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CONDITIONS & TREATMENTS: MALE INFERTILITY

Approximately 15% of couples have difficulty achieving a pregnancy during their reproductive years. Couples are considered infertile if they have been unable to conceive a baby after a year of regular intercourse without contraception. Infertility may be the result of reproductive problems in the man (about 40 percent of cases), woman (40 percent of cases) or both (20 percent of cases).

It is very important that the male partner be evaluated during the initial work up. A history of genital infections, trauma, or environmental exposure to toxins, can reduce male fertility. Disorders of the endocrine system (hypothalamus, pituitary), structural dysfunction (such as obstruction of the vas deferens), or numerous other conditions can cause male infertility. In addition, the male may experience sexual dysfunction and/or retrograde ejaculation. Because fertility depends on the ability to produce sperm, a semen analysis is conducted. The analysis looks at the amount and concentration of sperm and the presence of infection or blood.

Advances in infertility treatment have greatly increased the chances for infertile men to father children. In most cases, treatment of male infertility does not increase sperm count or improve the quality of the sperm produced in the man's body. Instead, the sperm that a man produces are extracted, treated in different ways, and used to fertilize an egg. Fertilization can take place either directly in the woman's body, through artificial insemination (AI), or in a laboratory through a process called in vitro fertilization (IVF).