

# Testosterone isn't the help some hoped for when women go through menopause early

January 29 2014

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With plummeting hormone levels, natural menopause before age 40 can put a damper on women's mental well being and quality of life. But bringing testosterone back up to normal may not bring them the boost some hoped for, found a new study published online today in *Menopause*, the journal of The North American Menopause Society (NAMS).

Before [age](#) 40, [ovaries](#) stop functioning in about 1% of [women](#) without some obvious genetic abnormality to blame, bringing on an early menopause. Called "primary ovarian insufficiency" or POI, the condition can spell not only infertility and other physical problems but also depression and decreased quality of life. Adding back lost estrogen and progesterone helps. But ovaries normally produce testosterone, too, which has mental and physical effects. Adding it back, some thought, could be helpful.

But studies looking at adding testosterone for women who lose ovarian function for other reasons, such as after natural menopause or hysterectomy, haven't yielded consistent results. So these investigators looked at the mood and quality of life data from women with POI in a study done at the National Institutes of Health Clinical Center in Bethesda, MD, where women underwent a year of hormone therapy that included testosterone. In the randomized, double-blind, placebo controlled study, 61 women used placebo patches and 67 women used patches that delivered 150 micrograms of testosterone a day, similar to the Intrinsic patch that was rejected by FDA as a treatment for low sexual

desire in women.

After 12 months, [testosterone levels](#) were back up to normal for the women who got the treatment. The investigators saw no detrimental effects of testosterone, but they found no significant improvement either in measurements of quality of life, self esteem and mood compared with placebo.

Bringing testosterone back to normal doesn't help these aspects of life, suggesting that it's something other than testosterone that plays a role in mood problems for women with POI, concluded the researchers.

But there are still unknowns. The study didn't measure depression and sexual function specifically, so the investigators couldn't draw conclusions about the effects of normalizing testosterone on those problems. Having some effect on desire may take raising testosterone to higher-than-normal levels, according to some studies, although that poses questions about safety.

"This study makes an important contribution toward understanding what testosterone can and cannot do. With all the hype about [testosterone](#) and aging, it is important that the public have the facts," says NAMS Executive Director Margery Gass, MD.

**More information:** The article, "Effects of physiologic testosterone therapy on quality of life, self-esteem and mood in women with primary ovarian insufficiency," will be published in the September print edition of *Menopause*.

Provided by The North American Menopause Society

Citation: Testosterone isn't the help some hoped for when women go through menopause early (2014, January 29) retrieved 27 April 2024 from <https://medicalxpress.com/news/2014-01-testosterone-isnt-women-menopause-early.html>

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