

MALE TESTOSTERONE ACKNOWLEDGMENT INSERTION FORM

I have been told that hormone replacement therapy by pellet implantation has been used with great success in the United States, Europe and Australia since 1938. It is **not** experimental. Pellets deliver **consistent** physiologic levels of hormones and avoid the fluctuations of hormone levels seen with other methods of delivery.

I realize that this is not the usual and customary means of prescribing testosterone. I realize that the advantages of testosterone for men include: a) behavioral changes including decreasing depression, decreasing anxiety and irritability, increasing energy and motivation, stabilizing moods, allowing one to cope better, improving one's self-image and self-worth, and enhancing one's stamina; b) improvement in one's cognitive function so one is no longer operating "in a fog", improving short-term memory and allowing one to stay focused to complete a task; c) physical effects such as decreasing total body fat, increasing lean body mass, increasing muscle mass and increasing bone mass; and d) sexual benefits such as increasing libido, increasing early morning erections, increasing firmness and duration of erections.

I realize there are potential concerns with testosterone therapy and they include the possibility of enhancing a current prostate cancer to grow more rapidly. For this reason, a rectal exam and prostate specific antigen blood test is to be done before starting testosterone and will be conducted each year thereafter. If there is any question about possible prostate cancer, I consent to a follow up with an ultrasound of the prostate gland. I understand it is my responsibility to continue my annual exams with my primary care provider.

I realize in the past, athletes have abused testosterone. When they took huge quantities of synthetic testosterone, they may have incurred heart problems and elevated cholesterol. However, low-dose, non-oral, natural testosterone that is used in Bio-Identical hormonal therapy has not been associated with these problems.

The second concern we have with testosterone therapy is that it may increase one's hemoglobin and hematocrit, or thicken one's blood. This can be reversed through donating blood periodically. This problem can be diagnosed with a blood test. Thus, a complete count should be done at least annually.

The final major concern we would have, especially in younger men, is the administration of testosterone can suppress the development of sperm and the sperm count could dramatically reduce while a person is on testosterone therapy. However, to date, this appears to be in the majority of men a reversible process. Once the testosterone is discontinued, the sperm count is restored, usually within 3 to 6 months. This is extremely important in younger men taking testosterone therapy. In this early stage, we have encouraged them to produce samples and have them frozen, just in case there is any permanent long-term effect in their situation. We have encouraged any men who are concerned about their fertility in the future to have a semen analysis prior to initiation of testosterone therapy. Currently, testosterone administration is not to be used as a form of male contraception.

My signature certifies that I have read the above and acknowledge I have been encouraged to ask any questions regarding Bio-Identical hormonal therapy. Individual results MAY vary.

PATIENT SIGNATURE: _____ DATE: _____