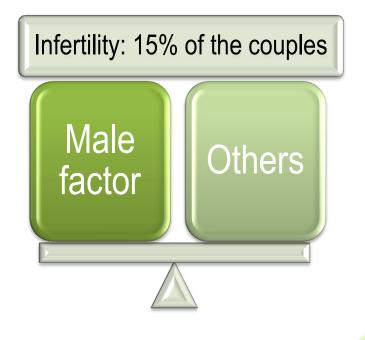
# MSOME I+II: A NEW CUT-OFF VALUE FOR MALE INFERTILITY AND EMBRYO DEVELOPMENT PREDICTION ON INTRACYTOPLASMIC SPERM INJECTION CYCLES

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✓ It is estimated that 72.4 million couples globally experience fertility problems



# World Health Organization (WHO)

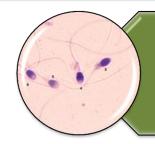
- Sperm count
- Sperm motility
- Sperm morphology

**Normal** 

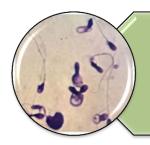
**Abnormal** 



# Sperm morphological assessment



# Fixed stained cells



# Detection of major abnormalities



Dependent on the method, operator, and optical system



# Motile Sperm Organelle Morphology Examination



Unstained, Real-time, observation of spermatozoa



High magnification x6,300 – x13,000



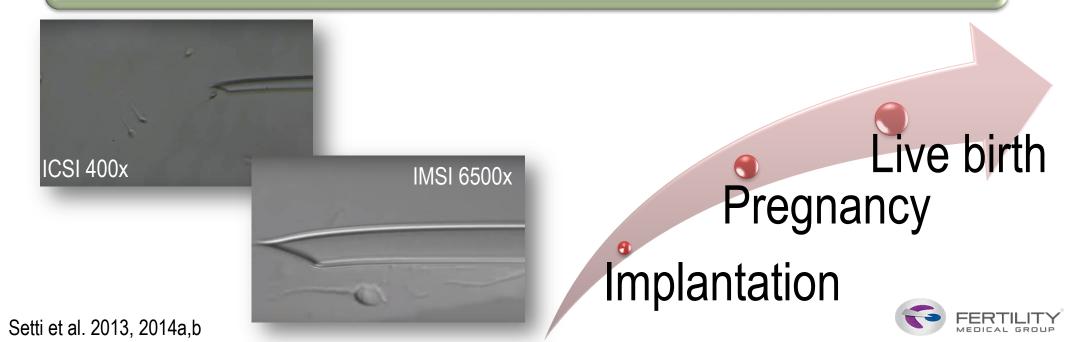
Inverted microscope with NIC and video magnification



# Motile Sperm Organelle Morphology Examination



Intracytoplasmic Morphologically Selected Sperm Injection



Direct correlation with male infertility?

Direct correlation with seminal characteristics?

Direct correlation with ICSI outcomes?



## **OBJECTIVE**

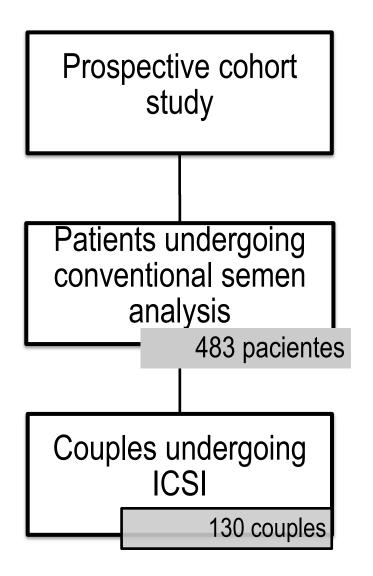
To investigate if MSOME can bring additional information to semen analysis, in terms of better definition of male infertility

To investigate if MSOME classification is a better prognosis to ICSI success compared with standard seminal analysis

To define a MSOME cutoff value for successful blastocyst formation



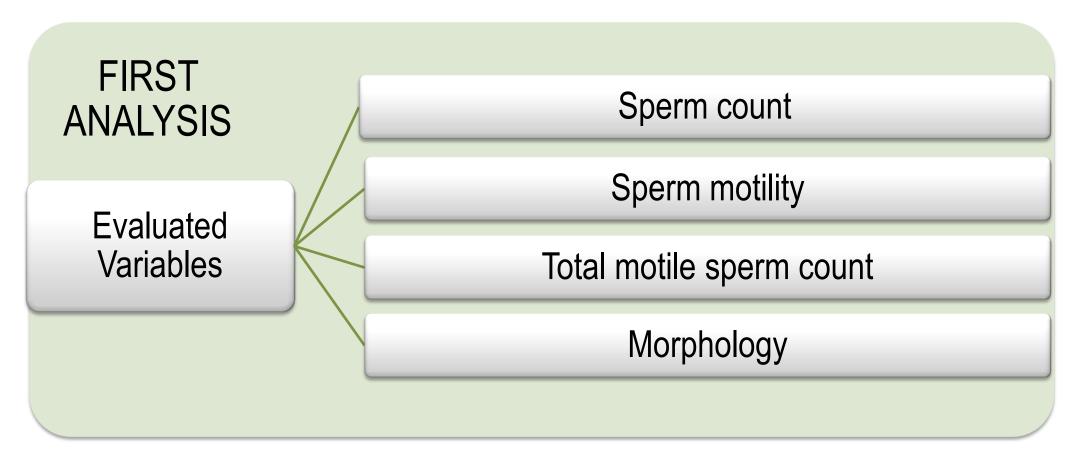
STUDY DESIGN



Correlation of MSOME grades and seminal parameters

Correlation of MSOME grades and ICSI outcomes.







Fertilisation rate SECOND **ANALYSIS** Embryo quality on cleavage stage Blastocyst formation rate **Evaluated Variables** Implantation rate Pregnancy rate Miscarriage rate



#### **Ovarian stimulation**

- rFSH
- GnRH antagonist
- rhCG to trigger final follicular maturation



# Semen analysis

- Semen samples collected in the lab by masturbation
- Threshold values (WHO 2010)
- MSOME



# Semen preparation

2-layered density gradient centrifugation





Incubation, denudation and nuclear maturation evaluation



ICSI - (Palermo et al., 1992)



Embryo culture until day 5



One or two blastocysts transferred



MOTILE SPERM ORGANELLE MORPHOLOGY EXAMINATION







Aliquot of sperm cell transferred to a microdroplet of 8% PVP in a glass dish 200 sperm cells per sample analyzed under x6,600 Presence and size of vacuoles were recorded (Vanderzwalmen et al. 2008)



• MSOME: SPERM CLASSIFICATION (Vanderzwalmen et al., 2008)



#### **Grade I:**

- Normal form
- No vacuoles

Grade I+II:
normal
spermatozoa
parameter



#### **Grade II:**

- Normal form
- ≤ 2 small vacuoles



#### **Grade III:**

- Normal form
- > 2 small vacuoles or at least one large vacuole

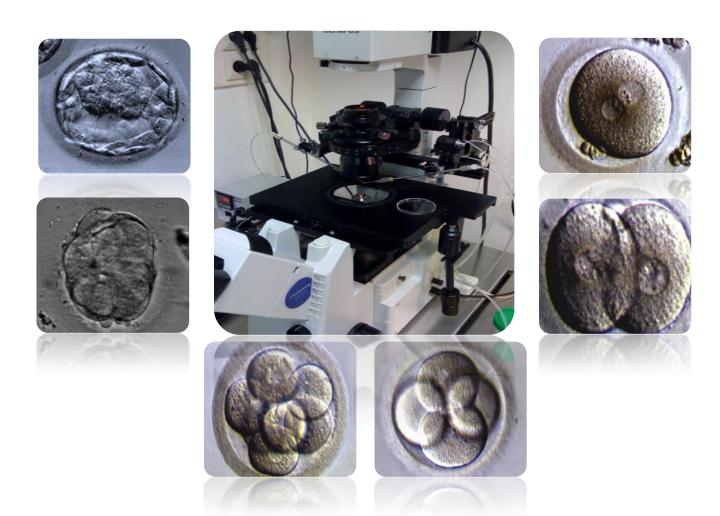


#### **Grade IV:**

- Abnormal head shapes or other abnormalities
- Large vacuole



• EMBRYO MORPHOLOGY AND EMBRYO TRANSFER





Linear regression analysis of the association between sperm parameters and MSOME

SEMEN PARAMETER	MSOME I+II		MSO	MSOME III		MSOME IV	
	β	р	β	р	β	р	
Volume	-0.031	0.508	-0.029	0.539	0.025	0.592	
Concentration	0.281	<0.001	0.022	0.630	-0.252	<0.001	
Total sperm count	0.224	<0.001	-0.013	0.782	-0.193	<0.001	
Total motility	0.178	<0.001	-0.012	0.791	-0.175	<0.001	
Progressive motility	0.192	<0.001	0.008	0.856	-0.188	<0.001	
Morphology	0.341	<0.001	0.136	0.003	-0.350	<0.001	
TMSC	0.210	<0.001	-0.017	0.716	-0.180	<0.001	

Descriptive statistics for semen analysis according to male infertility classification

	N	Т	AT	ОТ	OAT	р
Volume (ml)	3.25 ± 1.95 a	3.14 ± 1.59 b	4.23 ± 3.11 a	2.12 ± 1.17 °	2.13 ± 1.34 °	<0.001
Concentration (x10 <sup>6</sup> /ml)	96.82 ± 47.48 a	73.33 ± 49.74 b	39.68 ± 22.74 °	10.95 ± 12.02 d	14.12 ± 19.28 <sup>d</sup>	<0.001
Total sperm count (x10 <sup>6</sup> )	298.9 ± 210.6 a	214.4 ± 174.7 b	155.5 ± 128.4 b	16.69 ± 10.83 °	17.40 ± 12.94 °	<0.001
Total motility (%)	66.21 ± 9.84 a	64.17 ± 10.87 <sup>a</sup>	35.75 ±8.58 °	57.79 ± 11.03 b	33.17 ± 9.86 °	<0.001
Progressive motility (%)	58.05 ± 10.94 a	55.71 ± 12.43 a	24.66 ± 4.58 °	47.44 ± 11.09 b	21.95 ± 7.54 °	<0.001
Morphology (%)	4.44 ± 0.64 a	1.27 ± 1.00 b	1.00 ± 1.25 °	0.85 ± 0.93 °	0.34 ± 0.71 °	<0.001
TMSC	179.4 ± 143.0 a	123.3 ± 112.7 b	38.15 ± 31.14 °	8.04 ± 5.66 <sup>d</sup>	4.21 ± 3.40 <sup>d</sup>	<0.001
MSOME I+II (%)	14.10 ± 7.01 a	9.46 ± 6.33 b	8.93 ± 16.93 b	6.92 ± 5.38 °	3.95 ± 3.78 °	<0.001
MSOME III (%)	5.81 ± 3.74	5.30 ± 3.87	5.27 ± 6.18	5.18 ± 4.44	4.78 ± 4.12	0.911
MSOME IV (%)	80.07 ± 8.58 a	85.22 ± 8.41 <sup>b</sup>	87.42 ± 12.24 <sup>b</sup>	87.74 ± 7.74 <sup>b</sup>	91.26 ± 6.81°	<0.001



Analyses of effect of WHO seminal classification on ICSI outcomes (n = 483)

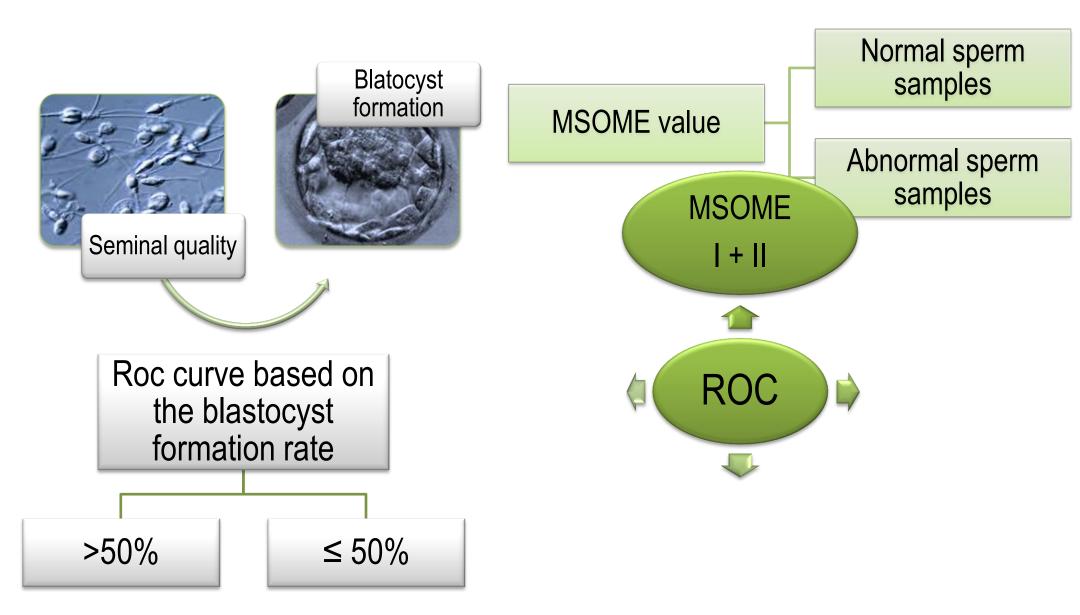
	N	Т	AT	ОТ	OAT	p
Fertilization rate	86.23 ± 7.30	87.58 ± 2.08	79.12 ± 8.98	83.36 ± 4.67	86.17 ± 6.29	0.846
High-quality embryos rate	47.15 ± 30.12	40.23 ± 17.28	38.75 ± 1.76	35.32 ± 16.31	57.40 ± 25.05	0.414
Blastocyst rate	46.80 ± 32.10	45.14 ± 34.32	26.66 ± 46.18	34.70 ± 38.85	32.58 ± 40.49	0.603
Implantation rate	4.67 ± 20.72	20.32 ± 4.95	50.88 ± 26.35	30.11 ± 14.09	10.46 ± 14.93	0.227
Cancelation rate	55.5%	33.7%	60.0%	47.0%	30.0%	0.433
Pregnancy rate	25.0%	29.3%	50.0%	40.0%	28.6%	0.661



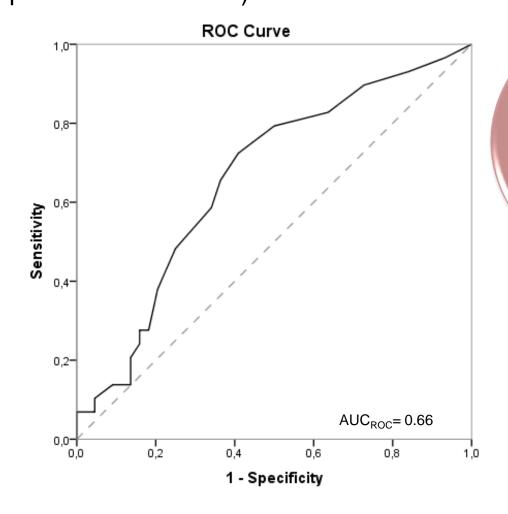
Logistic regression analyses of MSOME grades correlation with ICSI outcomes

	MSOME I+II		MSOME III			MSOME IV	
	β	р	β	р		β	р
Fertilization rate	0.197	0.044	0.150	0.134		-0.192	0.052
High-quality embryos rate	0.306	0.013	0.379	0.002		-0.378	0.002
Blastocyst rate	0.248	0.047	0.008	0.954		-0.195	0.130
Implantation rate	-0.098	0.405	-0.137	0.252		0.138	0.244
	95% CI	p	95% CI	p		95% CI	p
Cancelation rate	0.95; 1.07	0.817	0.94; 1.12	0.557		0.95; 1.03	0.716
Pregnancy rate	0.90; 1.05	0.493	0.84;1.09	0.528		0.96; 1.09	0.396





ROC Curve of MSOME grades I+II and blastocyst formation rate (below or equal and above 50%)



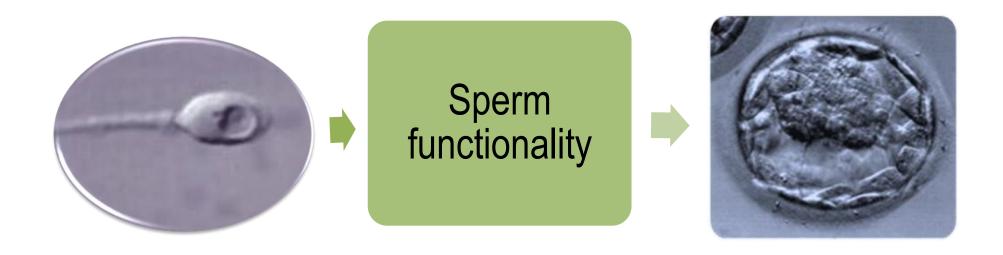
AUC: 0,66
MSOME I+II
cut-off: 5,5%
sensitivity of 0.72
specificity of 0.41



Descriptive statistic of ICSI outcomes per MSOME I+II normality classification

	Normal (MSOME I+II ≥5.5%)	Abnormal (MSOME I+II <5.5%)	р
Female age (years)	$36.18 \pm 4.29$	$36.66 \pm 3.58$	0.527
Total dose of FSH administered (IU)	$2346.38 \pm 680.43$	2422.61 ± 704.55	0.560
Number of follicles	14.28 ± 12.49	14.06 ± 10.97	0.925
Number of retrieved oocytes	$9.92 \pm 9.95$	$10.81 \pm 7.74$	0.608
Fertilization rate	86.94 ± 19.04	$84.59 \pm 14.79$	0.708
High-quality embryos rate	41.78 ± 16.04	$38.40 \pm 21.73$	0.463
Blastocyst rate	50.14 ± 5.05	$28.53 \pm 5.69$	0.005
Implantation rate (%)	20.10 ± 35.59	24.24 ± 37.05	0.618
Pregnancy rate (%)	28.26	36.36	0.472

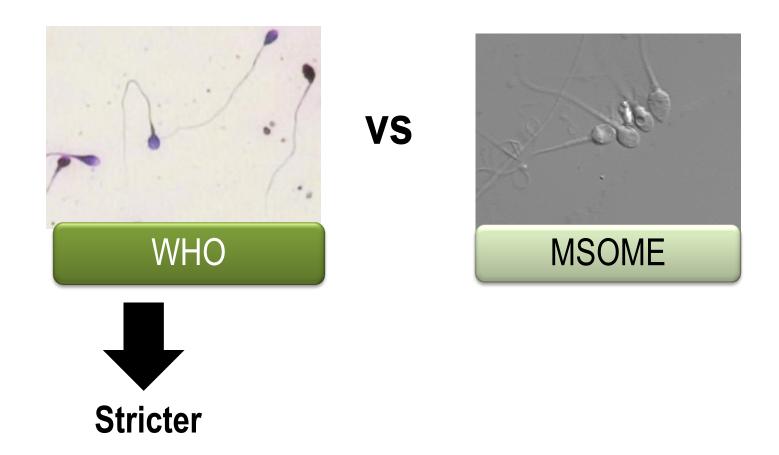
Normal seminal parameter by MSOME resulted in around 20% more blastocysts on Day 5.





Descriptive statistic of seminal parameters per MSOME I+II normality classification

	Normal	Abnormal	<b>n</b>
	(MSOME I+II ≥5.5%)	(MSOME I+II <5.5%)	р 
Male age (years)	$36.95 \pm 6.94$	36.88 ± 7.26	0.911
Ejaculatory abstinence (days)	4.22 ± 2.60	$3.98 \pm 2.16$	0.307
Seminal volume (mL)	3.01 ± 1.70	3.00 ± 1.90	0.582
Seminal Concentration (x 10 <sup>6</sup> /ml)	74.46 ± 54.10	42.15 ± 35.65	<0.001
Total sperm count (x 10 <sup>6</sup> )	215.97 ± 184.55	129.42 ± 152.23	<0.001
Total sperm motility (%)	65.65 ± 12.56	55.92 ± 16.08	<0.001
Progressive sperm motility (%)	53.78 ± 14.02	46.82 ± 17.35	<0.001
Sperm Morphology (%)	1.75 ± 1.36	0.82 ± 1.07	<0.001
TMSC	121.93 ± 118.04	69.16 ± 97.11	<0.001



Only 37% of patients with abnormal semen samples as per the WHO 2010 parameters had abnormal MSOME classification



### Long-term stability of MSOME readings of patients that repeated semen analysis within a year

	First analysis	Second analysis	р
Ejaculatory abstinence (days)	$4.02 \pm 2.13$	$3.98 \pm 1.73$	0.895
Seminal volume (mL)	$2.90 \pm 1.90$	$2.93 \pm 2.00$	0.899
Seminal Concentration (x 10 <sup>6</sup> /ml)	62.56 ± 51.75	57.82 ± 61.18	0.459
Total sperm count (x 10 <sup>6</sup> )	183.81 ± 185.14	172.90 ± 226.83	0.709
Total sperm motility (%)	61.96 ± 16.32	62.65 ± 17.05	0.717
Progressive sperm motility (%)	53.15 ± 17.49	53.54 ± 18.03	0.871
Sperm Morphology (%)	1.11 ± 0.97	1.43 ± 1.44	0.175
TMSC	108.34 ± 123.27	99.27 ± 136.81	0.590
MSOME Grades I+II (%)	$8.69 \pm 6.33$	$9.29 \pm 6.85$	0.088
MSOME Grade III (%)	$4.72 \pm 3.92$	5.39 ± 4.15	0.358
MSOME Grade IV (%)	86.67 ± 8.48	85.28 ± 8.96	0.085

# CONCLUSION

MSOME brings additional information to semen analysis, in terms of better definition of male infertility

MSOME classification is able to predict ICSI success, better than conventional seminal parameters

A MSOME I+II cut-off ≥ 5.5% for successful blastocyst formation is suggested



# WIDER IMPLICATION OF FINDINGS

The future use of MSOME as a routine method may be reliable for assessing male infertility and its impact on ICSI





