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CONSERVATIVE TREATMENT OF MALE INFERTILITY

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Relevance. According to WHO and recent studies, male infertility contributes to approximately 50% of infertility cases among couples worldwide. Infertility affects 8–12% of couples globally, with male infertility becoming increasingly recognized as a significant public health issue. Despite its prevalence surpassing that of diabetes in some countries, comprehensive data on male infertility remain scarce in regions like Belarus, highlighting the importance of early diagnosis and treatment. Purpose. To evaluate the outcomes of conservative treatment in men with infertility using data from the Center for Reproductive Medicine.

Material and methods. A retrospective analysis was conducted on 1038 male patients diagnosed with infertility who sought treatment between 2020 and 2023. Clinical evaluations included detailed medical history, physical examination, semen analysis, hormonal profiling (FSH, LH, testosterone, prolactin), and imaging. Conservative treatments involved lifestyle changes, antioxidants, hormonal therapy, and antibiotics.

Results and their discussion. Among the examined cases, 82.9% were diagnosed with primary infertility, while 17.1% had secondary infertility. The most common sperm abnormalities included asthenozoospermia (65%), teratozoospermia (19%), and oligoasthenoteratozoospermia (10%). After 3–6 months of conservative treatment, 8% of patients achieved successful pregnancy outcomes. Others proceeded to assisted reproductive techniques. The most effective conservative approaches included antioxidant and hormonal support, with CoQ10, vitamin E, clomiphene, and hCG showing positive impact on spermatogenesis.

Conclusion. Conservative management remains a viable first-line approach in male infertility treatment, especially for idiopathic and moderate cases. Lifestyle modifications and appropriate pharmacotherapy significantly improve outcomes, potentially avoiding the need for invasive or assisted reproductive techniques.