

## **Short Communication**

A SCITECHNOL JOURNAL

## Reproductive Endocrinologist as a Profession

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## Introduction

A doctor who specialises in the endocrine system is known as an endocrinologist. Hormones are produced by a network of glands inside your body that help cells communicate with one another. The endocrine system is diverse and complicated, but one of its most essential functions is to aid reproduction. An Obstetrician/ Gynecologist (OB/GYN) who identifies and treats endocrine problems that are either directly or indirectly connected to reproduction is known as a Reproductive Endocrinologist (RE). They mostly deal with infertility, which occurs when a woman is unable to conceive after a year of unprotected intercourse.

Infertility affects a large number of people. Infertility affects up to 15% of couples, and it affects males equally as much as it does women. Infertility can be treated with surgery, medication, or treatments by reproductive endocrinologists. They must first determine the root of the problem before devising a treatment strategy. They could do so by:

- Examine your blood sugar and thyroid function.
- Perform a sperm test.
- To check for abnormalities, have an X-ray of the uterus and fallopian tubes.
- Use an ovarian reserve fertility test to determine the levels of several reproductive hormones

IVF takes 3 weeks or longer to complete. However, it is now the most successful kind of assisted reproductive technology. Over 200,000 kids have been born as a consequence of this surgery and similar procedures. It takes a long time to become a reproductive endocrinologist. To begin, you'll need a bachelor's degree, preferably in a science-related subject. To enter medical school, you must pass the Medical College Admissions Test (MCAT), just like all other physicians. After that, you'll enrol in and complete a four-year

medical school programme. The American Board of Obstetrics and Gynecology will then certify you as an OB/GYN when you complete a residency programme.

It's also the only specialty in which the clinic and lab are so tightly linked that they can't work apart. This opens up a lot of options (and materials) for investigation. However, without a solid foundation in endocrinology, embryology, genetics, epigenetics, and placental biology, this potential will be squandered.

Recognizing the relevance of endogenous and exogenous environmental variables on health, as well as the potential to investigate their effects throughout the pre-pregnancy and pregnant periods. It is impossible to overestimate one's ability to have a tremendous impact on the following generation. In reality, reproductive medicine, which covers all aspects of life's origin, is the defining feature of all medicine and surgery. We'll need to understand ovarian ageing (ultimately leading to menopause), metabolic health (of the polycystic ovarian syndrome patient), surgical management (indications, risk, optimization for endometriosis, and uterine fibroids), and more to optimise success rates with IVF (if success is the birth of a healthy child setup for a healthy life). Exercise on a regular basis.

Training provides an opportunity to learn about the depth and breadth of our field. Even if their eventual practise becomes more focused, this fundamental training will provide a practicing REI with the ability to make complicated decisions, ask the appropriate questions, and deliver the greatest treatment.

**Citation:** Shehata M (2021) Reproductive Endocrinologist as a Profession. J Genit Syst Disord 10:2.

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Received Date: 12 February, 2021; Accepted date: 26 February, 2021;

Published Date: 05 March, 2021

