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Men's Health Network May 2002 Contact: 202-543-6461 x 101

Aging and low testosterone: time to intervene!

Andropause and the Aging Process:

The aging process leads to low testosterone in men. This process occurs gradually over many years resulting in hypogonadism (low testosterone). Hypogonadism in aging men is called **Andropause**, popularly known as male menopause. Male menopause may be a misnomer as men continue with fertility beyond andropause, and not all men become symptomatic with this transition, which typically appears in the fifties.

Transitory Symptoms and Long-term Effects:

The transitory symptoms could include fatigue, loss of libido, memory problems and depression. The long-term effects of andropause affect all men eventually, as progression of andropause can contribute to osteoporosis (bone loss), dementia, frailty, falls, heart and circulatory problems. Circulatory problems can contribute to erectile dysfunction. If we for a moment pause and think what happens to women as they age without estrogens, we will understand that andropause is truly not a figment!

International Recognition in the Medical Community:

We have not paid enough attention to this aspect of aging men's health in the United States. There is no national body to study andropause, which is a very important physiological phenomenon in aging men. Andropause is also about *preventive medicine* during the aging process. If andropause were not a significant epidemiological societal issue, many countries would have left it alone. The European Menopause Society changed its name to *The European Menopause & Andropause Society* a few years ago. Our neighbor to the north has an active Canadian Andropause Society. There is a similar organization in the United Kingdom and Australia. Ashamedly, we do not have an American equivalent, and yet andropause affects approximately 10 million men in the United States! This figure is projected based on epidemiological studies of hypogonadism in aging men. The estimates could even be higher if we include men who go under diagnosed because of lack of knowledge by doctors and patients.

Public Health and Cost Considerations:

If we pay attention to the preventive health aspects of andropause, we would definitely be able to demonstrate not only improvements in quality of life but also perhaps cost savings in the long term. As it is, the Medicare budget is strained with excess utilization. Addressing andropause issues can mean decreasing osteoporosis, erectile dysfunction, circulatory, heart, and memory problems in men.

Preventive aspects of andropause management would include exercise, nutrition, weight management and in some cases hormonal replacement for men. Testosterone is not only about sexuality for men as hormones regulate many functions including bone, brain, heart and circulation.

Author:

Robert S. Tan M.D., M.B.A. Associate Professor (Geriatrics), University of Texas, Houston Author of *The Andropause Mystery* Men's Health Network Board of Advisors