



DECEMBER 2018



President's Greeting

Emelia A. Bachman, M.D.
President

As we bring in 2019, we are looking forward to our last two PARES meetings of the year in January and March.

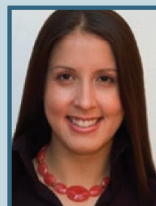
Our annual joint meeting with the Obstetrical Society of Philadelphia will be held on Thursday, January 10th at the National Liberty Museum. We are delighted to welcome Dr. Marcelle Cedars from the University of California, San Francisco to discuss reproductive aging. We hope that you can all join us!

Looking forward to seeing everyone in January. I wish you all a Happy Holiday and a very Happy New Year.

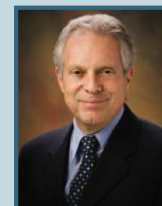
Warmly,

Emelia A. Bachman, M.D.
President

Meet the Board (2018-2019)



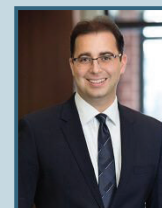
Emelia A. Bachman, M.D.
President



Jay Schinfeld, M.D.
President-Elect



Divya Shah, M.D.
Secretary-Treasurer



Oumar Kuzbari, M.D.
Secretary-Treasurer Elect



Ron Feinberg, M.D.
Director at Large



Maureen Kelly, M.D.
Immediate Past President



Sharon Anderson, MS, PhD, ELD, HCLD
Liaison, Delaware Valley Reproductive Biologists Group

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Thursday, January 10, 2019

(Joint PARES/OB Meeting)

Reproductive Aging

Marcelle I. Cedars, M.D.

Professor and Director

University of California, San Francisco

THE OBSTETRICAL SOCIETY OF PHILADELPHIA

OUR MISSION: "To embrace our legacy, foster collegiality, and share expertise
to improve the health of women in Philadelphia and beyond."

Joint PARES/OB Society Meeting



Marcelle I. Cedars, M.D.
Professor and Director
University of California, San Francisco

Topic: **Reproductive Aging: Window on General Aging**

Date: Thursday, January 10, 2019

Location: A blast from the past... Back to the National Liberty Museum
The National Liberty Museum
321 Chestnut Street, Philadelphia

Time: 6:00 p.m. Cocktails, 6:30 p.m. Dinner and Program

Discounted parking available in the Bourse Garage!

Payment by check or **online** at www.obphila.org

We cannot accept payments at the door.

Members - \$60.00 Non-members \$70.00

RSVP's are due no later than Wednesday, January 2.

Please make your check payable to The Obstetrical Society of Philadelphia
308 Rolling Creek Road, Swarthmore, PA 19081.

Attendee names

November 29, 2018 Meeting

Origins of Aneuploidy in the Embryo Santiago Munné, PhD

Our Joint PARES/DVRBG Meeting was our best attended in years.
Good company, good food and a great speaker.

Enjoy the photos!



Drs. Munné and Anderson



George Taliadouros, M.D. was granted Emeritus Status by the Board at the November 29th Meeting. Congratulations! (Pictured L-R Drs. Emelia Bachman, George Taliadouros and Divya Shah)

November 29, 2018 Meeting

Origins of Aneuploidy in the Embryo

Santiago Munné, PhD



November 29, 2018 Meeting
Origins of Aneuploidy in the Embryo
Santiago Munné, PhD



November 29, 2018 Meeting

Origins of Aneuploidy in the Embryo

Santiago Munné, PhD



ASRM Statement on Reports of Human Reproductive Gene-Editing in China

Nov 26, 2018

By: ASRM

Origin: ASRM Press Release

Statement attributable to ASRM President, Peter Schlegel, MD.

“We have reviewed the report of He Jiankui of Shanghai, China, regarding the initiation of a twin pregnancy after premature human application of the unfolding scientific technique of CRISPR-Cas to modify genes in human embryos as part of an in vitro fertilization (IVF) procedure. Although gene editing may have an important place in human medicine in the future, it should only be used clinically after careful study done with vigorous oversight.



Physicians and scientists in reproductive medicine are concerned about the premature ban of potential scientific advances before we can understand their risks and benefits. The US has one of the most robust research oversight and support systems in the world, but too often that system is unavailable to those of us who work in human reproduction or with reproductive tissues. The result is what we may be seeing today, research done without appropriate transparency and oversight. **We call on leaders in the US and around the world to implement a sound regulatory system that allows for responsible investigation and innovation to improve human health.”**

Cap-Score™ prospectively predicts probability of pregnancy

Jay Schinfeld¹ | Fady Sharara² | Randy Morris³ | Gianpiero D. Palermo⁴ |
Zev Rosenwaks⁴ | Eric Seaman⁵ | Steve Hirshberg⁶ | John Cook⁷ |
Cristina Cardona⁸ | G. Charles Ostermeiers⁸ | Alexander J. Travis^{8,9}

1. Abington Reproductive Medicine, Abington, Pennsylvania
2. Virginia Center for Reproductive Medicine, Reston, Virginia
3. IVF1, Naperville, Illinois
4. The Ronald O. Perelman & Claudia Cohen Center for Reproductive Medicine & Infertility, Weill Cornell Medical College, New York
5. New Jersey Urology, Millburn, New Jersey
6. Urology Health Specialists, Abington, Pennsylvania
7. Singular Value Consulting, Houston, Texas
8. Androvia LifeSciences, Mountainside, New Jersey
9. Baker Institute for Animal Health, College of Veterinary Medicine, Cornell University, Ithaca, New York

Correspondence

Alexander J. Travis, Cornell University College of Veterinary Medicine,
Baker Institute for Animal Health, Hungerford Hill Rd., Ithaca, NY 14853.

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Funding information

Semen analysis (SA) poorly predicts male fertility, because it does not assess sperm fertilizing ability. The percentage of capacitated sperm determined by GM1 localization (“Cap-Score™”), differs between cohorts of fertile and potentially infertile men, and retrospectively, between men conceiving or failing to conceive by intrauterine insemination (IUI). Here, we prospectively tested whether Cap-Score can predict male fertility with the outcome being clinical pregnancy within ≤ 3 IUI cycles. Cap-Score and SA were performed ($n = 208$) with outcomes initially available for 91 men. Men were predicted to have either low ($n = 47$) or high ($n = 44$) chance of generating pregnancy using previously-defined Cap-Score reference ranges. Absolute and cumulative pregnancy rates were reduced in men predicted to have low pregnancy rates versus high ([absolute: 10.6% vs. 29.5%; $p = 0.04$]; [cumulative: 4.3% vs. 18.2%, 9.9% vs. 29.1%, and 14.0% vs. 32.8% for cycles 1–3; $n = 91, 64, \text{ and } 41$; $p = 0.02$]). Only Cap-Score, not male/female age or SA results, differed significantly between outcome groups. Logistic regression evaluated Cap-Score and SA results relative to the probability of generating pregnancy (PGP) for men who were successful in, or completed, three IUI cycles ($n=57$). Cap-Score was significantly related to PGP ($p = 0.01$). The model fit was then tested with 67 additional patients ($n = 124$; five clinics); the equation changed minimally, but fit improved ($p < 0.001$; margin of error: 4%). The Akaike Information Criterion found the best model used Cap-Score as the only predictor. These data show that Cap-Score provides a practical, predictive assessment of male fertility, with applications in assisted reproduction and treatment of male infertility.

To read the full article click here:

<https://onlinelibrary.wiley.com/doi/10.1002/mrd.23057>