

had a significant negative effect on sperm motility and increase the proportion of motile sperms involved in agglutination<sup>(2, 10)</sup>. (Table 3) shows the negative effect of antisperm antibodies on sperm motility.

Jose<sup>(1)</sup> demonstrated that infections in the genital tract were associated with the generation of antisperm antibodies.

For the treatment, the immunosuppressive corticosteroid prednisolone was administered orally to the patients in dosages 5mg /three times a day for two weeks. This drug showed considerable good results. Khudher<sup>(11)</sup> demonstrated that prednisolone was administered to patients with antisperm antibodies and the patients had reduced serum antisperm antibodies after treatment and, in some cases, an apparent increased chance of pregnancy.

### **Conclusion**

Serum antisperm antibodies play a considerable role in immune infertility and should be treated.

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