

MEN'S LIFE CYCLES

Andropause

What is Andropause?

During early and middle age, a man's hormone levels are typically what you would expect: unless there are underlying medical issues or significant



environmental health impacts, a man's hormone production is predictable and steady.

However, when age and other

environmental or lifestyle influences begin to affect a man's health, he may experience symptoms of Andropause at a much earlier stage of life. Andropause is the result of hormone changes that can begin as early as a man's thirties.

Unlike women, men do not have an obvious signal like the end of menstruation to indicate that their hormone levels have shifted.

Andropause symptoms typically emerge more subtly. Production of testosterone, DHEA, and progesterone begin to decline. Symptoms of men's hormone imbalance almost always include fatigue, apathy, low libido and sometimes erectile dysfunction. Other symptoms can include weight gain, lethargy or extreme fatigue, urinary problems, decreased physical agility, decreased mental acuity, apathy, and depression. Andropause is not a "new" condition — it was observed and described in medical literature in the 1940s. Awareness of andropause is now much more prevalent — and it is no longer taboo for men to discuss their own challenges with hormonal shifts. For example, TV commercials about "Low T" and erectile dysfunction have

brought men's hormonal challenges into mainstream understanding!

For younger men, infertility is often a first sign of testosterone deficiency: the sperm does not mature because the body is not producing enough testosterone. As a man ages, the symptoms and signs may evolve slowly, making them more difficult to detect. Too often, men in their forties or fifties will write off the physical, emotional, and mental symptoms of testosterone deficiency as "stress," or "no longer being a spring chicken." This is not only a serious loss for a man's quality of life, but if a testosterone deficiency remains undiagnosed, it can have other long-term and serious health effects. Low testosterone levels have been found to be more common in men with heart disease — and in one study, men with the most severe heart disease had the lowest testosterone levels. Conversely, a number of studies also reveal that higher testosterone or DHEA levels are associated with reduced risk of heart attack. There is further evidence that low testosterone levels are a risk factor for later development of metabolic syndrome and diabetes. So do not write it off as "just getting older"! Low testosterone is more than just "erectile problems"; a deficiency can seriously affect your long-term health.

What is "testosterone deficiency," or "Low T"?

During puberty and during a man's 20s, testosterone levels are at their lifetime peak. The decline of testosterone production, which typically begins in a man's thirties, is gradual—dropping 1 to 2 percent every year. (Granted, this is the natural curve; many men fall below the curve and have a more precipitous drop!) There are several changes happening simultaneously: First, there is a decline in the number of testosterone-producing (Leydig) cells in the testes, as well as decreasing activity of the enzymes that produce testosterone. There is also a diminished response to pituitary signals that normally initiate testosterone production, and

diminished coordination of the release of pituitary signals that are produced, decreasing any chance for the testes to continue a normal pattern of testosterone secretion. Finally, as with women, sex-hormone-binding globulin (SHBG) levels increase with age. These proteins cling to testosterone, so even though testosterone may be present, it is not “free,” or “biologically available” to do its work. Reduced testosterone, along with higher SHBG levels, act in tandem to depress “free,” or functional testosterone levels. Unlike the precipitous decline in progesterone levels that women experience in their thirties, the gradual decline in testosterone production in men may take years to have a noticeable impact on a man’s physical, mental, and emotional well-being; but it is happening behind the scenes.

Other factors that contribute to hormone imbalance:

A shift in hormones produced by the adrenal glands also begins in Andropause. DHEA levels that peaked in your twenties begin to slowly and steadily decline, dropping approximately 10 percent every decade. Some medical studies correlate the decline in DHEA production with many of the degenerative changes seen in women and men, such as heart disease, cancer, and osteoporosis.

How can I restore hormone balance during Andropause?

Dr. Randolph has created specific guidelines to help you determine your supplementation needs. Your individual treatment plan will depend on your age, symptoms, and hormone test results. All hormonal supplements are bioidentical formulations that duplicate the natural physiology of hormones in the body. Ingredients as listed are derived from natural and/or plant-based substances.

What can I expect?

The answer is simple: relief from unwanted symptoms! You should expect improved libido (sex drive); improved moods, memory and sleep; renewed strength and energy; the ability to lose weight more easily; and a belly that goes from fat to flatter. When or if symptoms persist, adrenal support (to manage stress), additional bioidentical hormone supplementation, and/or a compounded formulation may also be required.



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