

Male Aging & Its Management

Erkek Yaşlanması ve Kontrolü

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ABSTRACT There is observed an intensive search for the most effective approach to ensure successful aging. Uncovering a fountain of youth has become a great endeavor for modern society. Many hormones have been proposed to play a role in rejuvenating aging people.

Due to a decrease in Leydig cell function, a considerable proportion of men over 50 years of age develop hypogonadism. "Andropause" or the "partial androgen deficiency of aging male" (PADAM) is defined as a result of somatic consequences of gradually falling blood testosterone concentrations during male aging. The diagnosis is based on clinical signs and symptoms plus laboratory confirmation via the measurement of low morning testosterone levels on two different occasions. Approximately 30% of men 60-70 years old and 70% of men 70-80 years old have low testosterone levels. Symptoms of testosterone deficiency include loss of energy, depressed mood, decreased libido, erectile dysfunction, decreased muscle mass and strength, increased fat mass, frailty, osteopenia and osteoporosis. Testosterone supplementation of hypogonadal men has been shown to improve many of these findings like general well being, increase bone mass, lean body mass, muscle mass, hematopoiesis as well as libido, mood and cognition. Studies have proved that the nitric oxide erectile pathway is testosterone – dependent. Several clinical studies have demonstrated the benefits of a combination of testosterone and sildenafil. Testosterone therapy provided the evidence of the erectile response to sildenafil and it may be considered as the treatment of erectile dysfunction in men with decreased testosterone levels, who have failed prior treatment with sildenafil alone.

It has not been proven that elevation of the serum testosterone level to the normal "young" range results in a greater risk of developing prostate cancer. Also it was shown that testosterone treatment does not provoke a significant increase in serum levels of prostate-specific antigen (PSA) or prostate volume. But the determination of PSA levels under testosterone treatment is necessary every 3 months.

Several studies substituting testosterone in elderly men with low serum testosterone have shown that men with clinical symptoms of hypogonadism will get most profits from such therapy.

Over the past several years of prospective studies on testosterone therapy in the aging male were performed and shown to be beneficial for certain older men in preventing or delaying some aspects of aging.

Key Words: Male aging, testosterone, andropause, hypogonadism

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