

naked oocytes was less than in oocytes enclosed within a layer of granulosa cells.

This is the unique report suggesting a difference in expression of c-kit in the different population of oocytes of human and subhuman primates. This report also provides the first ontogenic evaluation of c-kit expression in the germ cells of human and subhuman primates. As SCF has been found in rodent granulosa and sertoli cells, we conclude that c-kit and its cognate ligand, SCF, may play a role in oocyte and spermatozoal development and in the communication between these germ cells and the surrounding mesenchymal cells.

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## Group 5, discussion : 15:30~16:00

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### P-25

#### Technical Advance of Intracytoplasmic Sperm Injection (ICSI) : Multisperm Loadind ICSI Procedure (MSLIP)

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Routine ICSI procedure (ROIP) have been performed that only one immobilized spermatozoon was loaded into the injection pipette and then injected into one oocyte. It is a time consuming procedure in cases of sizable number of ICSI are performed daily. Thus, we tried to shortening the processing time of ICSI, applied a time saving procedure. In this modified method, multisperm loading ICSI procedure (MSLIP), we loaded three immobilized spermatozoa into an injection pipette at once and then injected into three oocytes, one by one. According to sperm

quality, we used side migration technique (SMT) or direct PVP technique (DPT) to select normal motile spermatozoa. In our hands, ROIP took average 145 seconds (n=22) and 113 seconds (n=50) per injected oocyte in SMT and DPT, respectively. MSLIP took average 104 seconds (n=110) and 89 seconds (n=45), respectively. This MSLIP saved 41 seconds in SMT and 24 seconds in DPT per injected oocyte. There were no difference in normal fertilization rate between ROIP (70.8%, 51/72) and MSLIP (71.0%, 110/155). In ICSI procedure, saving time have some advantages, shortened the exposure time out of incubator condition and gave the allowance time of other procedures. For these reasons, we propose a time saving ICSI procedure, namely MSLIP.

### P-26

#### 삼성제일병원의 TESE-ICSI 200주기 결과에 대한 분석

삼성제일병원 불임연구실, 비뇨기과<sup>1</sup>, 산부인과  
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이유식<sup>1</sup>, 손일표<sup>2</sup>, 강인수<sup>2</sup>, 전종영<sup>2</sup>**

여러 가지 원인에 의한 무정자증 환자에서 고환 정자 채취술(TESE)과 세포질내 정자주입술(ICSI)을 이용하여 성공적인 체외수정과 임신이 보고되고 있다. 본 연구에서는 1994년 11월부터 1996년 8월까지 157 명의 환자에서 시행한 연속된 200 주기의 TESE-ICSI 결과를 분석하여 체외수정 및 임신 결과에 영향을 미치는 요인을 알아보고, TESE-ICSI의 유용성에 대해 검증하고자 한다. 그 결과는 다음과 같다.

1. 폐쇄성 무정자증인 118 명 156주기에서 성숙 정자를 회수하지 못한 경우는 3 주기(1.9%)였으며, 156 주기의 배아이식에서 54 주기(34.6%)에서 임신이 확인되었다. 비폐쇄성 무정자증인 39 명 44 주기에서 성숙 정자를 회수하지 못한 경우는 24 주기(54.5%)였으며, 33 주기의 배아이식에서 11 주기