

## EDITORIAL

At the outset, let me wish all our readers a very bright and a prosperous 2012. The first issue of this year has two articles relating to high-risk obstetrics and fetal medicine. The first is a review article on Labor Admission Test by Dr Sabaratnam Arulkumaran. Labor admission test (LAT), performed at the onset of labor, helps to establish fetal well-being in low-risk pregnancies and identify those fetuses who either may be hypoxic or are at risk of developing hypoxia during labor so that additional measures of fetal surveillance can be instituted to prevent adverse outcomes. Although the existing RCTs and systematic reviews do not favor admission testing, the authors have concluded that there is a need for robust RCTs with adequate sample size to evaluate the effectiveness of LAT.

The second article is on battling the rising prevalence of gestational diabetes mellitus. The study was conducted to assess the knowledge among physicians regarding the screening and diagnosis of GDM. With a high prevalence of GDM in India, there is a need for universal screening of every single Indian pregnant woman using a cost-effective and an operationally feasible test. The authors recommend a massive awareness program for all fellow practitioners to prevent those long-term implications of GDM.

Relating to infertility, numerous studies have been published trying to establish that the correct selection of a morphologically normal sperm greatly enhances the outcome of ICSI. To evaluate this, Rutvij Dalal and Hrishikesh Pai conducted a study that proves the effectiveness of IMSI over ICSI in patients with severe oligoteratozoospermia and/or repeated IVF/ICSI failures.

Polycystic ovary syndrome (PCOS) is a common endocrine and metabolic disorder that affects 5 to 10% of women in their reproductive life. The potential associations of abdominal fat distribution with insulin resistance and cardiovascular risk in PCOS women have been clearly enunciated in this issue. Hence, the need for lifestyle modification in these individuals.

There is an urgent need for increasing awareness among medical service providers regarding various fertility preservation options. Familiarity with the various available options leads to timely referral to the reproductive medicine specialist. The cases highlighted in this article by Mohan S Kamath and Korula George illustrate several clinical scenarios in which fertility preservation options were exercised. The couples were referred appropriately giving time for counseling and allowing the patient take an informed decision, thus maximizing their chances of preserving fertility potential.

The end of last year brought some good news for infertility practice in India. After more than 3 years of inter-ministerial and government-public debates and discussions, the Union Health Ministry has at last given the final shape to the much awaited Assisted Reproductive Technology Bill (ART Bill). The Bill will soon be sent to the Union Cabinet for its nod to be introduced in Parliament. The Bill, once it gets the Parliament nod, will provide a national framework for the accreditation, regulation and supervision of infertility clinics which will hopefully bring some semblance of ethics to the practice of infertility in India.



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