

ENDOCRINOLOGY

ANDROPAUSE, MORE THAN JUST A TESTOSTERONE PROBLEM

THE term 'male menopause' was first used in 1944 to describe various age-related problems in men, which partially mirrored the symptoms experienced by women during the menopausal period. It is related to changes in male hormone levels. These symptoms are known to be due to testosterone deficiency, androgen deficiency and hypogonadism.

Male menopause involves a drop in the production of testosterone in men over the age of 50 or older. It is often affiliated with hypogonadism. Both conditions involve lowered testosterone levels and similar symptoms.

Testosterone is a hormone produced in the male testes. It does more than fuel your sex drive. It also fuels changes during puberty, fuels your mental and physical energy, maintains your muscle mass, regulates your fight-or-flight response, and regulates other key evolutionary features.

Andropause differs from female menopause in several ways. For one thing, not all men experience it. For another, it doesn't involve a complete shutdown of the reproductive system.

Male menopause can cause physical, sexual and psychological problems which typically worsen with age. They can include:

- low energy
- depression or sadness
- decreased motivation
- lowered self-confidence
- difficulty concentrating
- insomnia or difficulty sleeping
- increased body fat

- reduced muscle mass and feelings of physical weakness
- gynecomastia, or development of breasts
- decreased bone density
- erectile dysfunction
- reduced libido
- infertility

Swollen or tender breasts may also be experienced, decreased testicle size, loss of body hair or hot flushes. Low levels of testosterone associated with andropause have also been linked to osteoporosis, where bones become weak and brittle. These are rare symptoms.

These hormonal alterations typically affect both men and women at the same age.

Before reaching puberty, testosterone levels are low. Then they increase when the male reaches sexual maturity. Testosterone is the hormone that fuels the changes associated with male puberty:

- growth of muscle mass
- growth of body hair



- deepening voice
- alterations in sexual behaviour

As men get older, testosterone levels will typically begin to drop. Some studies report that testosterone levels tend to decline an average of 1% per year once a man turns 30. Some health conditions can cause earlier or more

drastic declines in testosterone levels.

Testosterone levels can be tested by a simple blood analysis.

Symptoms can probably be managed without treatment if they do not cause undue stress or disrupt normal daily activities. The biggest hurdle in treating male menopause may be discussing the symptoms with one's

GP. Many men are too intimidated or shy to discuss sexual problems with their doctor.

The most common type of treatment for symptoms of male menopause is a healthier lifestyle. For example, your doctor might advise you to:

- stick to a healthy diet
- get regular exercise
- get enough sleep
- reduce your stress levels

These lifestyle habits can be of benefit to all men, however, men who are experiencing symptoms of andropause and adopt these basic habits may experience a dramatic change in their overall health.

If one of the symptoms is depression, the doctor may prescribe antidepressant therapy and lifestyle changes.

Hormone replacement therapy is another treatment option. However, this is very controversial. Like performance-enhancing steroids, synthetic testosterone can have damaging side effects. For example, if you have prostate cancer, it may cause your cancer cells to grow. If your doctor suggests hormone replacement therapy, weigh all of the positive and negative points before deciding.

Article supplied by the Hospital Particular do Algarve Group, with hospitals in Alvor and Gambelas (Faro)

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