Male Factor Infertility-20260831_223131UTC-Meeting Recording

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38m 46s

Ligia Popescu 0:00

Okay, well, welcome to our webinar. We are going to be talking about male factor infertility. And with us today is Dr. Francisco Picazo Arredondo. We are very lucky that he's here today to answer all of your questions and give us some really good advice. So before we get started, if you could just push to the next slide.

I wanted to talk a little bit about just some housekeeping items. You will be getting a recording of this webinar afterwards. I will be including a PDF of this presentation, so don't worry about any notes or taking down anything like that.

If you have questions throughout the webinar event, please go ahead and ask them live, put them in the chat, put them in the Q&A, whatever you feel comfortable. And I'm going to turn it over here to Dr. Arredondo to give us an introduction of himself and to talk about the topic, after which we will go into a live Q&A session.

dedicated to answering any questions we didn't get to during the presentation.

Okay, thank you.

Francisco Arredondo 1:09

Hey, hello my friends.

Welcome to our webinar and we are talking about male fertility and what an appropriate place to be. I don't know if the people in TikTok can see, I don't know if the other ones can see, but that's a sperm back there.

It's actually a sperm and an egg up there. So we are going to be talking about male fertility, which is an issue that is uncomfortable for some, but it's actually very important to talk about it because a lot of people think that fertility is just a female problem or a female challenge.

but not. So my name is Francisco Picazo Arredondo. I'm A fertility specialist. You know, the most important tool for male fertility to for diagnosis of male fertility is a semen analysis. And believe me, my first semen analysis that I performed for somebody else was 29 years ago.

That's how I began being a medical student doing semen analysis. So it's a pleasure. I've been doing this for 29 years. I've been having the pleasure of serving a lot of

couples trying to conceive. And we've been doing IVF, you know, in the United States since 1998.
So, let's talk about, you know, the first part: What is a normal Siemen analysis? And you know, a normal Siemen analysis is has several components.
But it can get very confusing because a lot of people, when you look at the seminar analysis result, they have so many numbers. But guess what? There are only five really important, and perhaps two are more important, but only five elements to check.
So the volume, which is the quantity of semen coming out, it needs to be the volume above 1.5 CCs. Remember, the semen, when it comes out, it has two components, sperms and seminal fluid. So when you look into the microscope,
You can actually...
quantify how many sperms are in each cubic centimeter, in each milliliter. And having 15, 1.5 millions is actually adequate, normal. Now, there is a lot of variability. So having one
similar analysis that is below that should not scare anybody because there's variability, okay? So volume, 1.5 ccs. Concentration, how many millions of sperm per cc? 15. And from all the sperms that are visualized, some of them are moving.
Some of them are not moving. So if you have 40%, 4 out of 10 moving.
You're in good shape. And then the morphology, which is the shape and is perhaps one of the most important elements of a semen analysis, the morphology needs to be 4% normal. And then when you look at the volume of semen,
what's the concentration and how many of them are moving, you arrive to a total motile count, which is how many sperms in total are moving. So there are certain things that
Can the most common reason why you have low volume is because the people miss the cup during the sample, although if it is very low, there are other things that can explain why the volume is low.
like diabetics or certain blood pressure medications can give you a very low volume.
Very important here, a lot of people, a lot of men use testosterone because they are prescribed testosterone because they are
feeling weak or they have low testosterone. But a lot of people don't know that testosterone is a contraceptive. Yes.
Can you believe that? If you inject testosterone to a male, that is a contraceptive.
Your sperm count will go down.

Okay, so...
The sperm count, as I was mentioning, refers to the total concentration, the motility, how many are moving, and the morphology, what is the shape? Okay, so those are very common elements, but the most important is how many sperms are there and how many are moving.
How many sperms?
Then there are other things that you can measure, although there is a little bit more controversy on this, which is you can measure the DNA integrity on the sperm.
This it is still.
experimental, some of this testing, but certainly in patients that have very, very low sperm count, if the DNA is elevated, the fragmentation of the DNA is elevated, there are certain things that we ought to do. Big boy in Kentucky.
In back in the web, OK, positive.
So the global fertility context, you probably have heard that the sperm count has been going down in a lot of males throughout history. And we don't know, but it's possible that the plastics and the exposure to certain estrogens have done
some damage in the amount of sperms. So...
As you can see, from 1980, the average CC of sperm count was 100. However, now, 40 years later, we are half that. So there is a trend. Now, fertility has remained the same,
but certainly has been a trend on the amount of sperm that has been going down.
Okay.
So.
So if you are male and you have certain questions about what can I do to minimize the risk of damaging our sperms? Now, there's something important to know that that women are born with all the eggs that they are going to have in their life. Male, no, they continuously produce a sperm. But this sperm production line, if you may, it takes 74 days. So when you do a semen analysis and you have an abnormal result, you should not panic because
Anything that happened within those 74 days could have altered this result because it takes 74 days. The same way, if you have low sperm count and you give some medication to improve it, you will not see any results until approximately 74 days or three months roughly. Okay?
It's true that there is a reason why the testicles are outside the body, because they need a lower temperature. That's the reason the testicles are where they are. And

because the environment needs to be colder for the sperms.
So people that have excess exposure to temperature, which has to be a long, long time, or you know, you work constantly in a kitchen or stuff like that, tight underwear, stuff like that. But it is really rare that that will cause...
a lower sperm count. It is more common to have toxins. Marijuana decreases a lot the testosterone and also decreases the production of sperm. So marijuana or those chemical and toxins are other things.
certain pesticides they have, estrogen, et cetera. So do you all offer payment options? Absolutely. Patient 5 is our best one. So I'm jumping from the TikTok and giving the talk here. That's good. Okay.
So lifestyle and physiological factors, substance abuse and obesity. Yes, certainly. Smoking is the single most damaging element for sperm. Alcohol in great quantities also can decrease the level of testosterone.
recreational drugs, I was mentioning that marijuana can decrease your sperm count. So all those things, anabolic steroids, because they are like testosterone. Remember I mentioned that they are contraceptives. So all those things.
can affect the quantity and the quality of the sperms. Also, poor stress and bad sleep and any other chronic condition can increase, can decrease your sperm count. So once you diagnose that you have a problem,
Right? What are things that you can do? Remember, the most important thing is it takes 74 days to actually produce sperm. So there are certain basic things that are important. There is no question that a healthy diet and good exercise improve your quality of life.
as well as the sperm count. But again, this takes a while, 70 to 90 days, to see any kind of benefit. So you have to.
Avoid a lot of the processed food, ultra processed food. They are not really good. And things that you should be taking is probably vitamin C and vitamin E that are antioxidants and they decrease the ROS, which is reactive oxidative stress species. So, those are things that you could do, and...
What should you do if you want to know if you are healthy regarding your sperm is a seminar analysis. Now keep in mind, a seminar analysis is what we call a descriptive test. So you could see a lot of sperm, you could see a lot of them moving normal.
but still the couple does not get pregnant. Because one thing is the descriptive that there are sperms, they're moving, they're there, they look normal. And another one is the physiology. Do they function? Do they have the correct receptor to penetrate the

egg? And that, unfortunately, you cannot detect with a semen analysis.
You know, but occasionally when you have very low sperm, it's important for have a urological visit. The urologist will palpate the testicles and make sure that there are no abnormality like big vessels that are called varicocele, etc. So occasionally,
You know, if the patient is taking testosterone, you can actually decrease the exposure to testosterone and should improve the this prep count. So

Ligia Popescu 13:28
We have a quick question, Dr. Arredondo. What if someone has had a vasectomy?

Francisco Arredondo 13:31
Please, what?
Oh, well, nowadays, a vasectomy is very easy to correct. It will depend also on the age of the woman, but nowadays, with a very small needle, it's a butterfly, you can go directly into the testicle and obtain some sperm. And basically, we just need a drop. In the past, you had surgery to put them back.
together, the anastomosis or the connection of the vasectomy. But nowadays, you don't need that. It's much simpler just to take a small sample of sperm from the testicle, and then we can do in vitro fertilization. And that is relatively simple.
You don't have to go out again and do your vasectomy again, because we never altered the vasectomy with that procedure. And then we do the number four, which is the in vitro fertilization with ICSI. IUI, IVF, and ICSI. Let's try to...
Discuss this one. IUI stands for intrauterine insemination.
Let's talk about that. So whenever somebody has low sperm or has an expanding fertility, normally if we look at a uterus and has the tubes, the ovaries, when people have intercourse, the sperm is deposited into the vagina. And the
sperm has to swim all the way up to the tube to have a date with the egg. Well, that's like running a marathon, you know, 26 miles. So in the intrauterine insemination, what we do is after the partner, husband, give us a sample,
We remove some of the seminal fluid. Remember, the semen has two components, seminal fluid and the sperms. We remove the seminal fluid and we leave the best sperms, the best runners, and we put them inside the uterus closer to the goalpost, like in mile 24 of the...
marathon. So that's an intraurine insemination. In vitro fertilization is extracting the eggs of the woman and then putting them together in a petri dish with the sperms.

So that is called in vitro fertilization. Now, sometimes the in vitro fertilization, because there's not too many sperms,
We grab the egg and we insert the sperm inside the egg. That is called ICSI, intracytoplasmic sperm injection. Okay? So those are the four treatments that we have. Basically, correct if there is any lifestyle issues, maybe sometimes give some medication,
consider occasionally certain surgeries, and finally, the low-tech technology, which is called IUI, and the high-tech technology that is called IVF.
So.
We do have a 100% privacy guarantee and so you can ask whatever you want and we will go from there. I don't know if there are any other questions that we have there.

Ligia Popescu 16:49
Yes. So we have a question. My husband has low testosterone. What can we do to just increase it naturally? Diet, exercise, and stress management. Is that anything?

Francisco Arredondo 16:58
Mhm.
Yeah, the stress manager could be, but there is really a stress manager, and perhaps the question is why he has low testosterone. Is it he's been exposed to certain toxins? Is he smoking? Is he, what is he using to decrease the testosterone? But if that doesn't do it,
then the best way will be to use one medication, not give him testosterone, but give him a medication that will make him produce testosterone. That's probably the best way.

Ligia Popescu 17:35
Got another one here. You mentioned smoking is really bad. So how long after quitting smoking or vaping can you see an improvement in your sperm health?

Francisco Arredondo 17:39
Yeah.
74 days, three months, because that's how long it takes to create a sperm. So 3 months, roughly.

Ligia Popescu 17:53
Would you say chewing tobacco is as bad as smoking?

Francisco Arredondo 17:57
Yes, it is. The nicotine is as bad, not it is as bad cigarette, cigar, or tobacco. Texas Mexican, my wife and I need I need IVF due to 100% blockage to her single remaining ovary.
So the tube is blocked. Yeah. So depending on your age, Texas, Meskin.
You are a perfect candidate for IBF.

Luis Alberto Perez 18:29
Oh, cool, there's a there's a question here.

Is there a BMI gap for IUI to start it? Not really. Yes.

Luis Alberto Perez 18:35
We have a 40 AB boy euploid and five CB girl euploid with four other euploid boys. Can we use the girl first?

Francisco Arredondo 18:46
Yeah, UK, as long as they're euploid, all the ones that are euploids have the potential to be a baby. So the answer is absolutely yes.
So, what else? What else do we have here? Is there a VMI? We talked about that. What is the?

Ligia Popescu 19:01
This one is carrying a smartphone in your front pocket a concern for mental health?

Francisco Arredondo 19:07
There is no evidence of that.
I am a carrier of an X-linked disease. Can I use an egg donor? Monica Romoflores. So no, actually, my friend, Monica, you can actually have a baby. What we could do is something that is called IVF with PTTM. And you can actually have a baby with your own genes by identifying the embryos that do not carry your X-linked disease. So

before thinking on egg donor Monica Romo Flores, you can actually do something about it. So why don't you go and check us out at Positive Fertility and we will be more than happy to address this.
If we have our recent blood HSGS per test, our price is different? Yes, you don't have to repeat those testing. So we can go immediately into treatment. Yes.
Okay.

Ligia Popescu 20:10
I have one. Do ice cold or ice baths or cold plunges do anything negative like a hot bath would?

Francisco Arredondo 20:18
No, not really, not really. There is no evidence of that.
Do you all offer payment options? Absolutely. Patient 5.
Erika, Miranda, gracias. Is there an option for IVF with less injections, maybe progesterone in pills instead of injected? You could. There's no question that you could do it. It's slightly less effective, but...
At least when you can use the progesterone until you have a positive pregnancy test and then you can switch to pills.
B1 Kentucky como puello calisarlo Erika Miranda with Visite no stra pagina Erika. WWW punto positive payo setaite ve fe con punto com.
Hey, fertility special, okay. Hola, how are you? Transfer schedule with you all. Houston, September 14th. We're so excited. This is for my wife. Good sleep, Darian. Good sleep. Tell her to sleep well. Yes.

Luis Alberto Perez 21:24
Michael, Michael, do you suggest hysteroscopy to make sure no polyps before second transfer?

Francisco Arredondo 21:33
Before second transfer? Not really. Usually it's after two failed. But if she had already a saline ultrasound, no, I wouldn't recommend it.

Ligia Popescu 21:45

Question here, Paco: My husband is forty-two and has had a vasectomy. He takes medications like Metroprotol, Tartrate, Metformin, and Loristan.

Francisco Arredondo 21:57
Uh-huh.

Ligia Popescu 21:57
And does this affect his sperm and what can we do to increase it?

Francisco Arredondo 22:02
Yeah, does he have a vasectomy already?

Ligia Popescu 22:06
Yes.

Francisco Arredondo 22:07
Yeah, so the sperm should not be coming out. They are inside, so I don't think they affect that. We just need to get them out from the...
vessels or the testicle with a PESA percutaneous sperm extraction.
But the medications that they mentioned do not affect the sperm count.
Had a baby, Taylor Loren had a baby 18 years ago. She, I was 15, never been pregnant since, and I'm starting my IVF journey. Best of luck, Taylor.
Best of luck.
What else do we have there?
My goodness.

Francisco Arredondo 22:53
So this has been super, super cool. I think.
We probably should be reaching the 25,000 followers right now.

Francisco Arredondo 23:08
I don't know if you have been able to check, but I think we're going to be very close.

Ligia Popescu 23:16
So we've got a question. We've got three more questions. We.

Francisco Arredondo 23:16
Yes, we are 25,000. Let's celebrate. 25,000 followers.

Ligia Popescu 23:22
Woo! Anther question: We are most likely going to do IVF with testing. If the embryos are abnormal, I was told by another clinic, they're either discarded or sent to science. Could we just take them home? We don't want them thrown away.

Francisco Arredondo 23:39
You cannot really take them home. They are frozen in a vial and you cannot even see them. They are microscopic.
But I am sure that they can discard them and you can take the little thing, but it is going to be melting and you won't be able to see anything.
But I'm sure they can give it to you.

Ligia Popescu 24:00
And then what does high caffeine and long distance cycling do for sperm health?

Francisco Arredondo 24:09
Say that again.

Ligia Popescu 24:10
caffeine and long-distance cycling.

Francisco Arredondo 24:12
Oh, caffeine is actually very good for the sperm.
You know, the caffeine is a methylxanthin and you actually use it to increase the motility of the sperm. I cannot say the same thing of a lot of cycling because there is a lot of pressure in the nerve in the podundus when you are really, if you are really a professional cycler or you cycle, you know,
100 miles per week or stuff like that, but if you're just a recreational cycler, I wouldn't be concerned.

Ligia Popescu 24:51
Okay, and what about does standard personal lubricants harm sperm?

Francisco Arredondo 24:58
Oh, yeah, there are some of them that could be harmful. And there are some that you can buy over the counter.
that are not harmful. But there is a very interesting study from 1970s where they put a lot of different oils, olive oil and different oils and different lubricants.
And the one that damaged less the sperm by far.

Ligia Popescu 25:37
Yeah.

Francisco Arredondo 25:37
Canola oil.

Ligia Popescu 25:39
Wow.

Francisco Arredondo 25:40
Believe it or not.
So that's actually very sperm friendly. Our fertility specialist answers question. My positive Houston baby is about to be six months. Look at you, Carolina, IVF mama. I can't wait to see you all again for the next. Come on, let's do it.

Francisco Arredondo 26:00
Taylor Loren, I've been trying for 18 years naturally. Well, my friend, Taylor, is time to work on something that is effective. How young are you, Taylor Loren?
All right, Jackie Rogan just joined. How are you, Jackie Rogan?
Any other question out there? Advice on what to do after three failed FETs with day five euploid embryos, 28 years young, unexplained fertility. Cesi, you must be so frustrated. I can sense that. And I don't blame you. Well, when you have had three euploids, transfer and you are falling into that 5% of people. It's going to be important to make sure that we are not missing anything. I would do a hysteroscopy,

which is taking a look inside the uterus. I would make sure that
There are, whoever is doing the transfer is not having any kind of difficulty during the transfer. I don't know if you had babies before, but if you have a previous C-section, I would make sure that there is nothing wrong with the C-section. But certainly I will not just right away transfer the 4th embryo.
Thank you for the info, Doug. You're welcome. Do you think 25 frozen eggs is enough for a 35 year, it's not year old, year young? Did you get the 25 frozen eggs is enough for a 35. It depends. How many babies do you want? I would say that at 35 years of age,
you pretty much with 25 have more than 95% chance have a baby in hand, provided that there is normal sperm. But usually with 25, the average people would have two babies, because approximately 10 eggs, 10 to 15 eggs per baby at that age.
I hope I just answered your question. I just turned 40 last month and my period won't flow for almost two years. I badly need a baby. Well, we need to be checking. You need to be checked. She guru 15. If I wasn't responding to stems, will things change on the next cycle?
That's a very, very good question. Yes, they can change. There are several studies of people doing exactly the same protocol in two different months within six months, and the variability of the response is enormous. So I will not throw the towel.
Try again, my friend. Don't throw the towel.
Okay, you sir, 15258 just joined. How are you? What else do we have here? Oh my goodness, 602. So we're going to give what, 10 more minutes?

Ligia Popescu 29:04
Does a night shift work or disrupted sleep affect male or male fertility

Francisco Arredondo 29:15
Oh, not really.
I mean, as not really, as long as you know.
As long as you are trying to get a baby during the day work.

Ligia Popescu 29:22
And here's a question.
With, so if IVF with ICSI is needed, does the embryologist choose the best sperm under the microscope? What is the process?

Francisco Arredondo 29:36
Yes.
Yes, we look at the one that is moving faster and we look at the one that is nicer looking, the one that is like Denzel Washington or Antonio Banderas or Brad Pitt. I'm kidding. But yeah, we look at the healthiest of all the sperms.

Ligia Popescu 29:50
Thank you.

Francisco Arredondo 29:58
And then we injected.

Ligia Popescu 30:00
Another question here. How many eggs should a 39 year old yield for good results for IVF? Like how close do you, how close do you look at AMH?

Francisco Arredondo 30:07
So obviously the minimum amount is 1 egg, but there is a correlation that the more eggs you have, exponentially has higher chance of having a baby hen until you reach 16 eggs. And after 16, you continue to go up, but it's less dramatic the increase.
So at 39, as I mentioned before, probably from 15x, you should get a baby. 15, 20x, you should get a baby. I'm meeting you in two weeks. Okay, you, sir. 1529354521735. Thanks for watching. Yes.
Alright, 35 low AMH. Alright.
How difficult would it be to transfer embryos to positive? I'm currently with RMA Houston. Not difficult at all, says he. Not difficult at all. Just call us, leave us, just put positive there and then we'll contact you. But certainly it's not difficult. Is an AMH of 7.5 good for a 30 year young old planning on doing IBF?
I have PCOS. Yes, that is actually very good. You should have a lot of eggs. And you're 38 years young. So, you know, we, let's start moving. Let's start moving. Especially if you want more than one baby, we need to create some embryos. Do I need my IUDR for egg freezing? No, you don't.
Does it impact my levels? No, no, they don't. Are there any things one can do to improve egg quality or is that non-modifiable factor? That's a very good question,

super good question. You know, the egg quality is given basically by your age. So there's very little things that you can do. You can do things to minimize the damage to the ovarian quantity, to the air quality, which is taking some high dose antioxidants like OQ10, 600 milligrams a day, but there is very little you can do to improve the quality.

Ligia Popescu 32:21
Can GP GLP-1 weight loss medications affect sperm health?

Francisco Arredondo 32:21
No.
No, actually, not that I know of, but it is important not try to conceive while you are on it, because we don't know what kind of effect it has, but there is no evidence that it will decrease the sperm count. What else? What else? Nothing else. Do I need? Are we looking at different things?
Yeah.

Luis Alberto Perez 32:49
Yeah, yeah, it's she's looking at the questions in the in the in the chat in in the webinar, not in the.

The chat.

Francisco Arredondo 32:57
Ah, okay. So we have more here, okay.

Luis Alberto Perez 32:58
There's 2 chats happening right now, Michael.

Francisco Arredondo 33:02
So, should I stop sharing?

Ligia Popescu 33:05
No, you could go to the next slide.

Francisco Arredondo 33:08
Oh, there's another slide, okay.
Oh, knowledge is power. Look at that. That's a beautiful baby.
So, up next, oh, we have another one.

Ligia Popescu 33:20
That's right. I'm going to push. I know, and it's going to be you again. Are you going to be ready September 14th? I'm going to put the link right here.

Francisco Arredondo 33:24
Look at that. September 14th.

Ligia Popescu 33:30
I think this is going to be like the biggest webinar. I think we're going to invite everybody on staff and we're just going to...

Francisco Arredondo 33:31
Formula for best outcomes.

Ligia Popescu 33:39
Have a big one.

Francisco Arredondo 33:41
That sounds good. We'll have a party.

Ligia Popescu 33:42
Mhm.
And then if you go to the very next slide, I wanted to just talk about all of the locations that positive fertility has.

Francisco Arredondo 33:50
Yes, this is super important. So people on TikTok, if you're not watching, let me tell you something. If you're in San Antonio, financing, yes, we have financing as patient

five. San Antonio is 210404.
Baby. Baby is 22292104042229. That's San Antonio. El Picazo.

Luis Alberto Perez 34:19
But just give them the the toll free and they can call from wherever. 8833.

Francisco Arredondo 34:25
The toll free, there are several toll frees.

Luis Alberto Perez 34:28
833-723 Baby.

Francisco Arredondo 34:30
Three baby, so we have 833723 baby, which is 833723229.

Ligia Popescu 34:32
Hmm.
That's right. And we have evening hours available. Just starting that. So we are trying to support you guys out there. So please give us a call. Come see us. We have a deal on a full fertility workup. Get your semen analysis done and your all of the the diagnostics taken care of. That's right. And then I think on the next slide, last slide is just a big thank you.

Francisco Arredondo 35:10
Yes.
Yeah, and then Jaye is asking, love these lives. I'm A fourth-year medical student trying to conceive good clinical and personal learning. Oh, I'm glad. Where are you starting medical school, my friend? Let's see. Thank you for attending this fertility awareness and education program being brought by Positive Fertility.
Uh-huh.
University of Minnesota, alright.
University of Minnesota, which is not the one in Mayo Clinic in Rochester. You probably are in San Paul or where are you, Jaye? But that's good, Minnesota. You must be having a beautiful summer right there then. It's not hot like us here. That's super cool, Jaye. Which year are you?

Yeah, Minneapolis, San Paul. Very good. It has been hot. Yeah, not like here, my friend. I believe me, trust me. Yeah, yeah, hot. Here, the cows are putting evaporated milk.

Francisco Arredondo 36:19
So, four-year application season, right? Do you know what residency you're gonna go to?
What else? Anybody else? Any question?

Ligia Popescu 36:29
Thank you everyone for joining.
So, this webinar will be posted and I'll share it with you by e-mail. Thank you.

Francisco Arredondo 36:41
Absolutely.
Well, it has been a pleasure. Thank you, Ligia.
for coordinating this and this is super cool. We will see you on September the 14th.

Ligia Popescu 36:54
Yep, same time, 5.30 P.m. Central.

Francisco Arredondo 36:56
Same time, same channel.

Ligia Popescu 36:58
Thank you. Bye.