NEW METHOD TO DIAGNOSE BLOCKAGE THAT CAUSES MALE INFERTILITY

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Summary:

A new method to detect male infertility due to sex organ blockage has been published. It promises to simplify the diagnosis of an infertility condition that has eluded urologists so far.

Almost as common as diabetes, male infertility affects 15% of reproductive age men in the US. Many cases of infertility are caused by blockages within the male sex organs that result in low sperm counts or no sperm counts. These blockages are often reversible and therefore important to diagnose as couples may be able to conceive naturally afterward.

To date, one such type of blockage, termed ejaculatory duct obstruction, has been difficult to diagnose as a cause of infertility. This week, Dr. Paul Turek, a Professor Emeritus in Urology at USCF, published a paper in The Journal of Urology that dramatically simplifies this diagnosis. "All prior tests for this diagnosis involve simply looking at the system and trying to guess how it works, but this new test actually 'pokes' at the system and watches how it responds" says Dr. Turek, a nationally recognized microsurgeon and male infertility specialist.

"We simply applied the same principles that have been used to assess urination issues in urology for the past 30 years, termed urodynamics, to the male sex organs, and call it 'vasodynamics."

For the study, 2 groups of men were compared: normal fertile men and infertile men suspected of having ejaculatory duct obstruction. In addition to taking ultrasound pictures of the reproductive tract system in both groups, which is the current standard diagnostic test, he did something else. By injecting harmless, colored dye into the system through a fine needle and measuring the pressure and flow characteristics of the dye as it progressed through the ejaculatory ducts, he found large differences between the fertile and infertile groups of men.

In fertile men, it took 33 cm of water pressure to cause flow in the ejaculatory ducts, whereas in the infertile men with suspected obstruction, it took 4 times that pressure or 116 cm water pressure. "With this hydraulic technique, we can actually measure the degree of blockage in the male sex organs, which has never been done before" says Dr. Turek of the new technique. Not only that, after surgery was performed to relieve the obstruction in the blocked men, the injection procedure was repeated and the water pressures fell into the range of the normal fertile men. This response also corresponded well with improvements in semen quality after the treatment.

"For several decades, the diagnosis of ejaculatory duct obstruction has involved a lot of guesswork. Vasodynamics now removes the guessing and replaces it with real information that can be used to more reliably improve male fertility potential" says Dr. Turek.

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