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Re: Penile Low Intensity Shock Wave Treatment is able to Shift PDE5i Nonresponders to Responders: A Double-Blind, Sham Controlled Study

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EDITORIAL COMMENT

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The therapeutic mechanism of extracorporeal low-intensity shock wave treatment (LIST) is not clear yet, but the acoustic energy of LIST stimulates the penile tissue by causing micromechanical effects and microtrauma. Animal studies have shown that shock wave energy improved nerve stimulated erection in diabetic rats, increased the endothelial content of penile tissue, improved the smooth muscle content, and up-regulated the expression of growth factors (1-2). In this study, the authors investigated the effect of LIST in patients with severe erectile dysfunction who are PDE5i nonresponders and compared with sham controls. The median change in International Index of Erectile Function-Erectile Function score and Erection Hardness Score was significantly high in treatment group compared to sham group. In conclusion, LIST treatment is effective in patients with severe erectile dysfunction. The accumulation of clinical data on LIST may alter the algorithm of erectile dysfunction treatment in near future.

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Re: Use of Testicular Versus Ejaculated Sperm for Intracytoplasmic Sperm Injection Among Men with Cryptozoospermia: A Meta-analysis

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EDITORIAL COMMENT

In this meta-analysis, the authors compared outcomes of intracytoplasmic sperm injection (ICSI) using ejaculated versus testicular sperm in men with cryptozoospermia. They also assessed the number of oocytes and maternal and paternal ages. The analysis of a total of 272 ICSI cycles and 4,596 injected oocytes in 5 cohort studies included. Pregnancy and fertilization rates were not statistically different between testicular and ejaculated sperm groups. Although maternal age and paternal age were higher in testicular sperm group, there was no significant difference in the number of oocytes retrieved between the groups. In conclusion, the meta-analysis of 5 studies showed no better pregnancy outcome using testicular sperm for ICSI compared to ejaculated sperm in men with cryptozoospermia.

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