

# News and Views from the Literature

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## Male Infertility

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### Varicoceles: Practice Guidelines

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[*Rev Urol.* 2007;9(3):161]

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The efficacy of the treatment of varicoceles in the infertile male patient still engenders controversy. In 2001, the American Urological Association published its Best Practice guidelines on varicocele and male infertility, and this set of recommendations was recently updated by the American Society of Reproductive Medicine (ASRM). Following are some of the highlights from that ASRM report, which should be a guide for the practicing urologist.

#### Report on Varicocele and Infertility Practice Committee of the American Society for Reproductive Medicine.

*Fertil Steril.* 2006;86(5 suppl):S93-S95.

Varicoceles, which are found in 15% of the normal male population, occur in about 40% of men who present with infertility. Varicoceles are first recognizable clinically at the onset of adolescence. Therefore, any adolescent with a varicocele who has a decrease in size of the ipsilateral testis should have that varicocele corrected, and adolescents who do not have any change in testis size should be followed expectantly until such a change in testis size becomes apparent.

Men with varicoceles and normal semen parameters should be followed conservatively with annual or biannual

semen analyses. However, patients with an abnormal semen analysis, particularly those who are seeking treatment for infertility, should be offered correction of their varicocele. An abnormal semen analysis should always be confirmed by at least a second semen analysis.

Treatment of a varicocele may be either surgical or via percutaneous venous embolization of the gonadal veins.

Because the life cycle of a sperm is about 90 days, post-treatment semen analyses should be performed at 3-month intervals for at least a year or until pregnancy occurs.

For anyone else who is interested in infertility per se, the ASRM report is a good synopsis of the most up-to-date data on the topic. ■

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## Urinary Incontinence

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### Lower Urinary Tract Symptoms and the Placebo Effect

Reviewed by Akira Furuta, MD, Michael B. Chancellor, MD

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[*Rev Urol.* 2007;9(3):161-162]

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There are many articles on the use of drugs to treat overactive bladder and benign prostatic hyperplasia (BPH). Yet, many of us have wondered, "How much better are these pills than placebo, really?" Investigators at the Antonius Hospital in Nieuwegein, The Netherlands, reviewed placebo responses in randomized controlled trials of pharmacologic treatment for lower urinary tract symptoms (LUTS), including urinary incontinence, overactive bladder, and BPH.