Genetics of common disorders causing female infertility: part I
Preface

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The genetics of common disorders causing female infertility have received less attention than have many rarer disorders. There are several logical explanations for this death of attention. Firstly, gynaecological disorders usually involve internal organ systems, which, until recently, were visualized only following invasive surgery. Thus, it was relatively more difficult to document heritable tendencies in these disorders than in those characterized by more readily accessible organ systems. Lack of crisp, non-invasive, diagnostic criteria exacerbated this problem. Secondly, gynaecological disorders occur only in members of one sex; thus fewer familial aggregates would be expected than if both sexes were affected. Thirdly, progress has been delayed by the relative paucity of geneticists interested in these disorders.

The landscape has now changed. Availability of laparoscopy and ultrasound has greatly facilitated diagnosis. Searches for non-genetic factors have proved relatively fruitless. General acceptance has evolved toward genetic factors playing paramount roles in virtually all disorders causing female infertility, even if the nature of specific genes remains obscure. Candidate gene and genome-wide approaches developed for elucidation of rare Mendelian or polygenic disorders are increasingly being applied to the common disorders causing female infertility.

In the current and in a forthcoming issue of the journal, we shall consider three common disorders: polycystic ovarian disease, leiomyomata, and endometriosis. In each, contributors will consider heritability, candidate genes and genome-wide approaches. For each condition, progress is evident, even if the complete story is far from being written.