



The role of circadian rhythm in male reproduction

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Purpose of review

To integrate evidence on the role of circadian rhythm in male reproduction. Several studies report on various aspects of the association between the circadian system and male reproductive function in animals and humans both in physiological condition as well as in the case of subfertility.

Recent findings

Epidemiological data demonstrate diurnal and seasonal changes as well as the effect of sleep/wake cycles on the quality of semen. Rare and common genetic variation in circadian clock genes in humans and animal models support the role of circadian rhythms in male fertility in humans.

Summary

Current data support the modest effect of the circadian clock on male reproductive potential; however, the evidence available is still fragmented and inconclusive. Additional well designed and sufficiently powered studies are needed to delineate the role of the circadian clock both in cause and potential interventional and preventive approaches in male subfertility.

Keywords

animal models, circadian clock, epidemiology, genetics, male infertility

INTRODUCTION

Cause of male subfertility is still poorly understood. Moreover, reasons for the seemingly increased burden of subfertility in modern society are still mostly unknown. The circadian clock, which is a temporal program that developed as an adaptation on earth's rotation, is one of the most basic physiological mechanisms exerting its effect through the control of metabolism, endocrine and immune function as well as behavior. Due to its numerous systemic effects it would be reasonable to expect that circadian clock is also involved in mechanisms involved in human male reproduction. Disrupted eigen and external zeitgebers, which are increasingly prevalent in modern societies could well contribute through circadian disruption, social jet lag and circadian misalignment to impairment of male reproduction. Namely, when perturbed, impairment of the system may through the (dis)regulation of physiological processes such as cell cycle progression, hormone secretion, immune regulation contribute to several human diseases including cancer, diabetes, obesity, cardiovascular and neurodegenerative diseases and sleep disorder [1,2].

The circadian clock is both autonomous, based on cellular clocks which build rhythmic activity of tissues, organs and entire organism as well as controlled by synchronization and entrainment processes through environmental signals of the

central pacemaker rooted in the suprachiasmatic nucleus. Molecular components of the circadian clock network represent positive and negative transcriptional–translational feedback loops of many genes. Testis a complex organ in which several cell types directly produce gametes, but are also the major source of circulating androgens with ultradian (multihour), infradian (multiday) and seasonal periodicity of the seminiferous epithelium, Sertoli and Leydig cells [3].

The current review article brings together evidence to stimulate further research on the role of the circadian system in male reproduction function in humans.

EPIDEMIOLOGY

Epidemiological evidence supports the role of the circadian clock on the normal male reproduction in

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Curr Opin Endocrinol Diabetes Obes 2019, 26:313–316

DOI:10.1097/MED.0000000000000512

KEY POINTS

- Epidemiological studies support diurnal and seasonal changes as well as the effect of sleep/wake cycles on the quality of semen.
- Rare and common genetic variation in circadian clock genes in humans and animal models were associated with subfertility in males.
- Existing evidence available is still fragmented and inconclusive and additional studies are needed to delineate the role of the circadian clock both in cause and potential interventional and preventive approaches in male subfertility.

humans. Several studies suggested that annual rhythms of human conception rates were correlated with the season [4,5] as well as photoperiod, monthly averages of daily hours of sunshine, minimum and maximum temperature and humidity [6]. Moreover, the quality of semen changed both diurnally and seasonally [7]: semen samples collected in the early morning showed the highest levels in sperm concentration, total sperm count and normal morphology. Evidence for daily diurnal variance in sperm DNA fragmentation index was demonstrated both in man and mice [8]. In addition to diurnal variation in sperm parameters, seasonal variation has been reported in several studies. Increase in sperm concentration and total sperm count was reported in spring, while summer was associated with the highest percentage of normal morphology and significant decreases in sperm concentration and total sperm count [7]. Similarly, other studies reported better sperm parameters in normozoospermic and oligozoospermic men in spring in winter [9,10], while Giorgi *et al.* [11] provide evidence for a higher prevalence of samples with normal sperm pH during spring and higher volume of sperm in winter.

An additional level of evidence for the role of the circadian clock in male reproduction comes from circadian rhythm disruptors including sleep. Sleep/wake cycles are intertwined with the circadian system and several lines of evidence link sleep with male reproduction [12]. Sleep duration was associated with testis volume [13], male fecundability [14], total sperm number and semen volume [15,16], sperm chromatin integrity [17], while the effect of sleep duration on testosterone concentrations is not conclusive [18,19]. Significantly, another circadian clock disruptor, shift work, was so far not convincingly associated neither with semen parameters nor testosterone levels [20–23].

To convincingly detect relatively small effects of the circadian clock on male fertility, future

epidemiological studies should involve large groups of men and control for relevant cofounders.

ANIMAL STUDIES

Strong evidence for the involvement of circadian clock in male reproduction stems from the animal models. Mutations in some key regulators of the circadian clock are associated with reduced male fertility in animal models although the mechanisms are not totally elucidated yet. Mice with homozygous mutations in the *Clock* gene have reduced male fertility [24,25] and it was proposed that the serine protease inhibitor *Serpina3k* is involved in the pathogenic mechanism by regulating acrosin activity [26]. Furthermore, it was suggested that CLOCK can interact with RANBP9 and bind several key transcripts in mouse spermatogenesis [27].

Mutations in another central circadian clock genes, *Bmal1* are associated with male infertility [28]. Male knockout mice had low-testosterone and high-luteinizing hormone concentrations suggesting steroidogenesis impairment in testes and other steroidogenic tissues. Peruquetti *et al.* [29] provided evidence that both BMAL1 and CLOCK proteins contribute to assembly and physiology of the chromatoid body, the cytoplasmic organelle playing an important role during the late steps of germ-cell differentiation. It was also reported that BMAL1 protein contributes to the maintenance of neural circuits that drive pheromone-mediated mating behaviors [30].

The abnormal testicular function was also found in knockout mice for cryptochrome 1 (*Cry1*) gene [31]. Namely, *Cry1* deficiency increased testicular germ cell apoptosis and decreased sperm count and was associated with differential expression of 375 testicular genes. In *Drosophila melanogaster* loss of circadian clock function related to the mutated period (*per0*), timeless (*tim0*) genes lead to decreased reproductive function in males [32].

GENETIC STUDIES IN HUMANS

There is limited evidence for the involvement of rare, functional genetic variation in male infertility. Whole exome sequencing revealed a homozygous mutation in *NPAS2* gene in a single Turkish family with nonobstructive azoospermia [33]. Rare functional genetic variation in human circadian genes have been reported in human Cryptochrome 1 (*CRY1*) [34], *CRY2* [35] genes, *TIM* (*TIMELESS*) [36] and *CKIδ* [37] genes, that resulted in delayed sleep phase disorder and familial advanced sleep phase syndrome. In none of them, male subfertility was reported; however, the number of families was too

small to formally evaluate male reproductive potential.

Further evidence for the impact of human genetic variation on male fertility comes from genetic association studies. Genetic variability in the *CLOCK* gene was associated with semen quality in idiopathic infertile men [38] and with increased risk for male infertility [39,40].

CONCLUSION

Presented epidemiological data, as well as genetic studies in humans and animals support the contribution of circadian clock in male fertility. Based on the current data, we could hypothesize that both circadian rhythm disruptors as well as genetic variation in genes coding for key regulators of circadian clock could modestly modify male reproductive potential. Nevertheless, the evidence available is still fragmented and inconclusive, studies are frequently underpowered. Therefore, additional well designed studies are needed to delineate the role of the circadian clock both in cause and potential interventional and preventive approaches in male subfertility.

Acknowledgements

None.

Financial support and sponsorship

The current study was supported by Slovenian Research Agency.

Conflicts of interest

There are no conflicts of interest.

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