Editors view point

Male factor infertility remains a poorly understood area and its management is largely based on seminal report. Though lot of advances in the diagnostic and therapeutic field has been added in the clinical practice, many of these advances have not found its proper place in routine clinical practice. Clearly more data and research are required to substantiate the usefulness of these interventions in routine practice. Current issue features six well-written articles on male factor infertility. Editorial on recurrent pregnancy loss (RPL) and male factor looks at the complex clinical issue and role of male factor in the etiology of RPL. There has been lot of debate on effect of lifestyle factors on seminal parameters specially prolong exposure and use of mobile phone, computers, modern work style, and stress. All these factors and many more are very well reviewed in this issue. Another article on the modified intracytoplasmic sperm injection technique to optimize the outcome is interesting to read. Oxidative stress and its effect on semen quality is very well documented in multiple studies. However, sperm DNA fragmentation and its place in routine practice is still in the debate. Whether it should be offered to all male patients or should be performed in selected group of patients, how the results should be interpreted, and used to optimize the outcome still remains in controversies. Article on sperm DNA fragmentation tries to find the answers to all these relevant queries.

The role of color Doppler in infertility management is increasing every day. Apart from adding to diagnostic accuracy, it really helps in decision-making and prognosticating the outcome during the assisted reproductive technology cycles. Response to stimulation is most unpredictable in polycystic ovarian syndrome, and color Doppler studies may be helpful in these women to predict the response to stimulation and to better manage the cycle. Original article on the subject is worth reading. Ovarian stimulation strategies are always in great demand specially in poor responders and hyper-responders as no single protocol is applicable to all cases. Articles on

stimulation and trigger are clinically very relevant and useful.

Finally, the problem of recurrent implantation failure and role of endometrial receptivity array are well addressed in the research article. Overall, the current issue has covered a wide variety of review and research articles on subjects of clinically relevant topics ranging from male factor to stimulation dilemmas to recurrent implantation failure and endometrial receptivity.

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Conflicts of interest

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