

Wednesday, 03 December 2008

Andrology Unit, Department of Clinical Physiopathology, University of Florence, Florence, Italy.

jocorona@libero.it This email address is being protected from spam bots, you need Javascript enabled to view it

The relationship between hypogonadism and erectile dysfunction (ED) has not been completely clarified. Data derived from studies evaluating the effect of testosterone (T) replacement therapy (TRT) on patients with ED have yield mixed results. The purpose of the present study was to evaluate the efficacy and safety of a 50 mg/day of 1% hydroalcoholic testosterone gel applied on non-scrotal skin for hypogonadal men with sexual dysfunction.

We studied a consecutive series of 85 hypogonadal (total testosterone < 12 nmol/L) men (mean age 51.0 +/- 14.0 years) attending our Andrological Unit. Patients were interviewed using ANDROTEST structured interview, a 12-item tool previously validated for the screening of hypogonadism in patients with sexual dysfunction. Patients were also invited to complete erectile function domain of International Index of Erectile Function (IIEF-6;11). Different clinical and biochemical parameters were evaluated at baseline and after 6 months of TRT.

Subjects with ED at baseline (61.2%) showed significant increase of IIEF-6 score after 6 months of TRT (9.7 +/- 7.7 vs. 14.6 +/- 9.8, $p < 0.001$). Furthermore, subjects with more severe hypogonadism at baseline (T in the lowest quartile) showed the best increase in IIEF-6 score. All haematological and biochemical parameters tested remained in the normal range at the end of the study.

Our study demonstrated that 1% hydroalcoholic testosterone gel is an effective and safe treatment option in subjects with ED.

Written by:

Corona G, Petrone L, Fisher AD, Mansani R, Bandini E, Boddi V, Lotti F, Forti G, Maggi M.

Reference:

Arch Ital Urol Androl. 2008 Sep;80(3):103-8.