Letter to the Editor

Male reproductive health and infertility

pISSN: 2287-4208 / eISSN: 2287-4690 World J Mens Health 2022 Apr 40(2): 344-345 https://doi.org/10.5534/wjmh.210181



Counting the Hidden Costs of Male Reproductive Health

Christopher J. De Jonge¹, Christopher L.R. Barratt², Allan A. Pacey³

¹Department of Urology, University of Minnesota Medical Center, University of Minnesota, Minneapolis, MN, USA, ²Division of Systems Medicine, School of Medicine, Ninewells Hospital and Medical School, University of Dundee, Dundee, ³Department of Oncology & Metabolism, University of Sheffield, Sheffield, UK

This is an Open Access article distributed under the terms of the Creative Commons Attribution Non-Commercial License (http://creativecommons.org/licenses/by-nc/4.0) which permits unrestricted non-commercial use, distribution, and reproduction in any medium, provided the original work is properly cited.

Men participate less in health care-seeking than women and women make twice as many primary care visits as men. Thus, men are more likely to miss opportunities for preventative care and instead require help primarily for critical and acute health care issues. For example, testicular cancer (TC) is a critical health issue in men of reproductive age. Routine primary health care check-ups could afford early TC detection and less invasive therapeutic strategies. Perhaps more compelling are new data that point to an association between male infertility and somatic health [1].

For many men of reproductive age, participation in medically assisted reproduction (MAR) may represent the first time as an adult that a comprehensive medical and reproductive history is taken, and a physical examination performed. Medical evaluations for fertility are not only revealing earlier detection of, for example, TC but also of occult metabolic disorders and cardiovascular disease [2].

MAR has also enabled family building to be increasingly delayed. However, with advanced paternal age an even greater health risk looms on the horizon. Data clearly show that advanced paternal age at conception can impact offspring in the form of an increased risk for autism, schizophrenia and other disorders [3]. Thus, in addition to infertility, male reproductive health has a broad-spectrum of comorbidities and transgenerational impacts, and for which our scientific knowledge is only in very early stages. More directly, there is very little general public awareness of this 'canary in the coalmine' scenario.

The global MAR market can readily be estimated at \$33 billion USD with projected increase to almost \$50 billion USD in 10 years [4]. The male contributes to approximately 40% of a couple's infertility; reflecting more than \$10 billion USD of the global MAR industry. In dramatic contrast, impactful databases, such as, Pew Charitable Trust, Eurostat, Centers for Disease Control and Prevention (CDC), conspicuously lack comprehensive information regarding males, reproductive health and fertility.

There is a present and growing crisis in male reproductive health and quite possibly their offspring for which the social and economic impact remains a mystery. This is a remarkable deficiency. With the collective bell-weather changes taking place as described

Tel: +1-612-672-4076, Fax: +1-612-672-4073, E-mail: cdejong1@fairview.org

Received: Sep 8, 2021 Accepted: Sep 29, 2021 Published online Jan 1, 2022

Correspondence to: Christopher J. De Jonge (D) https://orcid.org/0000-0002-4083-5833

Department of Urology, University of Minnesota Medical Center, Diagnostic Andrology Program, 606 24th Avenue South, Suite 525, Minneapolis, MN 55454, USA.

above, we urge that strong action be taken to characterize and detail the health and socio-economic impact so that it can inform policy, education, practice and global health [5].

Conflict of Interest

The World Journal of

MEN's HEALTH

Christopher J. De Jonge: no conflicts to disclose.

Christopher L.R. Barratt reports: grants from Bill & Melinda Gates Foundation (BMGF), grants from Chief Scientists Office (Scotland) (CSO), grants from Genus, personal fees from Ferring and personal fees from Ohana outside the submitted work.

Allan A. Pacey reports: Allan A. Pacey is Editor in Chief of Human Fertility, a Trustee of the Progress Educational Trust and The British Fertility Society, and Chairman of the advisory committee of the UK National External Quality Assurance Schemes in Andrology (all unpaid). In the last 36 months, he has undertaken paid consultancy, Speaker fees or Contributor fees from Cryos, Ferring Pharmaceuticals A/S, Pharmasure Ltd, Twenty Six 03, and Mereo BioPharma Group Plc, but all monies associated with this are paid to The University of Sheffield. His research laboratory has received grant funding from Medical Research Council, National Institute for Health Research and Weston Park Cancer Charity.

Author Contribution

Conceptualization: CJDJ. Writing - original draft: CJDJ.

Writing - review & editing: CJDJ, CLRB, AAP.

REFERENCES

- Capogrosso P, Ventimiglia E, Boeri L, Cazzaniga W, Chierigo F, Montorsi F, et al. Male infertility as a proxy of the overall male health status. Minerva Urol Nefrol 2018;70:286-99.
- Stevenson EL, McEleny KR. Male subfertility as a chronic illness: the role of adaptive challenges. Hum Fertil (Camb) 2017;20:148-54.
- Oldereid NB, Wennerholm UB, Pinborg A, Loft A, Laivuori H, Petzold M, et al. The effect of paternal factors on perinatal and paediatric outcomes: a systematic review and metaanalysis. Hum Reprod Update 2018;24:320-89.
- 4. Precedence Research. Fertility market (by offering: assisted reproductive technology (IVF, artificial insemination, surrogacy, and others), fertility drugs (gonadotropin, anti-estrogen, and others), others; by end user: fertility clinics, hospitals, and clinical research institutes) global industry analysis, market size, share, growth, trends, regional outlook and forecasts, 2021 2030 [Internet]. Ottawa (ON): Precedence Research [cited 2021 Mar 31]. Available from: https://www.precedenceresearch.com/fertility-market.
- De Jonge C, Barratt CLR. The present crisis in male reproductive health: an urgent need for a political, social, and research roadmap. Andrology 2019;7:762-8.