

GYNAECOLOGY UPDATE

Since 1997

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M Malak, A Grimston,
J Andrews, N Lawton,
A Spirou, W Fletcher

Integrated management of pelvic floor disorders: Prolapse, urinary incontinence (1ry & recurrent), frequency, urgency and recurrent cystitis

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Guidelines on the management of sexual problems in women: the role of androgens

A statement produced by:

British Society for Sexual Medicine

- The generalised use of testosterone by women has been advised against, because of inadequate indications and lack of long-term data. However, postmenopausal women who are distressed by their decreased sexual desire and who have no other identifiable cause (e.g. physical and psychosocial factors, medications, bilateral oophorectomy) may be candidates for testosterone therapy. Androgens may also be used by those women who are hypogonadal as a result of pituitary problems in the premenopause. However, women with a SHBG level above 160 nmol/l are unlikely to benefit from testosterone therapy.
- Although there is no consistent correlation between sexual functioning and levels of androgens (free and total testosterone, androstenedione, dihydroepiandrosterone and SHBG) across a wide age range, in some women testosterone therapy can improve sexual desire. In any one woman, changes in androgens may or may not be relevant to her sexual functioning.
- Transdermal patches and topical gels or creams are preferred over oral products because of first-pass hepatic effects documented with oral formulations.
- Monitoring should include subjective assessments of sexual response, desire, and satisfaction as well as evaluation for potential adverse effects.
- It is good practice to measure fasting lipid and glucose levels after six months of therapy, if clinically indicated (e.g. by diabetes or hyperlipidaemia). If these are abnormal, a decision should be made regarding to how to improve them. If lifestyle changes or lipid-lowering drugs are inadequate, it may be prudent to consider stopping testosterone therapy.

www.bssm.org.uk

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Website for Professionals MarkMalak.com

Website for Patients MrMalak.com