‘GRUMPY OLD MAN’ SYNDROME

Male menopause or andropause exists in some men, and research has suggested that loss of testosterone in the ageing male is an important contributor to health problems.

Some of the scientific literature calls it Late Onset Hypogonadism, but the implications are now being explained by research which shows increased health problems like increased abdominal fat, reduced muscle mass, osteoporosis, increased diabetes, metabolic syndrome, heart disease, higher mortality - all associated with reducing testosterone levels. And other conditions lead off from these, including Alzheimer’s disease, hypertension, gout, increased autoimmune diseases, Sleep apnea syndrome.

It’s called ‘Grumpy Old Man Syndrome’ because the symptoms include irritability, anger, loss of confidence, loss of vitality, depression, reduced mental effectiveness, and hot sweats in 30 per cent of those affected. It occurs in 20 per cent of men over 45 or 40 per cent of men over 70 years.

Here is a test used by doctors to detect Testosterone deficiency:

- Do you have a decrease in libido (sex drive)?
- Do you have a lack of energy?
- Do you have a decrease in strength and/or endurance?
- Have you lost height?
- Have you noticed a decreased "enjoyment of life"?
- Are you sad and/or grumpy?
- Are your erections less strong?
- Have you noticed a recent deterioration in your ability to play sports?
- Are you falling asleep after dinner?
- Has there been a recent deterioration in your work performance?

In addition to these questions, can you identify with any of the following symptoms?

A sense of being burned out, increased depression, increased irritability, increased anxiety, more nervousness, more joint complaints, increased sweating, a need for more sleep, more sleep disturbances, muscular weakness, physical exhaustion, impaired sexual potency, fewer morning erections, disturbed libido and decreased beard growth.

Women’s estrogen levels drop relatively suddenly when they go through menopause. But men’s testosterone levels drop gradually over a period of time so that by age 70, it’s half the normal levels of a younger man - for some, it’s worse, and they run into more of the health problems already mentioned.

So, the gradual drop in testosterone sneaks up, and the symptoms are not as obvious. It is very subtle and hardly noticed or complained about - that’s what you need to watch out for. What makes testosterone levels drop even more is abdominal fat, which makes estrogen - thereby neutralising the testosterone.

Stress, toxicity, a poor diet with too many bad fats, autoimmune diseases and some drugs can also lead to a drop in testosterone levels.
Why should an ageing male consider whether they may be testosterone deficient?

The heart has testosterone receptors - testosterone has been found to dilate coronary arteries, reverse atherosclerosis and help hypertension. Adequate testosterone reduces fat and builds up muscle and bone, etc.

Testosterone improves mood, cognitive function and prevents Alzheimer's disease, stroke, heart failure, and some abnormalities of cholesterol. Testosterone improves libido and erectile function (but not in everyone). It also - in both men and women - reduces inflammation and pain.

The diagnosis is made from the symptoms and problems the man has, along with a blood test. The doctor may need up to three blood tests to be sure because the results can vary.

When in doubt about the diagnosis, look at the person - do they have any symptoms or problems already?

Young men with high testosterone don't get prostate cancer but researchers are starting to say that testosterone doesn't actually cause prostate cancer. However, testosterone therapy mustn't be used in patients who have prostate or breast cancer.

What do you do now?

Your family doctor will discuss the possible diagnosis with you and may refer you to an endocrinologist. Testosterone is usually prescribed as an injection, but you can also get it as a patch or an implant that goes under the skin. Bioidentical testosterone is used as a cream - it's rubbed into the perineum (area behind the scrotum). For information about bioidentical hormones go to http://www.pharmaceutical.co.nz

Before you have any testosterone treatment, you need to have some tests and have a thorough examination. After starting treatment, you will be followed up periodically to ensure there are no problems. Testosterone therapy will become more commonplace as research makes more doctors aware that a community of grumpy, disabled, old men can be prevented.