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Comparison of Efficacy of Two Techniques for Testicular Sperm Retrieval in Nonobstructive Azoospermia: Multifocal Testicular Sperm Extraction Versus Multifocal Testicular Sperm Aspiration

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To compare the efficacy of 2 sperm-retrieval procedures, testicular sperm extraction (TESE) and testicular sperm aspiration (TESA), during the same procedure using the same subjects as their own controls. The presence of mature testicular sperm cells and motility were evaluated in 87 men with nonobstructive azoospermia (NOA) by means of multifocal TESE and multifocal TESA, which were performed during the same procedure using the same subjects as their own controls. Sperm cells were recovered by TESE in 54 cases, but by TESA in only 36 cases. There were significantly more cases ($n = 20$) in which sperm cells were recovered by TESE only, compared with 2 cases in whom cells were recovered by TESA only (McNemar's test, $P < .001$). The mean number of locations in each testis in which sperm cells were detected was significantly higher in the TESE group. In significantly more cases ($n = 27$), motility was observed in TESE material only, compared with 3 cases in which motility was present in material extracted by TESA only (McNemar's test, $P < .001$). Mean number of locations in each testis with motile sperm cells was significantly higher in the TESE group. The TESE procedure yielded significantly more sperm cells, as was also reflected by the difference in number of straws with cryopreserved sperm. This comparative prospective clinical study revealed that multifocal TESE is more efficient than multifocal TESA for sperm detection and recovery in men with NOA and should be the procedure of choice for sperm retrieval for them.

Key words: Male infertility, Sertoli cell only, arrest of spermatogenesis, hypospermatogenesis motility

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