

**Patients and methods.** Four hundred and seventy-seven cycles of intrauterine insemination performed under a mild ovarian stimulation during the last 2 years in 169 couples attending the Andrologic Unit of the University of L'Aquila were analysed. Indications for treatment were abnormal semen or unexplained infertility. The outcome of PCT also performed under mild ovarian stimulation was recorded in all couples. Semen analysis was evaluated according to WHO (1999).

**Results.** Thirty-seven pregnancies were obtained (pregnancy/cycle: 7.6; pregnancy/couple: 21.9%). The median duration of infertility was 5.1 years, the median age of the male partner was 37.9 years, and the median age of the female partner was 34.1 years. These values were similar to those of couples who did not conceive (4.2, 37.3, 35.0, respectively). Although poorer outcomes were reported in cycles where  $<3 \times 10^6$  motile sperm were recovered (4% versus 9%), and when the percentage of normal sperm in the ejaculate was  $<10\%$  (3% versus 8.6%), the only significant difference in the pregnancy/cycle was observed between negative or positive PCT outcome (14.7 vs 6.6%, respectively). When a negative PCT was recorded in the presence of normal semen the pregnancy/cycle increased to 17.3%, and 40% of couples conceived. In a stepwise logistic regression analysis including clinical, semen parameters, recovered motile sperms and PCT outcome, only the PCT outcome was entered in the model (OR = 2.7; 95% CI: 1.2–5.8).

**Conclusions.** A negative PCT outcome in the absence of heavy semen abnormality was associated with a rate of successful IUI cycles 2.7-fold higher than a positive PCT. The usefulness of the inclusion of PCT in the diagnostic tool pre-IUI is strongly suggested.

#### **PO013 Effect of reduced glutathione on frozen-thawed human spermatozoa**

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**Introduction.** The process of freezing and thawing produces oxidative stress and reactive oxygen species (ROS) generation leading to loss of sperm motility and fertilizing ability. Defense mechanisms in seminal plasma and spermatozoa include enzymatic and nonenzymatic antioxidants such as

reduced glutathione (GSH). A decrease in intracellular GSH content during sperm cryopreservation has been previously described in domestic animals and humans. The aim of this study was to compare the effect of addition of GSH in freezing medium on motility, viability and capacitation status.

**Materials and methods.** Prospective study of 16 semen samples of men attending an ART clinic. Each sample was divided and frozen in pellets using glycerol and egg yolk as cryoprotectants with or without 1 mM GSH. After thawing sperm motility and viability were studied by microscopy and flow cytometric analyses were performed to detect increase in plasma membrane lipid packing disorder. Sperm samples were stained with merocyanine 540 (M540) and sperm viability (stained with Yo-Pro1). Cells were classified in low M540 (viable, uncapacitated), high M540 (viable, capacitated) or Yo-Pro-1 positive (dead sperm).

**Results.** No differences of sperm motility and viability (eosine stain) were found between groups. However, the addition of GSH on the freezing media had a significant effect on capacitation status. Results showed a significant lower number of capacitated sperm (control  $10.58 \pm 0.66a$  versus GSH  $7.81 \pm 0.69b$ ,  $P = 0.005$ ) and a tendency to higher number of intact viable sperms were found ( $47.67 \pm 1.43$  versus  $55.38 \pm 5.23$ ).

**Conclusions.** These preliminary results show addition of GSH to freezing media has a positive effect on the capacitation status, reducing the number of dead sperm and membrane lipid packing disorder. These observations suggest the possibility of using GSH in freezing media to further improve fertilizing ability.

#### **PO014 Satisfaction of Egyptian couples in the Nile-delta with different therapeutic modalities of organic erectile dysfunction**

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**Objective.** To test the subjective implications of satisfaction to various therapeutic modalities for pure and mixed organic erectile dysfunction and to address changes in the health-oriented quality of life and the relation of the patients' psychiatric status to treatment satisfaction.

**Design.** A prospective study including a total of 354 couples. Patients were classified according to