

# Experts take strong stance on testosterone deficiency and treatment

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In an effort to address widespread concerns related to testosterone deficiency (TD) and its treatment with testosterone therapy, a group of international experts has developed a set of resolutions and conclusions to provide clarity for physicians and patients. At a consensus conference held in Prague, Czech Republic last fall, the experts debated nine resolutions, with unanimous approval. The details of the conference were published today in a *Mayo Clinic Proceedings* report.

Much of the controversy surrounding [testosterone therapy](#) stems from intense media attention on recent reports suggesting increased heart-related risks associated with [testosterone treatment](#). "The importance of this meeting was to set aside the various distortions and misinformation that have appeared regarding testosterone therapy and to establish what is scientifically true based on the best available evidence," said Abraham Morgentaler, MD, chairman of the consensus conference. Morgentaler is the Director of Men's Health Boston and an Associate Clinical Professor of Urology at Beth Israel Deaconess Medical Center and Harvard Medical School.

After examining the best available scientific evidence, Morgentaler and colleagues—who included experts with specialties in urology, endocrinology, diabetes, internal medicine, and basic science research—agreed on the following:

- TD is a well-established, clinically significant medical condition that negatively affects male sexuality, reproduction, general

health and quality of life.

- Symptoms and signs of TD occur as a result of low levels of testosterone and may benefit from treatment regardless of whether there is an identified underlying origin.
- TD is a global public health concern.
- Testosterone therapy for men with TD is effective, rational, and evidence-based.
- There is no testosterone concentration threshold that reliably distinguishes those who will respond to treatment from those who will not.
- There is no scientific basis for any age-specific recommendations against the use of testosterone therapy in adult males.
- The evidence does not support increased risks of cardiovascular events with testosterone therapy.
- The evidence does not support increased risk of prostate cancer with testosterone therapy.
- The evidence supports a major research initiative to explore possible benefits of testosterone therapy for cardiometabolic disease, including diabetes.

"It will be surprising to those unfamiliar with the literature to learn how weak the evidence is supporting the alleged risks of cardiovascular disease and [prostate cancer](#)," said Michael Zitzmann, MD, vice-chair of the conference and a Professor in the Centre for Reproductive Medicine and Andrology at the University of Muenster in Germany. "Indeed, there is substantial data suggesting there may actually be cardio-protective benefits of testosterone therapy."

"The medical and scientific communities are still largely unaware of the major negative impact of testosterone deficiency on [general health](#)," added co-author Abdulmaged Traish, PhD, a Professor of Urology at Boston University Medical Center. "The media-driven focus on

unproven risks has obscured the known health risks of untreated [testosterone](#) deficiency: obesity, reduced bone mineral density, and increased mortality."

Provided by Beth Israel Deaconess Medical Center

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