

ANALYSIS OF PROGNOSTIC FACTORS FOR PREGNANCY AND LIVE BIRTH ON PESA/ICSI AFTER VASECTOMY

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Introduction: Sperm retrieval by PESA and Intracytoplasmic sperm injection (ICSI) has become a routine option for treatment of obstructive azoospermia. Interval after vasectomy is one of the prognostic factors of influence on treatment results that is discussed in the literature. The objective of this study is to evaluate those parameters as prognostic factors for pregnancy and live birth.

Methods: We retrospectively studied the charts of 333 of PESA and ICSI cycles for treatment of obstructive azoospermia due to vasectomy or failed vasectomy reversal covering a period of eleven years. The studied variables were: female and male age; interval after vasectomy; number of retrieved oocytes; fertilization rate; number of good embryos; pregnancy rate and live birth. For the study of interval after vasectomy as a prognostic factor we divided patients in four groups: GI- less than 3 years (n=02); GII- 3 to 8 years (n=51); GIII- 9 to 14 years (n=124) and GIV- 15 or more years (n=156). We used 19.0 version of SPSS (Statistical Package for Social Sciences) for statistical analysis adopting 5% for significant level ($p < 0,05$).

Results: The median interval time after vasectomy for non pregnancy couples was $14,29 \pm 6,00$ years and for pregnancy was $14,87 \pm 6,13$ years ($p=0,427$). For live birth the median values were respectively $14,04 \pm 6,00$ and $15,16 \pm 6,12$ ($p=0,219$). Comparison of pregnancy and live birth among groups II, III and IV showed no statistical significance. Female age, number of fertilized oocyte and number of good embryos reached statistical significance as a prognostic factors for pregnancy and live birth.