

# Menopause & PMS

This leaflet has been written by staff working in the Menopause & PMS service at Chelsea and Westminster Hospital for clinics at Chelsea and Westminster Hospital and West Middlesex Hospital.

## Take home messages

- Testosterone is prescribed as part of hormone replacement therapy (HRT)
- Indications for replacement include low libido, low energy and tiredness
- Testosterone should be prescribed with HRT after a surgically induced menopause
- Not all women respond to testosterone replacement; other factors should then be investigated
- Excess testosterone replacement may cause acne, hirsutism, alopecia, voice changes
- Testosterone side-effects are dose dependent and minimised by reducing the dose
- Testosterone gel is used off-label in women
- Testosterone implants are available but are unlicensed

Total Testosterone:

SHBG:

FAI

Date:

Reference range for FAI 1-6

$FAI = (TT / SHBG) \times 100$

## Contact information

If you need to re-schedule your appointment please ring the appointments office on 020 3315 6666.

## Further advice and support

[www.the-bms.org](http://www.the-bms.org) (British Menopause Society)

[www.menopausematters.co.uk](http://www.menopausematters.co.uk)

[www.womens-health-concern.org/](http://www.womens-health-concern.org/)

## Patient Advice & Liaison Service (PALS)

If you require information, support or advice about our services, you can contact the PALS office on the Ground Floor of the hospital just behind the main reception. Alternatively, you can feedback your comments or suggestions on one of our comment cards, available at the PALS office, or on a feedback form on our website [www.chelwest.nhs.uk/pals](http://www.chelwest.nhs.uk/pals). We value your opinion and invite you to provide us with feedback.

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# Testosterone replacement for female androgen deficiency syndrome

## Information for patients



Chelsea and Westminster Hospital

NHS Foundation Trust

### **What does testosterone do in women?**

Testosterone is one member of a group of hormones called androgens. Although it is commonly thought of as a male hormone, testosterone is also very important in women. It has a role in sexual function, energy levels, cognition, bone health and vaginal health. Around 50% of testosterone is produced by the ovaries and 50% by the adrenal glands. Testosterone can act directly on tissues, but some of effects may be because it is converted into oestrogen, which occurs mainly in fatty tissue.

### **What is Female Androgen Deficiency syndrome (FAD)?**

In women, the production of testosterone declines from the mid-thirties onwards. A natural menopause is not associated with a sudden drop in testosterone, however, when ovaries are surgically removed (surgical menopause), a woman may experience rapid and significant androgen deficiency symptoms.

Lack of testosterone may result in low libido, lack of energy, increased tiredness, difficulty concentrating or headaches.

A diagnosis can be made on personal history alone. A blood test is generally not required but may be useful where there is diagnostic uncertainty.

### **What other effects does testosterone have after the menopause?**

After the menopause oestrogen levels fall to undetectable levels. Consequently, the small amount of remaining testosterone may also cause male type symptoms, especially increased facial hair growth and male pattern baldness. However, personal genetics have a significant influence upon this and not everyone experiences these effects.

### **Can my GP prescribe testosterone?**

We will supply your first month of testosterone.

- You must ask your GP to continue prescribing.

In some instances, your GP may be prohibited from prescribing. Only if requested by the GP, ongoing supply may be available from the hospital and will be provided

via the telephone clinic. If you have been discharged a new referral will be required.

### **Is testosterone replacement licensed in women?**

All previous licensed testosterone products for women have been removed from the market. This was for commercial not safety reasons. However, the safety data is still valid and off-label used of other licensed products are frequently used.

### **What is testosterone gel**

Testosterone gels are used to help improve sexual libido and energy levels. Three products are used:

- Testim Gel 50mg/5mls with a screw cap. The preferred product due to ease of use and storage.
- Testogel 50mg/5mls in foil sachet. Second line choice if Testim unavailable. It should be sealed and stored in the fridge once opened.

These two gels are used similarly. Each tube or sachet used sparingly over 7-14 days and applied variously to the thighs, lower abdominal/pubic area or wrists. The dose is titrated according to benefits and side effects.

- Tostran 2% in a metered canister. Third line choice as it is twice the strength of other gels and has increased risk of side effects. Usually used where other modalities have failed.

One metered dose twice weekly. Maximal dose is three times per week. The dose is titrated according to benefits and side effects. Applied as for testim gel above.

### **How do I use testosterone gel?**

- Apply to clean dry skin and allow to dry before getting dressed
- Do not allow skin contact with partners or children
- Wash hands immediately after applying to your body
- Do not wash the area for 2-3 hours after application
- Keep medication out of reach of children

### **Is blood test monitoring required?**

Blood tests for testosterone is not essential but can be useful. The test is not very sensitive in women and there is no consensus on the normal female range. The relief of

symptoms and lack of side-effects is a more sensitive assessment than blood tests monitoring.

Generally, GPs measure total testosterone but measuring the free testosterone or free androgen index (FAI), is a more useful assessment in women.

### **Will my libido improve?**

The loss of libido can be very distressing for some women. Other factors may also have a significant effect including psychological, emotional and other health problems. It may be useful to see a psychosexual counsellor who can give practical and emotional support.

### **What are the side-effects of testosterone?**

Side-effects are related to menopause status, use of hormone replacement and personal genetics. Therefore, testosterone is usually only prescribed to women who are already on some form of hormone replacement therapy.

Individual response to testosterone is widely variable. Side-effects are dose dependent and include:

- Hirsutism, increased facial or body hair (common)
- Alopecia, male pattern hair loss (less common)
- Acne and greasy skin (less common)
- Deepening of voice (rare)
- Enlarged clitoris (rare)

### **When should you not use testosterone gel?**

- If you are pregnant or breastfeeding
- If you have a history of hormone sensitive breast cancer
- If you are a competitive athlete and anabolic steroids are banned

### **Are there any alternatives to testosterone gel?**

Testosterone implants may be indicated for some women when other products have not provided benefit.