

Special Article – Male Fertility

Male Fertility

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Short Communication

Male fertility is the natural capacity or ability of a sexually mature male to produce children with a sexually mature female through normal sexual act. It is important to note that a true measure/definition of fertility is the production of a life fetus/baby at the end of pregnancy. In that case abortion or miscarriage in the female partner is termed infertility, the cause of which may be shared by the male partner. In general, fertility rate is measured by the number of children born per mating by an individual or in a population. Another measure of fertility is fecundity, which is the potential for reproduction. Fertility is the hallmark of normal homeostasis and normal reproductive health. In addition to general health of the male, the focus of attention should be on the hypothalamus-pituitary-gonadal/testes axis. The sperm cells are produced in the testes. The spermatogenic and steroidogenic functions of the testes are impacted by the hormonal activities of both the hypothalamus and the pituitary glands.

Temporary inability to bear children is called “infertility” as opposed to sterility, which is permanent inability/incapacity to

bear children. The two types of infertility are impotentia generandi (infertility due to some abnormal conditions or factors) and impotentia coindi, which is inability to perform the sexual act to completion, such as pre-mature ejaculation (inability to complete an ‘emissio’ inter-labia majora).

So many factors influence fertility in both males and females. Included in the known factors that may influence fertility are age of the individual, lifestyle changes and choices (alcoholism, smoking, and anabolic steroids), environmental and/or occupational factors (including toxins, medication), physical and health status, and mental and emotional state of the individual (diseases, infection, genetic abnormalities, medications, and unexplained factors) (<https://blog.episona.com/male-infertility-causes-and-treatment/>). Additionally, nutrition-related obesity can co-factor with chronic inflammatory conditions to cause male infertility; which may be manifested as abnormal sperm production and/or oligospermia (clinically low sperm output). The most common causes of infertility in men are conditions that affect the normal functions of the testes, leading to partial or total lack of sperm cell production, or formation of abnormal sperm cells. It is estimated that 10% to 15% of the infertility in men is due to azoospermia, which is total lack of spermatozoa production (www.nichd.nih.gov/health/topics/menshealth/conditioninfo/infertility). While there may be so much unknown causes of male infertility and sterility, the fact remains that normal fertility depends on overall health of the whole body system, especially the reproductive- and its functionally related organs.