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Male Hormone Replacement Male Menopause (Andropause)

We age because our hormones decline; our hormones don't decline because we age.

Andropause is the term used to describe the male condition of low testosterone that gradually occurs as a man ages. Men typically begin to have a lower T level beginning in their 40's that progressively worsens as they age. This isn't true for all men, but it is the norm. Half of seemingly healthy men between the ages of 50 and 70 will have a T level below the lowest level seen in healthy men between the ages of 20-40.

Testosterone gets lower every year. The long term consequences of low T are severe and lead to a loss of the ability to enjoy life.

What are the Symptoms of Low T?

Low Testosterone leads to a host of problems that manifest themselves gradually over time. The process is often so slow that it isn't noticed. The symptoms are chalked up to "aging" and are considered inevitable. These include weight gain (especially around the waist), loss of energy and drive, decreased ability to add muscle at the gym, decreased memory, and decreased libido and performance ability, both athletically and in bed.

Low T leads to increased ageing of the heart and circulation along with increased heart attacks and strokes. The brain also ages prematurely leading to decreased memory and an increase in the incidence of dementia and Alzheimer's Disease. Muscle pain and stiffness in the joints is seen along with a decrease in lean body mass (less muscle) and anemia. Mentally men get " Grumpy Old Man Syndrome": fatigue, tiredness, depression, mood changes and even dysphoria (an uncomfortable mood in response to ordinary life events).

Low T is a lethal disease. It leads to excess fat, diabetes and metabolic syndrome.

Benefits of Replacing T

Studies have shown that replacing lost Testosterone to levels that were present when a man was younger has a host of benefits. The goal here is not to use testosterone in excess but to rebalance the body's level to its natural state when younger and more healthy. High endogenous T = low mortality from cardiovascular disease and cancer. There is a 41% decrease in chance of dying in men with T>564 compared to 350.

Is it Safe?

The biggest fear among men and their doctors is that elevating Testosterone will lead to an increase in prostate cancer. Paradoxically men who develop prostate cancer do so when their levels are low, not high. The other question is whether adding T to an existing prostate cancer that is slow growing will speed it up or make a small cancer that is dormant flourish. Dr. Abraham Morgentaler of Harvard has studied this extensively and has said "There is not now nor has there ever been a scientific basis for the belief that T causes prostate cancer to grow." There is no adverse effect of T on the prostate. With all of the benefits to health in general it seems that normalizing Testosterone can only have a beneficial effect on a man.

Side Effects

The side effects of increased testosterone are easily managed. The major effect is an increase in red blood cells. This leads to an increased oxygen carrying capacity, although if too high it is not healthy. This is more often seen when T injections are used. The treatment is to donate blood twice a year. There have been no testosterone associated thromboembolic (clotting) events reported to date.

Gynecomastia (swelling of the breast tissue) can be seen if testosterone is converted to Estrogen (female hormone). Estrogen levels are checked while on T and can be controlled by blocking the enzyme (aromatase) that converts T to Estrogen. This decreases the swelling. As your body fat decreases while on T, and aromatase is made in fat, estrogen will naturally decrease. Interestingly men need some estrogen to maintain libido and a sense of well being.

Fluid retention is rare and self limiting.

Decrease in testicular size and sperm count. Other drugs must be taken with T if you and your partner are trying to become pregnant.

Does T increase male pattern baldness? It is unknown at this time. Men that are susceptible to hair loss from Testosterone typically have exhibited this trait earlier in their lives. The culprit is DHT (dihydro T) that is made from T. This can be blocked using Avodart.

Delivery Methods

Daily cream

- easy to apply
- raises T quickly, easy to control dose
- may lead to more DHT production and its effects on hair and bph
- can get on significant others in the first hour

Weekly injections

- easily done with small needle in fat
- less daily hassle
- can adjust dose as needed

Quarterly pellets

- good steady state delivery for 3-4 mos
- no need to remember to use
- does require a small in office procedure to place
- doseage cannot be adjusted once placed
- can (rarely) become infected

Lab Tests Before Treatment

Physical Exam

Yearly digital rectal exam (DRE)

Labs: Testosterone

Free T

sex hormone binding globulin (SHBG)

FSH/LH (pituitary hormones)

Complete blood count (CBC)

Prostate specific antigen (PSA)

Estradiol

Lab Tests During Treatment

Every 6 mos:

Total T and Free T

CBC

PSA

Estradiol

Yearly
Digital rectal exam

Costs

Evaluation

Initial consultation/evaluation: \$350

Follow up evaluations: \$150

A statement will be provided allowing you to submit to your insurance company for reimbursement

Lab work

Tests can be billed to your insurance. Forms will be provided to take to the lab

Medication

A nationally recognized compounding pharmacy is used to custom blend your medicine. They will help you determine what your insurance will cover. You will be happily surprised at how little the cost will be over time and how much better you will feel.