

## Urogenital infection as a possible cause of male infertility

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In couples who have not been able to have children, male infertility is the cause in at least half of cases. In 6 to 10 percent, the cause is a urogenital infection. The risk of irreversible infertility associated with urogenital infections in men should not be underestimated, say Hans-Christian Schuppe and coauthors in a review article in the current issue of *Deutsches Ärzteblatt International*. For this reason, appropriate diagnostic evaluation of infections and inflammation in men should be a component in the basic examination in couples who cannot conceive. In their article, the authors from Justus Liebig University Giessen summarize what is currently known about the possible effects of urogenital infections on male fertility and make recommendations on diagnostic and therapeutic approaches.

The main cause of inflammatory disease in the male genital tract are sexually transmitted pathogens or uropathogens (such as Chlamydia trachomatis or Escherichia coli). Furthermore, the spread of viral infections through the bloodstream needs to be considered. The diagnostic evaluation of urogenital infections in most patients with infertility is hampered by an asymptomatic primary chronic disease course. Non-invasive diagnostic markers are currently not available. Especially collecting data on asymptomatic inflammatory reactions in the epididymis and testes is difficult; the latter can be diagnosed with any degree of certainty only by using testicular biopsy. Asymptomatic inflammatory reactions are found in 25 percent of men who undergo testicular biopsy for infertility.



The current evidence from studies does not allow any definite conclusions about the effects of chronic prostatitis on fertility. However, it was found that after acute inflammation/infection of the epididymis, in 10 percent of cases no sperm was found in the ejaculate in the long term, and in 30 percent the number of spermatozoa were reduced; in 60 percent of men affected by an inflammation/infection of the epididymis, the testes were affected too. In such cases, testicular atrophy with permanent loss of spermatogenesis is a much feared complication.

If pathogens are detected in the male genital tract, eradicating antibiotic therapy is indicated. However, this is no guarantee that the quality of sperm will not be permanently affected or that the outcome will not be infertility. It is possible that such infections trigger permanent immunopathological processes in the genital tract.

**More information:** Urogenital Infection as a Risk Factor for Male Infertility. Deutsches Ärzteblatt international. DOI: 10.3238/arztebl.2017.0339

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