

Introduction & Aim of the work

INTRODUCTION

Sperm morphology is considered to be one of the criteria for evaluating sperm quality in clinical investigations of male infertility (Fléchon and Hafez, 1976).

Normal fertile ejaculate contains spermatozoa exhibiting considerable variations in the head shape, degree of chromatin condensation, prominence of the nuclear vacuole, size of persisting cytoplasmic droplet and in the prevalence of pathological multiple headed or multiple tailed forms. The percentage of abnormal forms is higher in infertile than fertile men (Sherins and Howards, 1978 and Jouannet et al., 1988).

However, some abnormal forms seem to occur only in certain cases of infertility (Fujita et al., 1970 and Renieri, 1974). Increased morphological abnormalities may be due to infection, trauma, other testicular stress or hormonal imbalance (MacLeod, 1970).

Varicocele is associated with the presence of tapering heads (MacLeod, 1965; Butler, 1979 and Cockett et al., 1984). On the other hand, other investigators found no difference in morphology between infertile patients with varicocele and infertile patients without varicocele (Fariss et al., 1981; Baker, 1986 and Naftulin et al., 1991).

Several investigators reported that infection causes an increase in the abnormal forms (Eliasson and Lender, 1976; Nikkanen et al., 1978;

Friberg, 1980; Moberg et al., 1980; Berger et al., 1982 and Grizard et al., 1985). Coiled-tailed sperms are more frequent with ureaplasma urealyticum infection (Fowlkes et al., 1975 and Toth et al., 1978). Infection causes an increase in the percentage of tapering, amorphous heads and of spermatids (Mac leod, 1970). On the contrary, Some investigators reported no difference between semen parameters of men with bacteriospermia and men without bacteriospermia (Comhaire et al., 1981; Lewis et al., 1981; Mc Gowan et al., 1981 and Colpi, 1988).

Antisperm antibodies appear to interfere with sperm function and not sperm morphology (Haas et al., 1983; Clark et al., 1985^b; Haas, 1986; Saling, 1987; Menge, 1989 and Liu et al., 1991). Abnormal sperm morphology seen in association with oligospermia indicates impaired spermatogenesis due to endocrine causes (Swerdloff, 1991).

Aim of the work

Evaluation of the types of abnormal forms of sperms associating different etiologies of male infertility.