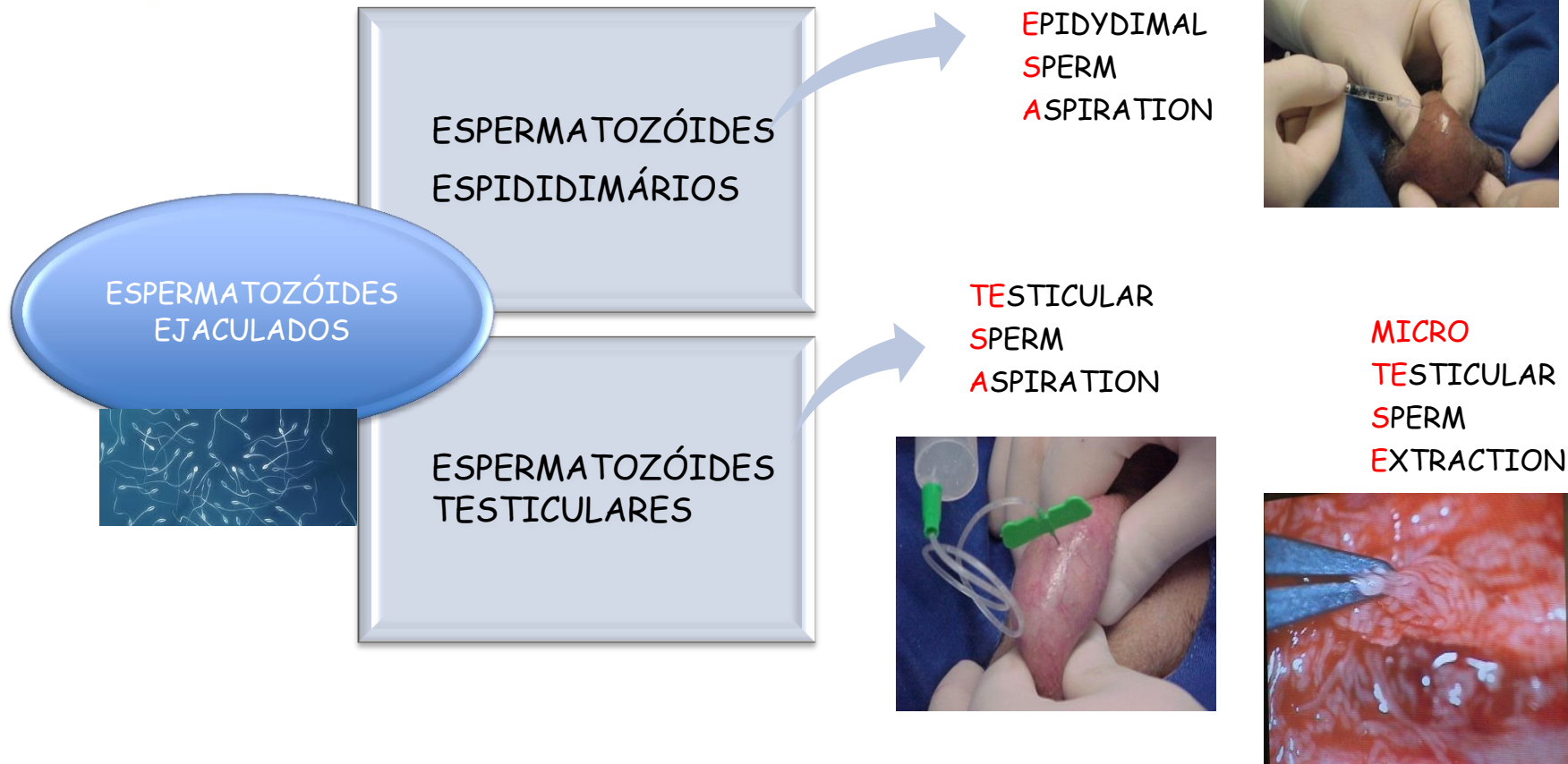
ÁREA DO PACIENTE ▾

CURSOS

PUBLICAÇÕES ▾

CONTATO ▾

<http://fertility.com.br/producao-cientifica-2017/>



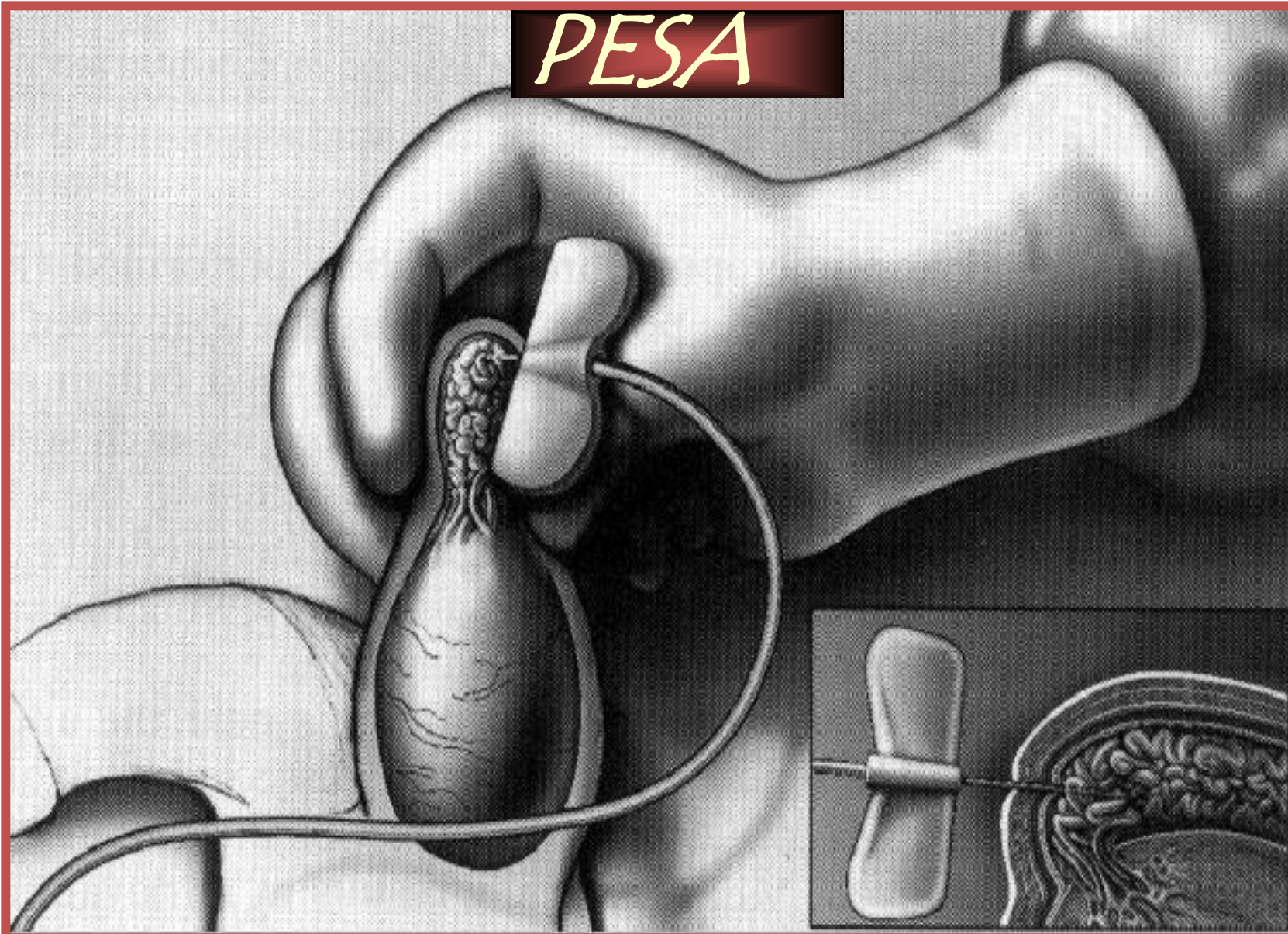
TESA / PESA







PESA



PESA



PESA



TESA



TESA



TESA

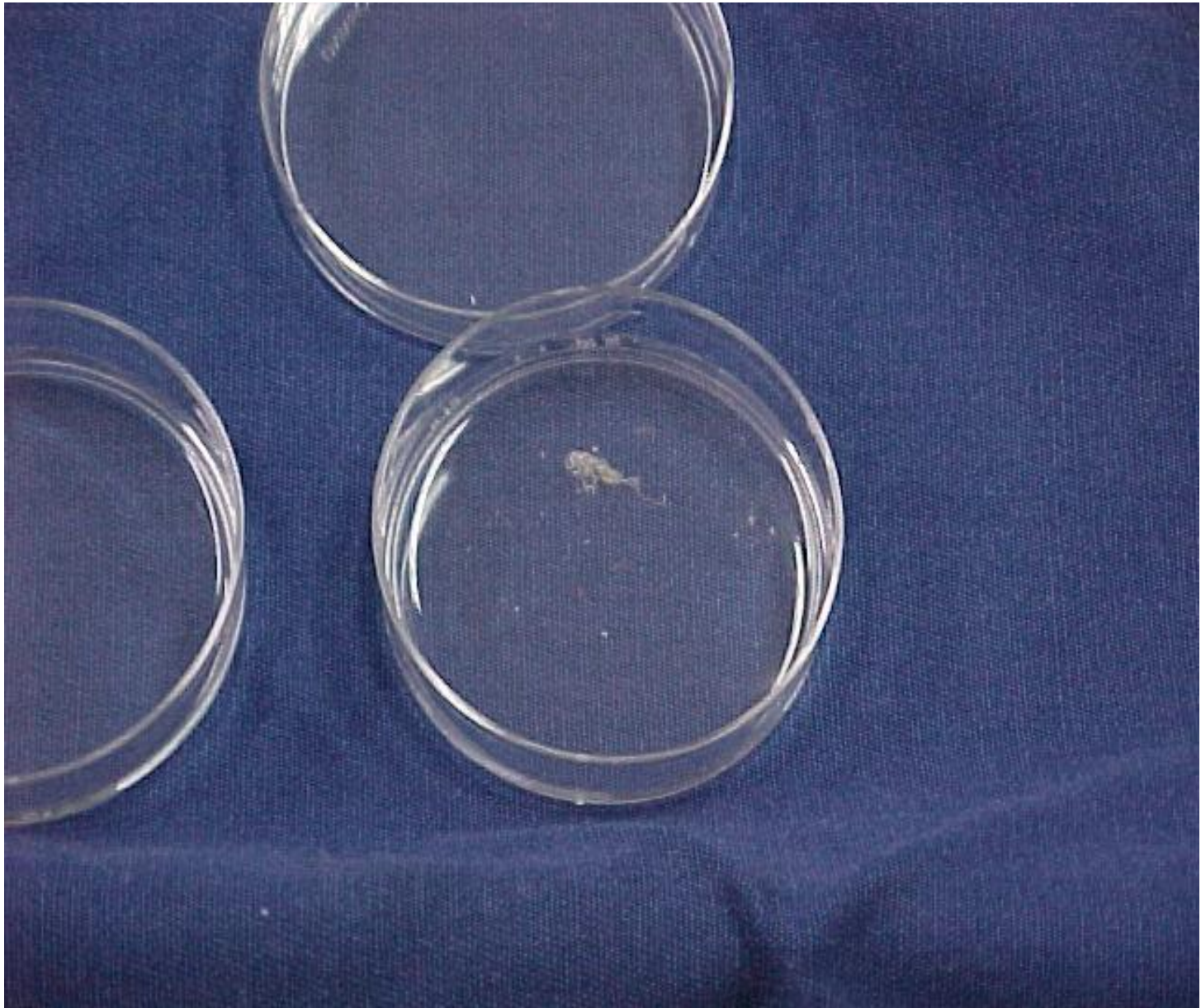


TESA

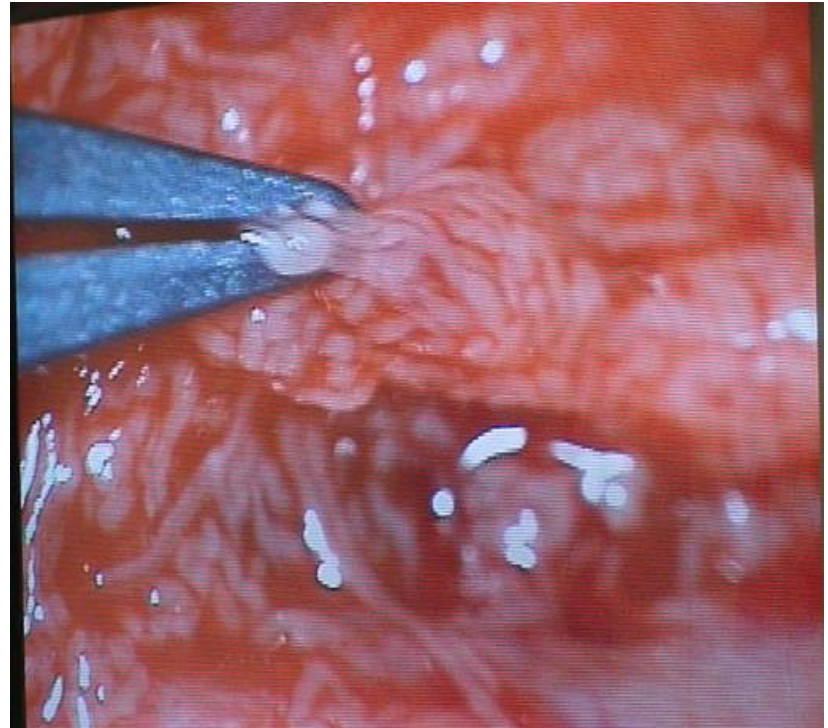








microTESE







Técnicas de RA

Quanto ao TIPO DE AZOOSPERMIA



The Aging Male, 13(1):44-50, 2010

¹Fertility – Assisted Fertilization Center, São Paulo, SP, Brazil, ²Sapientiae Institute – Educational and Research Center in Assisted Reproduction, São Paulo, SP, Brazil, and ³Institute of Biotechnology – Caxias do Sul University, Caxias do Sul, RS, Brazil

ORIGINAL ARTICLE

Edson Borges Jr., *et al*

Assisted reproductive technology outcomes in azoospermic men: 10 years of experience with surgical sperm retrieval

Table II. ICSI outcomes from patients with obstructive azoospermia when the injected sperm were retrieved from the testicle (TESA) or epididymis (PESA).

Variable	Study group		p value
	OA-TESA (n=103)	OA-PESA (n=171)	
Normal fertilization rate (%)	57.9 ± 9.5 (48.5–67.5)	65.2 ± 4.1 (54.7–69.3)	0.0017
Abnormal fertilization rate (%)	13.2 ± 6.3 (6.5–19.5)	12.7 ± 5.3 (7.9–18.0)	0.9437
Fertilization failure rate (%)	28.9 ± 8.9 (20.2–37.8)	22.1 ± 6.0 (15.8–28.1)	0.1081
Non-cleaved rate (%)	9.87 ± 5.9 (4.2–15.8)	7.46 ± 3.9 (3.5–11.4)	0.4406
Pregnancy rate (%)	31.9 ± 9.0 (23.0–41.0)	32.5 ± 7.5 (25.9–40.0)	0.8803
Abortion rate (%)	38.8 ± 9.6 (29.6–48.4)	18.0 ± 5.8 (12.2–23.8)	0.0387
Implantation rate (%)	9.4 ± 5.6 (3.8–15.0)	10.5 ± 4.0 (5.5–14.5)	0.6054

Values in percentage expressed as mean ± SD (confidence interval of the frequencies).



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Table IV. ICSI outcomes when the injected sperm were retrieved from the testicle (TESA) of patients with obstructive (OA) or non-obstructive (NOA) azoospermia.

Variable	Study group		p value
	OA-TESA (n=103)	NOA-TESA (n=102)	
Normal fertilization rate (%)	57.9 ± 9.5 (48.5–67.5)	50.4 ± 9.3 (40.3–59.7)	0.0050
Abnormal fertilization rate (%)	13.2 ± 6.3 (6.5–19.5)	13.98 ± 6.8 (7.3–20.7)	0.4421
Fertilization failure rate (%)	28.9 ± 8.9 (20.2–37.8)	35.65 ± 11.8 (27.6–47.4)	0.0023
Non cleaved rate (%)	9.87 ± 5.9 (4.2–15.8)	16.1 ± 17 (8.9–23.1)	0.0034
Pregnancy rate (%)	31.9 ± 9.0 (23.0–41.0)	29.7 ± 9.2 (21.1–38.9)	0.4166
Abortion rate (%)	38.8 ± 9.6 (29.6–48.4)	37.0 ± 9.4 (27.6–46.4)	0.9992
Implantation rate (%)	9.4 ± 5.6 (3.8–15.0)	9.65 ± 6.1 (4.2–15.8)	0.8519

Values in percentage expressed as mean ± SD (confidence interval of the frequencies).



The Aging Male, 13(1):44-50, 2010

informa
healthcare

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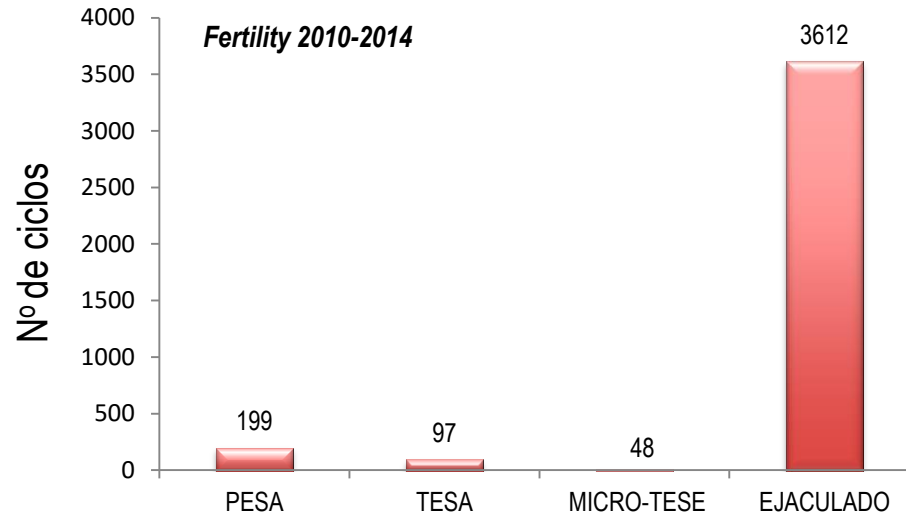
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Técnicas de RA

Quanto a ORIGEM DO ESPERMATOZÓIDE



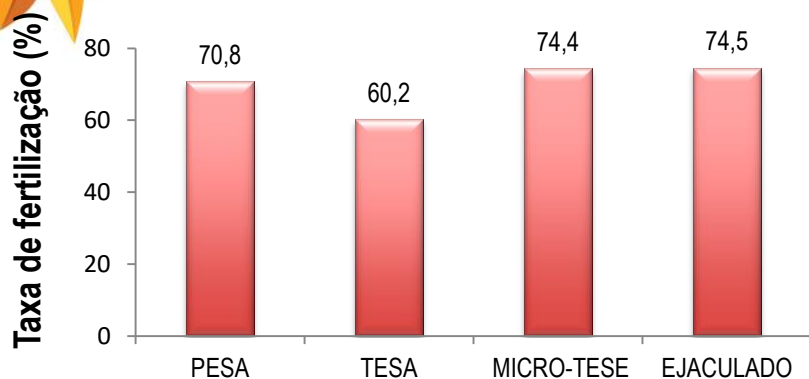
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Características	PESA	TESA	MICRO-TESE	EJACULADO
Nº de ciclos	199	97	48	3612
Idade média ± DP	34.9 ± 4.6	34.8 ± 5.4	32.2 ± 2.7	35.8 ± 4.7
Nº de folículos aspirados ± DP	20.4 ± 15.4	18.1 ± 11.3	15.9 ± 14.4	15.8 ± 12.4
Nº de oócitos recuperados ± DP	14.2 ± 10.8	13.3 ± 9.3	11.0 ± 11.4	11.0 ± 9.0
Nº de oócitos micromanipulados ± DP	9.8 ± 6.4	8.9 ± 5.1	8.0 ± 6.9	7.8 ± 5.8

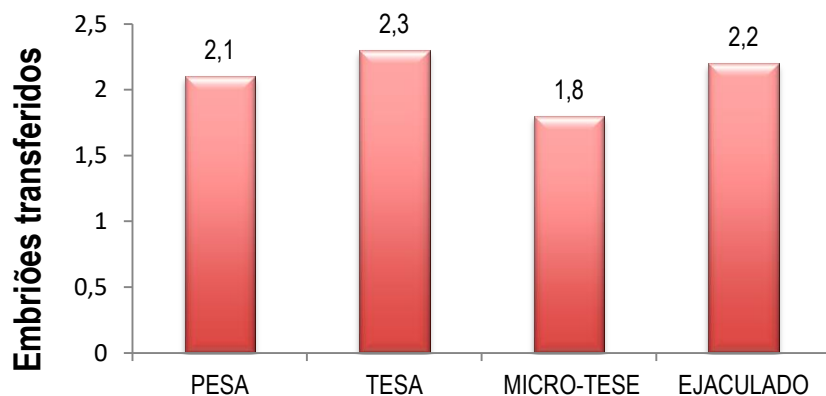


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COMPARAÇÃO	VALOR DE P
PESA VS TESA	< 0.001
PESA VS MICRO-TESE	> 0.05
PESA VS EJACULADO	> 0.05
TESA VS MICRO-TESE	> 0.05
TESA VS EJACULADO	< 0.001
MICRO-TESE VS EJACULADO	> 0.05

ANOVA

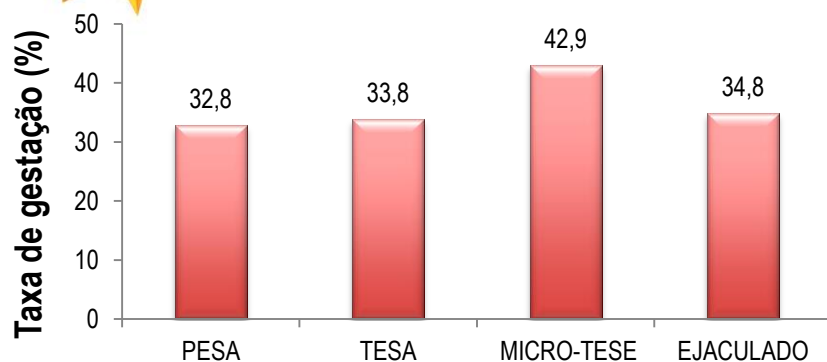


COMPARAÇÃO	VALOR DE P
PESA VS TESA	> 0.05
PESA VS MICRO-TESE	> 0.05
PESA VS EJACULADO	> 0.05
TESA VS MICRO-TESE	> 0.05
TESA VS EJACULADO	> 0.05
MICRO-TESE VS EJACULADO	> 0.05

ANOVA

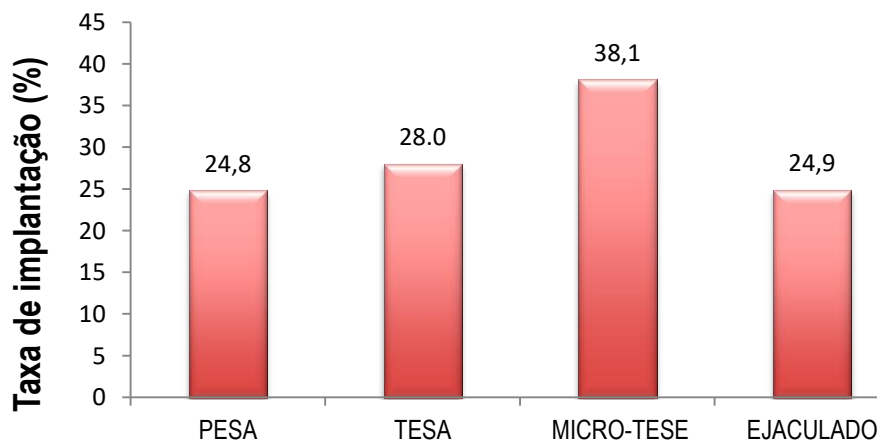


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COMPARAÇÃO	VALOR DE P
PESA VS TESA	> 0.05
PESA VS MICRO-TESE	> 0.05
PESA VS EJACULADO	> 0.05
TESA VS MICRO-TESE	> 0.05
TESA VS EJACUALDO	> 0.05
MICRO-TESE VS EJACULADO	> 0.05

QUI-QUADRO



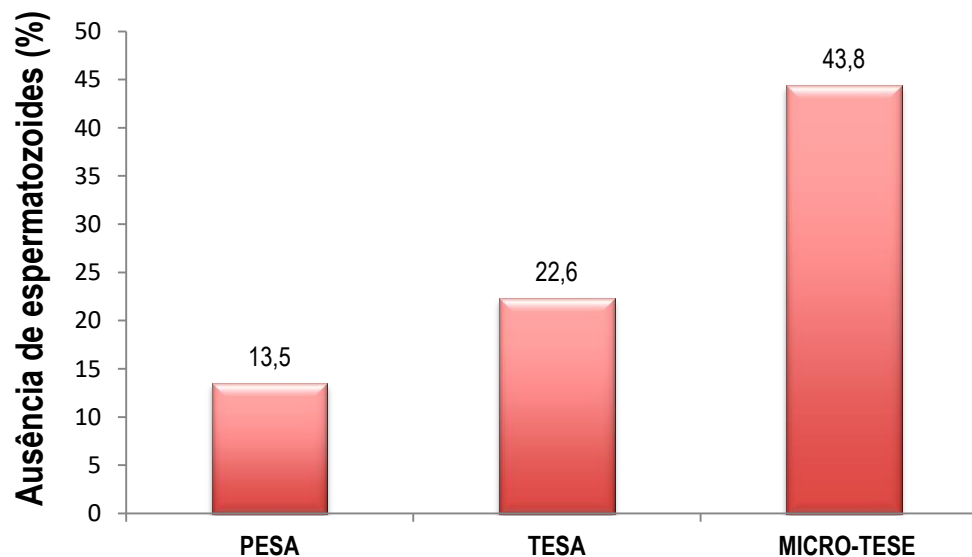
COMPARAÇÃO	VALOR DE P
PESA VS TESA	> 0.05
PESA VS MICRO-TESE	> 0.05
PESA VS EJACULADO	> 0.05
TESA VS MICRO-TESE	> 0.05
TESA VS EJACUALDO	> 0.05
MICRO-TESE VS EJACULADO	> 0.05



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Técnica	Nº Ciclos	Ciclos com ausência de espermatozóide	% de falha
PESA	199	27*	13.5
TESA	97	21	22.6
microTESE	48	21	43.8

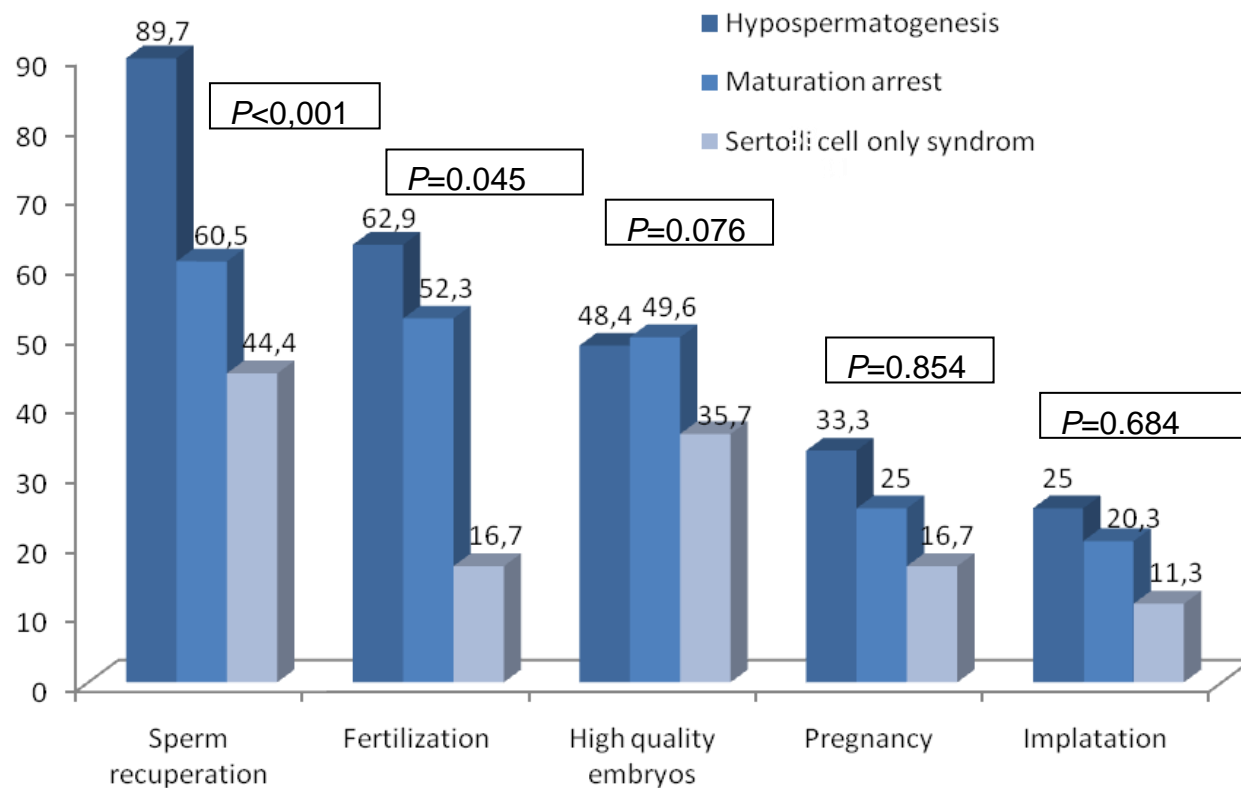
* 100% após TESA



The prognostic value of the testicular histopathological pattern for sperm retrieval and intracytoplasmic sperm injection outcomes in non-obstructive azoospermic patients

O valor prognóstico do padrão histopatológico testicular na recuperação de espermatozóides e nos resultados da injeção intracitoplasmática de espermatozóides em pacientes com azoospermia não-obstrutiva

Edson Borges Jr.^{a,b}, Daniela Paes de Almeida Braga^{a,b}, Rita de Cássia Savio Figueira^a, Amanda Souza Setti^b, Assumpto Iaconelli Jr.^{a,b}, Fabio Firmbach Pasqualotto^c





Urology, Volume 75, Issue 1, January 2010, Pages 87-91

Infertility

Predictive Factors of Repeat Sperm Aspiration Success

Edson Borges, Jr., Daniela Paes de Almeida Ferreira Braga, Tatiana Carvalho de Sousa Bonetti, Fabio Firmback Pasqualotto, and Assumpto Iaconelli Jr.



☞ 189 patients OA=80 - NOA=109; 290 TESA

❖ TESA 1X: 143

❖ TESA 2X: 46

❖ TESA 3X: 42

❖ TESA 4X: 19



Urology, Volume 75, Issue 1, January 2010, Pages 87-91

Infertility

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TESA attempt

Positive sperm retrieval in a previous attempt

OA: sperm retrieval: 93.7%

Second

75/75 (100%)



Urology, Volume 75, Issue 1, January 2010, Pages 87-91

Infertility

Predictive Factors of Repeat Sperm Aspiration Success

Edson Borges, Jr., Daniela Paes de Almeida Ferreira Braga, Tatiana Carvalho de Sousa Bonetti, Fabio Firmback Pasqualotto, and Assumpto Iaconelli Jr.



<i>TESA attempt</i>	<i>Positive sperm retrieval in a previous attempt</i>	<i>Negative sperm retrieval in a previous attempt</i>
Second	26/28 (92.8%)	3/18 (16.6%)
Third	23/28 (82.1%)	8/14 (57.1%)
Fourth	10/14 (71.4%)	2/5 (40.0%)



Human Reproduction, Vol.26, No.7 pp. 1752–1758, 2011

Advanced Access publication on April 21, 2011 doi:10.1093/humrep/der121

human
reproduction

ORIGINAL ARTICLE *Infertility*

Neonatal outcome of 724 children born after ICSI using non-ejaculated sperm

F. Belva^{1,*}, F. De Schrijver¹, H. Tournaye², I. Liebaers^{1,2}, P. Devroey², P. Haentjens³, and M. Bonduelle¹

¹Center for Medical Genetics, UZ Brussel, Brussels 1090, Belgium ²Center for Reproductive Medicine, UZ Brussel, Brussels, Belgium

³Center for Outcomes Research and Laboratory for Experimental Surgery, UZ Brussel, Brussels, Belgium

Overall ***neonatal health in terms of birth parameters, major anomalies and chromosomal aberrations*** of children born by the use of non-ejaculated sperm ***seems reassuring*** in comparison to the outcome of children born after the use of ejaculated sperm.