

Specialists In Reproductive Medicine & Surgery, P.A.

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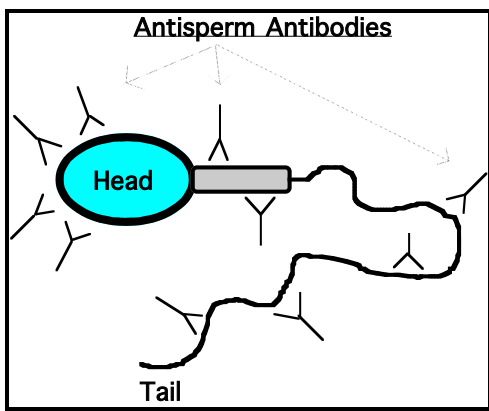
Excellence, Experience & Ethics



Anti-Sperm Antibodies General Information

Definition:

An Anti-Sperm Antibody (ASA) assay evaluates sperm for the presence of attached antibodies. This test determines the percentage of sperm affected the type of antibodies present and the general location of the antibody attachments on the sperm.



Anatomy/Physiology:

Sperm do not appear in the body before adolescence and the sperm are usually protected from and unrecognized by the immune system. Injury to the testes, surgery or infection may breach the protective barrier allowing antibodies to form. If the antibodies attack the sperm, they may succeed in killing the sperm, slowing their motion or preventing fertilization.

The sperm may be recognized as foreign tissue in the female as well, with antibodies then attacking the sperm. The precise significance of maternal antibodies is uncertain and does not seem to have the detrimental affect that paternal antibodies have.

Reason for Testing:

At least 40% of all infertile couples will have problems with the sperm and antibodies may be present. Couples with unexplained infertility are also more likely to have anti-sperm antibodies. The presence of antibodies may significantly influence the success rates and the techniques used to achieve conception.

Instructions:

1. Schedule your ASA analysis with the receptionist. The test is very labor-intensive so testing has to be done in batches. Please let the receptionist know if the sample will be collected in the office or at a distant location.
2. Please abstain from ejaculation at least 48 hours prior to collection. Abstaining longer than 7 days may also adversely affect the results.
3. You will be asked a number of questions when the sample is obtained including current medications and if spillage occurred during collection.
4. The sample may be collected outside of the office if it will arrive at the office within 30-45 minutes from collection. If the sample is to be collected outside of the office, please bring in the previously supplied-labeled container in a small bag. Other containers are not acceptable unless approved by the medical staff.

If the sample cannot be collected via masturbation, special condoms are available. This procedure is slightly more involved and may not provide accurate results. Please ask you physician for details.

Regardless of the method of collection, please do not use lubricants when collecting the sample because many lubricants are toxic to sperm. Once the sample is collected, keep it at body temperature. The hot Florida sun will kill sperm quickly. Do not refrigerate or cool.

If you need to collect in the office, a safe, quiet room has been specifically designed for semen collection. Every effort has been made to make the semen collection process as dignified as possible. The presence of your partner is entirely optional. Please understand that the staff is acutely aware of your need for privacy.

5. The specimen is to be ejaculated into a clean container. Plastic is preferred and a container will be provided for you.
6. The results of your test will be discussed at either the next scheduled visit or through a "teleconference". Please notify the receptionist as to the method in which you want to discuss the test results. The physician reserves the right to ask to see you and your partner in person if the results are complex and require an extended explanation.

Interpretation:

An abnormal ASA result does not automatically mean that you will be unable to establish a pregnancy. Likewise, a normal result does not necessarily mean that the sperm are functioning correctly. Borderline studies may need to be re-run and additional studies ordered for confirmation of an abnormal result. The precise cause of the positive antibodies may never be determined. It should also be understood that abnormal sperm do not produce abnormal offspring.

Treatment:

If your test results indicate a significant level of antisperm antibodies, your physician may recommend certain therapies. Special techniques including intra-uterine insemination, donor sperm or in vitro fertilization (IVF) may be needed to achieve a pregnancy.

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