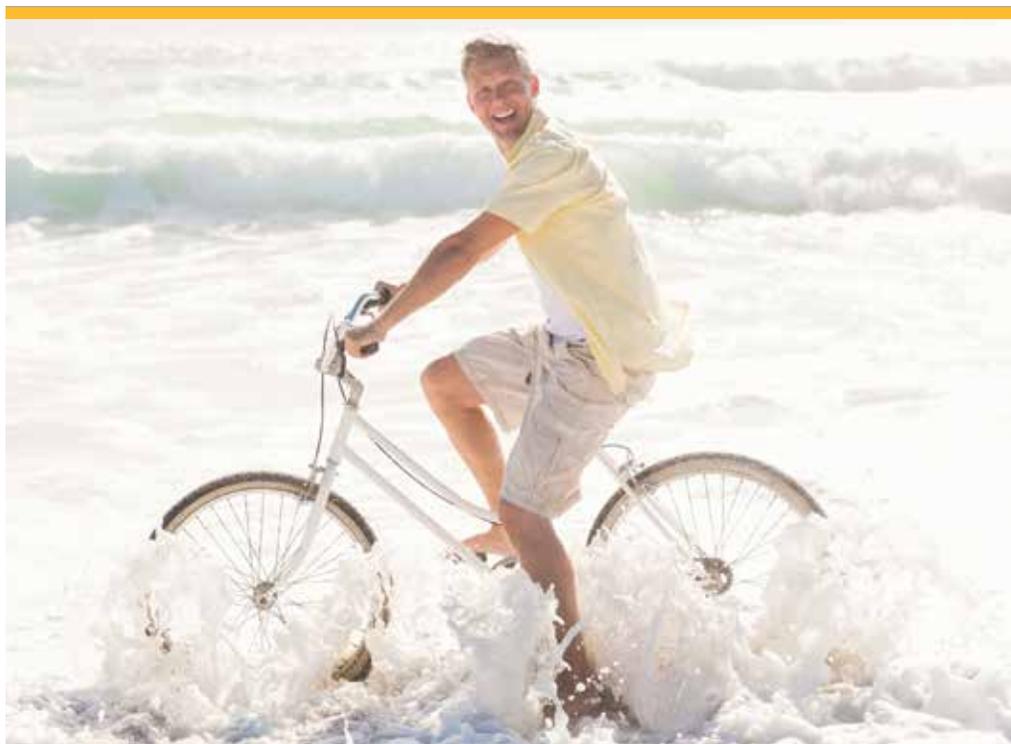


The Men's Clinic at UCLA offers low-testosterone diagnosis and treatment



The Men's Clinic at UCLA, located in Santa Monica, is the first specialty center at UCLA dedicated solely to the treatment of conditions impacting men's urologic health, male sexual health and male reproductive medicine.

A key service offered is evidence-based diagnosis and treatment of secondary hypogonadism (HG) or low testosterone (low-T).

Throughout the male lifespan, testosterone — the principal male sex hormone — plays a critical role in every major organ system. In secondary HG, hypothalamic-pituitary gland disrupters such as obesity, type 2 diabetes, hypertension and high cholesterol cause the testes to produce insufficient testosterone to maintain testosterone-dependent functions and systems. The incidence of hypogonadism among men with chronic pain and/or narcotic addiction is as high as 70 percent. Treating hypogonadism can often alleviate chronic pain and can also decrease narcotic use.

Distinguishing between low testosterone and normal aging

The amount of testosterone in men's bodies gradually drops with age. This natural decline starts after age 30 and continues at the rate of about 1 percent per year.

Individualized diagnosis and evaluation

"The pros and cons of testosterone treatment for hypogonadism must be weighed for each individual patient," says Jesse N. Mills, MD, associate professor of urology and director of The Men's Clinic at UCLA. "Increased diagnosis of low testosterone is driven by an aging population, less stigma and more awareness." However, the availability of testosterone replacement has resulted in the commercialization of low-T.

Medical ads ask, *Tired? Gaining weight? No sex drive?* Testosterone is offered as an easy fix. Many men jump on board and end up getting testosterone replacement therapy (TRT) without a proper diagnosis or evaluation to determine why or even if they have HG in the first place.

"There is such a thing as clinically low testosterone levels with no associated disease state, but more frequently secondary HG is linked with reversible conditions such as obesity and hypertension," explains Dr. Mills. "In addition to considering hormone therapy, men need to take charge of their own health and treat the underlying causes. The right HG treatment can be life-changing."

Testosterone levels and symptoms vary greatly from person to person, and it can be difficult to determine a clinical threshold for HG. Not all men with age-related low testosterone have — or are bothered by — symptoms. For approximately 5 million American men, a significant decline in their testosterone can produce symptoms ranging from low sex drive and memory problems to fatigue and depression. Untreated, low-T can lead to long-term problems that include osteoporosis and muscle atrophy.

In cases of low testosterone, HG must be distinguished from normal age-related testosterone decline. Testosterone replacement therapy (TRT) is indicated only when deficient testosterone is accompanied by signs of hypogonadism.

If symptoms and patient history suggest testosterone deficiency, a diagnosis is made through a pituitary assessment and testosterone total serum test with a low-limit value of less than 300 ng/dL, confirmed by multiple assays to account for day-to-day fluctuations.

Reversing low testosterone

Testosterone can be increased naturally or synthetically. Good nutrition, vigorous exercise and sufficient sleep are often enough to increase testosterone levels and reverse symptoms.

Testosterone replacement therapy is available in several forms.

- **Gel** — Up to 50 percent of testosterone-replacement patients prefer topical testosterone gel. *Advantages:* easy, effective and well tolerated
Disadvantages: expensive, daily application, can transfer testosterone to others
- **Intramuscular injections** — Weekly or bi-weekly thigh injections.
Advantages: effective, good blood levels, inexpensive *Disadvantages:* requires home-based injections or frequent office visits, red blood cell elevation; painful
- **Pellets** — A relatively new form of treatment in which pellets are implanted every four months, usually near the hip. *Advantages:* time-released, good insurance coverage *Disadvantages:* temporary insertion-site bruising and pain, pellets can move from the implant site

TRT enhances mood, sleep, libido, energy, bone density, overall health and quality-of-life. It can increase muscle growth and burn body fat. In a 2012 German study, 255 testosterone-deficient men with an average age of 61 sustained a weight loss of approximately 40 pounds over a five-year period when treated with the hormone.

HG symptoms improve within the first few weeks of testosterone replacement therapy. Optimal results are often achieved in three to six months. Once a good regimen has been established, blood work is monitored periodically to ensure adequate serum levels and guard against any side effects, although these are rare.

Optimizing men's health

The Men's Clinic team members include urologists and urologic surgeons who meet regularly to develop personalized plans of care for their patients. Clinic physicians can refer patients to UCLA specialists in related areas such as cardiology, endocrinology, sleep medicine and sports medicine as appropriate. UCLA Urology is ranked No. 3 in the nation by *US News & World Report*.

Participating Team Members

Jesse Mills, MD

Associate Clinical Professor of Urology
Director, The Men's Clinic at UCLA
Associate Director, Division of Andrology

Jacob Rajfer, MD

Professor of Urology
Director, Division of Andrology

David Yao, MD

Associate Physician Diplomate in Urology

Kellie Maes

Men's Health Program Manager

Contact Information

The Men's Clinic at UCLA
UCLA Medical Center, Santa Monica
1260 Fifteenth Street, Suite 1200
Santa Monica, CA 90404

(310) 794-7700 Appointments
and information

mensclinic.ucla.edu