

Review



IMSI, Effective, Ineffective or Destructive?

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INTRODUCTION

Since the introduction of the primary unnaturally conceived child in 1978, Assisted Reproduction Techniques (ART) has been played out everywhere throughout the world to lighten human barrenness. In 1991 with the appearance of the Intra-Cytoplasmic Sperm Injection (ICSI) strategy, a sensible pace of male fruitlessness cases because of extreme oligospermia were effectively unraveled. Nonetheless, a few worries about the security and effect of ICSI on the posterity have been raised due to the constrained infusion of putative unusual spermatozoa [1,2]. Beginning from the theory that poor spermatozoa may prompt helpless blastocyst arrangement it was all around exhibited a solid fatherly impact influencing the long - term incipient organism advancement [3-5]. Semen examination is considered as a beginning stage for assessing a barren couple. If there should arouse an occurrence of serious oligospermia and whenever ICSI speaks to the main possibility for the couple, the appraisal of sperm morphology appears to assume a basic job. Albeit clinical criticalness of sperm morphology is as yet matter or discussion, it has been as of late perceived that an exact estimation of morphological abnormalities assumes a significant job in for the assurance of a male's richness potential [6]. In this regard, lately the choice at high amplification (>5,000 X) of best spermatozoa has been remembered for the projects of ICSI in patients with terato-zoospermia so as to initially distinguish sperm organelle morphology (MSOME; motile sperm organelle morphology assessment) and afterward perform IMSI (intracytoplasmic morphologically chose sperm infusion). Differentiating information rise up out of writing: in certainty some randomized examinations and a low fueled metainvestigation demonstrated that IMSI methods yielded higher huge estimations of treatment, undeveloped organism advancement, and clinical pregnancy rates and at some point a diminished unnatural birth cycle rate [7-10], while different writers watched slight or basically no upgrades in the clinical result [11-13]. There isn't, for the second obvious proof that IMSI brings any bit of leeway. Among the organelles analyzed by MOMSE rules, a specific consideration has been paid to the

nearness of vacuoles in the sperm head. These are unobtrusive deformities portrayed for certain creators of atomic birthplace, accepted to be related with modified sperm cell structure and are thought to apply an injurious impact on undeveloped organism advancement. Atomic vacuoles were additionally thought to be connected to sperm DNA fracture [14]. This was denied by others [15-17], assessing these vacuoles are fairly connected to helpless sperm DNA bundling for example decondensation. Since an ordinary chromatin compaction has all the earmarks of being significant for the beginning phases of early stage improvement, atomic vacuoles may be considered as a prescient factor of sperm quality and specifically considered as negative boundary. This thought certified a more established finding that higher rates of vacuoles were accounted for in sperm head of barren men [18]. Be that as it may, this repudiates the perceptions of Mauri et al. [11] that MSOME has no effect on human early preimplantation incipient organism improvement before genomic actuation, and furthermore crafted by Montjean [19-24], where no relationship can be found among vacuoles and sperm DNA bundling. In fine no solid relationship has been built up between the nearness of these vacuoles and the quality and the structure of sperm DNA.

CONCLUSION

As a matter of fact, MOMSE and resulting IMSI are meant to fundamentally assess vacuoles in the sperm head, in view of a potential degenerative character of these organelles. In any case, all together the differentiating information depicted and ongoing discoveries prompted a change from a possible improvement to a plausible injurious (risky) angle in this ART method: it contends against incorporating IMSI in ART schedule. Valuable, futile or even destructive clinical criticalness of MOMSE application stays still an issue for guess and discussion. On the opposite it shows up an ever-increasing number of that vacuoles in the sperm head might be not viewed as a change of sperm usefulness yet physiological structures taking an interest to the occasions of sperm development and initiation.

Keywords: Sperm; Reproduction; ART; Spermatozoa

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REFERENCES

- 1. Tosti E, Fortunato A, Settimi A. The impact of in vitro fertilization on the health of the mother and the offspring. Curr Women Health Rev 2006; 2(4): 233-247.
- Fortunato A, Tosti E. The impact of in vitro fertilization on health of the children: an update. Eur J Obst Gyn Reprod Biol 2010; 154(2): 125-129.
- 3. Janny L, Menezo YJ. Evidence for a strong paternal effect on human preimplantation embryo development and blastocyst formation. Mol Reprod Dev 1994; 38(1): 36-42.
- 4. Ménézo Y, Dale B. Paternal contribution to successful embryogenesis. Hum Reprod 1995; 10(6): 1326-1328.
- Ménézo YJR. Paternal and maternal factors in preimplantation embryogenesis: interaction with the biochemical environment. Reprod Biomed Online 2006; 12: 616-621.
- 6. Menkveld R, Holleboom CAG, Rhemrev JPT. Measurement and significance of sperm morphology. Asian J Androl 2011; 13: 59-68.
- Souza Setti A, Ferreira RC, Paes de Almeida Ferreira Braga D, de Cássia Sávio Figueira R, Iaconelli A Jr, et al. Intracytoplasmic sperm injection outcome versus intracytoplasmic morphologically selected sperm injection outcome: a meta-analysis. Reprod Biomed Online 2010; 21: 450-455.
- Wilding M, Coppola G, Di Matteo L, Palagiano A, Fusco E, et al. Intracytoplasmic injection of morphologically selected spermatozoa (IMSI) improves outcome after assisted reproduction by deselecting physiologically poor quality spermatozoa. J Assist Reprod Genet 2011; 28(3): 253-262.
- Knez K, Zorn B, Tomazevic T, Vrtacnik-Bokal E, Virant-Klun I. The IMSI procedure improves poor embryo development in the same infertile couples with poor semen quality: a comparative prospective randomized study. Reprod Biol Endocrinol 2011; 9: 123.
- Knez K, Tomazevic T, Zorn B, Vrtacnik-Bokal E, Virant-Klun I. Intracytoplasmic morphologically selected sperm injection improves development and quality of preimplantation embryos in teratozoospermia patients. Reprod Biomed Online 2012; 25: 168-179.
- Mauri AL, Petersen CG, Oliveira JB, Massaro FC, Baruffi RL, et al. Comparison of day 2 embryo quality after conventional ICSI versus intracytoplasmic morphologically selected sperm injection (IMSI) using sibling oocytes. Eur J Obstet Gynecol Reprod Biol 2010; 150(1): 42-46.
- Oliveira JBA, Cavagna M, Petersen CG, Mauri AL, Massaro FC, et al. Pregnancy outcomes in women with repeated implantation failures after intracytoplasmic morphologically selected sperm injection (IMSI). Reprod Biol Endocrinol 2011; 9: 99.

- Balaban B, Yakin K, Alatas C, Oktem O, Isiklar A, et al. Clinical outcome of intracytoplasmic injection of spermatozoa morphologically selected under high magnification: a prospective randomized study. Reprod Biomed Online 2011; 22(5):472-476.
- 14. Oliveira JBA, Massaro FC, Baruffi RLR, Mauri AL, Petersen CG, et al. Correlation between semen analysis by motile sperm organelle morphology examination and sperm DNA damage. Fertil Steril 2010; 94(5): 1937-1940.
- 15. Boitrelle F, Ferfouri F, Petit JM, Segretain D, Tourain C, et al. Large human sperm vacuoles observed in motile spermatozoa under high magnification: nuclear thumbprints linked to failure of chromatin condensation. Hum Reprod 2011; 26: 1650-1658.
- Franco JG Jr, Mauri AL, Petersen CG, Massaro FC, Silva LFI, et al. Large nuclear vacuoles are indicative of abnormal chromatin packaging in human spermatozoa. Int J Androl 2011; 35(1): 46-51.
- Cassuto NG, Hazout A, Hammoud I, Balet R, Bouret D, et al. Correlation between DNA defect and sperm-head morphology. Reprod Biomed Online 2012; 24(2): 211-218.
- Mundy AI, Ryder TA, Edmonds DK. A quantitative study of sperm head ultrastructure in subfertile males with excess sperm precursors. Fertil Steril 1994; 61(4): 751-754.
- Montjean D, Belloc S, Benkhalifa M, Dalleac A, Ménézo Y. Sperm vacuoles are linked to capacitation and acrosomal status. Hum Reprod 2012; 27: 2927-2932.
- Antinori M, Licata E, Dani G, Cerusico F, Versaci C, et al. Intracytoplasmic morphologically selected sperm injection: a prospective randomized trial. Reprod Biomed Online 2008; 16(6): 835-841.
- González-Ortega C, Cancino-Villarreal P, Pérez-Torres A, Vargas-Maciel MA, Martínez-Garza SG, et al. Intracytoplasmic morphologically selected sperm injection (IMSI) vs intracytoplasmic sperm injection (ICSI) in patients with repeated ICSI failure. Ginecol Obstet Mex 2010; 78: 652-659.
- Tanaka A, Nagayoshi M, Tanaka I, Kusunoki H. Human sperm head vacuoles are physiological structures formed during the sperm development and maturation process. Fertil Steril 2012; 98(2): 315-320.
- 23. Palermo GD, Hu JCY, Rienzi L, Maggiulli R, Takeuchi T, et al. Thoughts on IMSI in Biennal Review on Infertility 2011; 2: 277-290.
- Junca AM, Dumont M, Cornet D, Douard S, De Mouzon J, et al. Is intracytoplasmic morphologically selected sperm injection (IMSI). Fertil Steril 2010; 94: S31.