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Message from the President

Keeping the momentum and facing the new challenges

The change in the leadership of an organization like IFFS is a significant moment, as it provides us with the opportunity to reflect on what has so far been accomplished and what further needs to be done.

There is no doubt that during the last years, starting with President Jean Cohen up to Bernard Hédon, IFFS has made a major effort to improve its operation, in order to be able to fulfill its mission more effectively. This has always been to stimulate research and to disseminate knowledge in all aspects of reproduction and fertility around the world, especially in the developing countries, where needs are greater and opportunities fewer.

Hence, great emphasis has been placed on education, by appointing Ian Cooke as the Director of Medical Education, who, together with the other members of the Education Committee, managed to organize workshops in almost all continents, i.e. Africa, Asia, Europe and Latin America. At the same time, efforts were invested to raise the scientific quality of our Congress further and this has been acknowledged by our colleagues and sponsors.

Coming, now, to the priorities of the new presidency. I believe that we have a dual goal: on one hand to keep the momentum growing and, on the other, to introduce the necessary organizational changes in order to adapt to the new reality.

Education remains our top priority and we feel very fortunate that Ian Cooke has accepted to carry on the superb job he has been doing, further pursuing training courses, e-learning and low-cost IVF. Continuous improvement of our Congress, both scientifically and organizationally, is also a major target, together with the development of Practice standards and Ethics guidelines.

Nevertheless, the accomplishment of these important initiatives necessitates changes in the structure and operation of IFFS, e.g. the establishment of a permanent Secretariat, self-management of the Congress and budgetary restructuring. Moreover, we believe it is essential to explore the need to modify our by-laws and to create a structure that would enable IFFS to receive donations, ensuring the financial soundness of the Federation.

We are fully aware that our goals may seem ambitious. However, we are confident that with the active participation and support from all the members of the Executive and Scientific Committees, other colleagues that will be invited to be involved, as well as from the National Societies, we can succeed in transforming IFFS into a modern, vigorous and influential organization that can meet the challenges of the recent developments in our field.

Basil C. Tariatzis MD PhD
President of IFFS

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NEWSLETTER
INTERNATIONAL FEDERATION OF FERTILITY SOCIETIES

Member Societies and readers are invited to send all comments, reports or articles of 800 – 1200 words no later than 1st February for the Spring Issue and 1st July for the Autumn Issue. The views expressed in articles in the IFS Newsletter are those of the authors and do not necessarily reflect the official viewpoint of IFS.

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In Memoriam - Jean Cohen

Jean Cohen passed away suddenly this early August while on holidays in Morocco.

Jean Cohen is among those few men who have decisively contributed to shape the future of our profession. Everything that concerned human reproduction was of concern to him. For more than half a century he has been taking part in every fight, for the legalisation of abortion, for the facilitation of universal access to contraception, for the legalisation of human sterilization and, since the birth of Louise Brown, for the development of assisted procreation. Jean was exceptionally gifted for the clear vision he had of everything in any circumstance. And it was second nature for him that, knowing where to go, he would immediately know as well how to get there. This skill was not only related to his diplomatic and political abilities but mainly to his profound comprehension of human nature associated with a relentless will and a permanent personal commitment.

His mentor was Raoul Palmer, for whom he has always kept a profound admiration. He was his direct collaborator and undoubtedly inherited from him the same taste for innovation in a field, which at that time was very confidential, if not disregarded by other colleagues and official authorities.

For IFFS he has been a very important contributor, a long-time officer, President (1992-1995) and then President of the Scientific Programme Committee for the 17th World Congress on Fertility and Sterility in Melbourne (2001).

He was very influential and his opinion sought. He started the Consensus statements on various issues and in particular the widely recognised and useful “Surveillance” which reviews regulations and laws on Assisted Procreation around the world. After his time as an IFFS officer he kept working for IFFS on many occasions. He was again present in Durban (19th World Congress on Fertility and Sterility) and presented there the new version of the Surveillance project.

I personally have had many occasions to work with Jean, both at the national and international levels, and to learn from him. I share this privilege with many other colleagues, so wide were his interests, so ubiquitous were his activities, and so numerous were his friends in France, in Europe, North Africa, and far beyond. A tireless traveller, he was invited everywhere, because he would always present a broader view, an original angle, where society meets the ethical issues and where human psychology outreaches the technical limitations.

His life has been a powerful message in favour of human tolerance and confidence in the unstoppable progress of science, as well as a clear demonstration that things can change if the will is there together with a strong capacity to work.

Our professional world is sad. We will miss Jean. His memory will continue to inspire us but his personality and friendship will no longer be with us. Our condolences go to his family, Michelle, children and grand-children and also to our professional community, his second family, where many of us are also his close relatives and, in some ways, his children.

Bernard Hédon
Immediatepast-president of IFFS

The 19th World Congress on Fertility and Sterility in South Africa

Following six years of hard work by both the IFFS Scientific and the Southern African Society for Reproductive Science and Surgery (SASRSS) LOC committees the 19th World Congress on Fertility and Sterility took place in Durban. The event turned out to be major success in all aspects and was enjoyed by all who participated.

A total of 1248 delegates from 81 countries attended the event - representing the true federation of IFFS. A first attempt was made by IFFS to hold pre-conference workshops. Although a small start, the attendance varied, but overall it was a successful and solid base for future development. 153 free communication papers were accepted and 134 posters approved. As for industry, 35 exhibitors participated in a total of 60 booths.

The Scientific program was exceptionally well structured by the International Scientific Programme Committee led by
Prof. Roger Kemplers in conjunction with the South African Scientific Programme Committee headed by co-chairs, Prof. Thinus Kruger and Prof. Zephne van der Spuy.

There were 19 trilogy and 4 plenary sessions and in addition, a keynote luncheon address, a first for IFFS. The scientific highlights were many and too numerous to mention, but the focus on the African pandemic of HIV certainly struck a sensitive and emotional note from delegates after a superb plenary by Prof. Mitch Besser and the satirist Pieter Dirk Uys’s keynote address.

The opening ceremony consisted of addresses by Dr. Paul Dalmeyard, Prof. Bernard Hedon, Dr. Roger Kemplers, the Mayor of Durban, and the official opening was conducted by acting Minister of Health for South Africa, Mr. Joffe Radebe.

Entertainment with an African flavor featuring a fertility design (The Barenness of the Kalahari to the fruitfulness of Kwa-Zulu Natal) as a theme was provided following the addresses and presentation of Honorary Life Membership awards to Professors Ian Cooke, Gab Kovacs and Gamal Serour.

At the closing ceremony the two Best Poster Awards were made to Dr. Yung Kuei Soong from Taiwan and Dr. Gisela Zang from Argentina. The presidential gavel was handed over by the outgoing president, Prof. Bernard Hedon, to the new president, Prof. Basil Tarletzis. Thanks and congratulations were conveyed to the South African committee and their organizers for their efforts in running a successful congress. Dr. Paul Dalmeyard handed over the responsibility for the next IFFS conference in Munich to Prof. Hans Tinneberg of Germany.

As a final note the LOC would like the Durban event to be remembered as a successful contribution to IFFS and feel that it is imperative that developing countries play an important, indeed integral part in the future of IFFS.

Report on Workshops

So far this year two Workshops have been held, although one planned for Khartoum, Sudan was cancelled at the last minute because of security concerns. One was held on 16 March in Caracas during the Annual Meeting of the Society of Obstetrics and Gynaecology of Venezuela (SOGOV), a meeting with 2,600 registrants. Our joint Workshop was held in two adjacent rooms with a fluctuating attendance from 800 to 1000 for the pre-lunch plenary session. The meeting was opened by Dra F. Feltas, the President of the SOGOV. The contributors were Drs. E. Risquez, of Venezuela, G. Parra Anaya of Columbia, R. Homburg of Israel and Netherlands, M. Camus of Belgium, E. Conifino of The United States, F. Zegers-Hochschild of Chile and myself. There were two discussants for each topic and the detail of the comprehensive infertility review was much appreciated. In addition to the unrestricted educational grants for the whole Workshop programme by Casmed, IBSA, Organon and Serono, additional support for speakers was provided by the local Organon and Serono companies.

The second Workshop was held in Volgograd, Russia, suggested originally by our now General Secretary, Richard Kennedy from Coventry, UK. It has a twinning arrangement with the city, formerly known as Stalingrad, as a result of destruction experienced by both in WW II. He had met Volgograd academics in the UK and saw the potential for developing these links. The arrangements for the Workshop were made in conjunction with the International Dept of the Medical University of Volgograd and it was held on 15-16...
May. The IFFS contributors were Richard Kennedy, Lars Nylund from Stockholm and myself. There were two interpreters from Moscow. The copies of some lectures, as Powerpoint versions, were sent in advance and translated into Russian. There was vigorous discussion that rapidly moved into a discussion of ethics, and the management of clinical cases, led by Lars Nylund was vigorously contested. The audience varied from 100 to 400.

In the afternoon there was a long discussion with the University Vice Chancellor for International Affairs, Prof. A. Spasov, who indicated that a Presidential decree had upgraded the reproductive health programme in Russia, the population currently being below replacement level. This had led to planning for hospital redevelopment, funds being made available for ART in Volgograd. ART is currently practised in a few centres in the region and in St Petersburg, from where data were presented by Prof. V. Korsak, the President of the Russian Association of Human Reproduction.

The Russian Society for Infertility is interested in becoming a member of IFFS and this will be pursued as will help for the University of Volgograd in establishing their ART Centre.

IFFS is providing four scholarships for a Workshop in Lima, Peru on 6-7 August run by Prof. Johan Smitz of Belgium and entitled an International Campus Course on Diagnostic, Therapeutic and Preservation Techniques in Reproduction. He is also a major organiser and contributor on behalf of IFFS to our joint Workshop with the Columbian Association of Fertility and Sterility (ACFE) in Baranquilla, Columbia on In vitro Maturation and Cryopreservation on 9 October. There will also be held in Sri Lanka on 24-5 September a Consultation to develop an approach to regulation of ART. Discussions are continuing with a number of countries to develop programmes for 2008 and beyond.

a valuable resource for examining disease specific expression of the abnormal phenotype.

It is also possible to derive parthenogenetic stem cells that are also pluripotent and may have clinical applications in the future for the oocyte donor and her children. Nuclear transfer (NT) to form patient or disease specific stem cells (NTSC) is more demanding because of the apparent need for large numbers of human oocytes – as experienced in animal NT. These areas are also of interest to ART clinics providing infertility services and they become a component of services offered to patients and research institutions in the future.

Multipotential stem cells may also be harvested from the amniotic fluid and placenta at term. These cells could be available in abundance for basic and clinical research in regenerative medicine. Adult bone marrow stromal cells (mesenchymal stem cells – MSCs) and human umbilical cord MSCs are multipotential and appear to have strong anti-inflammatory properties that may have important clinical applications.

The broad array of stem cell types and their potential applications are of direct interest to ART Clinical Services as a spin-off of reproductive medicine. These are potentially important contributions for the entire community and strategies for their adoption are needed.

HIV/AIDS Care – Doing More with Less

HIV transmission from mother to child is eminently preventable. In resource rich settings, standard testing for HIV in pregnancy, maternal therapy with viral suppressive anti-retroviral regimens started early in pregnancy and continued through delivery and babies treated with long courses of AZT after birth, Caesarean section on demand and formula feeding, have collectively contributed to transmission rates of less than 2%. In resource-poor countries or in the absence of medical interventions and in the presence of extended breast feeding, transmission rates may approach 40%. Testing uptake is poor due to operational challenges of administering the test and stigma associated with testing and positive HIV status.

Nevirapine (NVP) monotherapy is less effective than more complex anti-retroviral regimens. Dual therapy with AZT and NVP and highly active antiretroviral therapy (HAART), while growing in popularity, are operationally challenging to deliver in the setting of women who have few antenatal visits and...
frequently deliver at home. Routine Caesarean sections are largely unavailable and if offered more frequently would put a strain on an already over-extended health care system. Feeding options are most often limited to breast feeding due to poor access to clean water and formula.

Efforts to identify and embrace strategies to increase testing uptake, provide more effective anti-retroviral regimens, provide support for women to choose and adhere to an exclusive feeding method and develop affordable and accessible technologies that permit testing of babies at 4-6 weeks instead of at 15-18 months are underway with hopes that vertical transmission rates can be reduced and the quality of life for women and children infected with and affected by HIV/AIDS can be improved.

**Communication the Key to Beating HIV**

Satirist Pieter-Dirk Uys entered the controversy around the stadiums for the Soccer World Cup in 2010, suggesting just one less stadium would allow for the perfection of the female condom, “so billions of women around the world have the capacity to protect themselves”. And that was just the start of the stabs he took at South African politicians over their role in the country’s HIV/AIDS crisis, warning people not to wait for the government to help them, but to get up and help themselves. During his keynote address Uys had delegates from around the world laughing, then deadly silent as they took in the scope of the threat of the pandemic to South Africa. While the first world was burying lambs and cows to avoid disease, South Africa was burying its babies. “South Africa is losing 1000 people every day. While you’re sitting in this conference (this week) we will have had four 9/11 situations in our country,” Uys warned.

Hitting out at the government, he said South Africa had first world politics and a third world society, in which the rich could access antiretrovirals to keep them alive while the poor simply die. “We have to find a way to communicate to each other that there is life beyond HIV, “It is a life sentence, but it is not a death sentence,” he said. His impersonations of former President PW Botha, national icon Nelson Mandela and Archbishop Emeritus Desmond Tutu had delegates laughing aloud, but the so-called “national treasure” that Uys had become never let the ball drop for a second in the bid to get his HIV message across. Calling apartheid the first virus, and HIV the second to afflict South Africa, Uys revealed that he had visited 700 schools and talked to more than one million pupils in the past six years in his personal bid to do as much talking, as openly as possible, about the virus. He said apartheid had flourished for 40 years because everyone lived in fear, and suggested that open communication was the only way to ensure South Africa was not paralysed by similar fear in respect of HIV/AIDS. “The more we talk, the less space we leave for rumours, urban legends and lies.” Uys told delegates about two women he knew who had both been raped and who now wore female condoms in case of further assault to protect themselves from HIV. And he said he had met a young man of 12 who was already the father of a baby. The mother of the child was just 14, and the baby HIV positive. He was critical of “sexy” advertising for everything from lawnmowers to motor cars, warning against consequent surprise when our youngsters responded accordingly. The government took another knock from Uys who had everyone laughing when he warned that “governments only help themselves” and “that’s why they’re politicians and not people”. But he said he was heartened at his experience in communities, watching everyone from grandmothers and children, to district nurses, teachers and doctors “helping ourselves”.

South Africa needed its own Princess Dianas and Elizabeth Taylors to stand up and speak out. “We need our sportsmen, our singers, our actors to stand up and let everyone know that HIV is still lethal and it can still kill you. “It’s far worse than we know, and politics is eating us up because everyone focuses on politics and forgets the people,” Uys said.

By DIANA MARSHALL
Report of General Assemblies

New Member Societies
At the First IFFS General Assembly in Durban, Gamal Serour, Secretary General, presented six societies that have applied for membership in IFFS and whose formal applications were reviewed and approved by the Executive Committee. The membership of these six societies was ratified by the General Assembly:
- Georgian Association of Reproductologists
- Indian Fertility Society
- Iranian Society for Reproductive Medicine
- Irish Fertility Society
- Turkish Society of Reproductive Medicine
- Vietnam Gynecology Obstetrics Family Planning Association

2013 IFFS World Congress
Following the established procedure, President Bernard Hedon presented the recommendation of the Executive Committee that the bid of the USA (American Society for Reproductive Medicine – ASRM) be accepted to host the 2013 IFFS World Congress. President Hedon explained the process in which four bids were reviewed. Robert Rebar, Executive Director of ASRM, made a brief presentation describing the proposed joint IFFS/ASRM Congress to be held October 2013 in Boston, Massachusetts in the USA. The vote of the membership at the Second General Assembly approved acceptance of the proposal.

Elections
The First General Assembly elected the following countries to membership on the Nominating Committee led by President-Elect Basil Tarlatzis: USA, United Kingdom, Egypt and Paraguay. They presented their recommendations for open officer and committee membership at the Second General Assembly where candidates were also accepted from the floor. Election results can be found inside the front cover of this Newsletter. Following the closing ceremony of the Congress, the new officers and committees assumed their roles.

International Calendar

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<th>Event</th>
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<tr>
<td>24th Annual Meeting of ESHRE</td>
<td>6-9 July 2008</td>
<td>Barcelona, SPAN</td>
<td><a href="http://www.eshre.com">www.eshre.com</a></td>
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<tr>
<td>64th Annual Meeting of the ASRM</td>
<td>8-12 November 2008</td>
<td>San Francisco, USA</td>
<td><a href="http://www.asrm.org">www.asrm.org</a></td>
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