

Testosterone Replacement Therapy

Common Signs & Symptoms of Testosterone Deficiency

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| ☐ Decreased energy | ☐ Decreased facial/body hair | ☐ Depression or mood changes |
| ☐ Fatigue/ Lethargy | ☐ Decreased libido | ☐ Reduced motivation |
| ☐ Decreased activity | ☐ Decreased erectile function | ☐ Irritability |
| ☐ Reduced muscle mass | | |

Initial TRT Blood Tests

Total Testosterone (before gam)
LH/ FSH
Hemoglobin/ Hematocrit
Prolactin
Estradiol
HgbA1c
PSA

Low testosterone is

<300 ng/dL

and should be confirmed on a second test

Delivery	Name	Dose	Frequency	Application Site
Topical	Androgel (1.62%)	40.5mg packet	Daily	Shoulders, upper arms
	Andoderm patch	2 or 4mg/patch	Daily	Back, abdomen, upper arms or thighs
Intranasal	Natesto	11 mg	1 pump each nostril every 8 hours	Intranasal
Pills	Jatenzo	158–396 mg/day (divided)	Twice daily with food	Oral
Injections	Cypionate	100–200 mg	Every 1–2 weeks	IM (glute, thigh)
	Enanthate	75–150 mg	Weekly	IM (glute, thigh)
	AVEED	750 mg	Every 10 weeks	Deep IM (glute)
Pellets	Testopel	450–900 mg (6–12 pellets)	Every 3–6 months	Subcutaneous implant (hip area)

consider Clomid (SERM), HCG, or aromatase inhibitor



Memorial
UROLOGY



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Testosterone Replacement Therapy (2)

Testosterone will be rechecked 4-8 weeks after starting TRT

The goal for your testosterone level is:
450-600 ng/dL

Routine TRT Blood Tests

Total Testosterone (before gam)	every 6-12 months
LH/FSH	Optional
Hemoglobin/ Hematocrit	every 6-12 months
Prolactin	Optional
Estradiol	Patients on SERM or breast symptoms
HgbA1c	Optional
PSA	Per cancer screening guidelines

TRT Risks & Benefits

- ✓ Low T is a risk factor for cardiovascular disease
- ✓ Potential benefits of TRT include improvements in erectile function, libido, bone mineral density, and other symptoms
- ✓ There is a negative long-term impact of exogenous testosterone upon spermatogenesis and fertility
- ✓ There is no definitive evidence linking testosterone therapy to a higher incidence of venothrombotic events or prostate cancer
- ✓ Newer evidence indicates that testosterone replacement therapy is likely not associated with an increased risk of major cardiovascular events like heart attack or stroke
- ✓ There is a risk of polycythemia with TRT and thus your hematocrit will be routinely checked