procedures in the urology/andrology clinics of five training hospitals in China.

Results: One hundred and seventy-six patients were excluded, other patients (n=3,151) with duration of ED between 0.5 year and 20 years were enrolled. The causes of ED was found be psychogenic (59.2%), vasculogenic (21.3%), neurogenic (4.1%), anatomical/structural (2.8%), hormonal (7.1%) or drug-induced (5.5%). A significant difference was detected in the median IIEF-5 score between the subjects with psychogenic and organic ED [15 (IQR: 13, 17) *vs.* 12 (IQR: 9.5, 14.5), P<0.001]. There was no significant difference among the organic groups (P=0.073), and no significant difference was found between arteriogenic and venogenic cause [13 (IQR: 10.5, 15.5) *vs.* 13 (IQR: 11, 15), P=0.912 (adjusted α =0.017)].

Conclusions: Although the IIEF-5 score of men with psychological ED is greater than those with organic causes, there is no difference among patients with different organic pathophysiologies. The IIEF-5 is suitable to be a screening tool; however, our data indicate that IIEF-5 is not a definitive diagnostic tool to discriminate the pathophysiological causes of ED.

Keywords: Pathophysiologies; IIEF-5 score; ED patients

AB164. Body mass index, waist-to-hip ratio, waist circumference and waist-to-height ratio can not predict male semen quality: a report of 1,231 infertile Chinese men

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Background: There were controversial results between obesity-associated markers and semen quality.

Methods: In this study, we investigated the correlations between age, obesity-associated markers including body mass index (BMI), waist-to-hip ratio (WHR), waist-to-height ratio (WHtR) and waist circumference (WC), the combination of age and obesity-associated markers, semen parameters and serum reproductive hormone levels in 1,231 infertile men.

Results: The results showed that BMI, WC, WHR and WHtR were positively related to age, and there were also positive relations between BMI, WHR, WC and WHtR and between sperm concentration (SC), total sperm count (TSC), PR, sperm motility and percent of normal sperm morphology (NSM). However, age, each of obesity-associated markers, and the combination of obesity-associated markers and age were unrelated to any of semen parameters including total normal-progressively motile sperm count (TNPMS). Age, BMI, WHR, WC and WHtR were negatively related to serum testosterone and SHBG levels. However, only serum LH and FSH levels were negatively related to sperm concentration, NSM and sperm motility.

Conclusions: Although age and obesity have significant impacts on reproductive hormones such as testosterone, SHBG and estradiol, semen parameters related to FSH and LH could not be influenced, indicating that obesity-associated markers could not predict male semen quality.

Keywords: Obesity; body mass index (BMI); waist circumference (WC); waist-to-hip ratio (WHR); waist-to-height ratio (WHtR); semen parameter; reproductive hormone

AB165. Urethral injury of penile surgery result in urethrocutaneous fistula (report