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Title:

Testosterone administration to hypogonadal men for a period of up to 42 months improves features of the metabolic syndrome

Abstract: (Your abstract must use Normal style and must fit into the box. Do not enter author details)

Objectives: Elderly men often show a concurrence of a decline of testosterone with features of the metabolic syndrome.

Materials and methods: 122 men of a mean age of 59.5 ± 6.0 years, with baseline testosterone 5.9 – 12.1 nmol/L were treated with parenteral testosterone undecanoate for 42 months as the sole intervention.

Results: Plasma testosterone rose from 9.3 ± 1.7 to 18.7 ± 2.1 nmol/L reaching their maximum at 9 months and remaining stable over the next 33 months. Body weight and waist circumference declined progressively over the full study period. Plasma glucose, cholesterol, triglyceride, and LDL-cholesterol decreased significantly over the 24 month study period and then stabilized. Plasma HDL increased significantly over the first 24 months and then declined. There was a significant decrease of levels of aspartate aminotransferase (AST) and alanine aminotransferase (ALT) over the first 24 months, then values leveled off. At baseline 47/122 met the criteria of the metabolic syndrome (ATPIII criteris) after two years of testosterone treatment this number had declined to 11/122.

Conclusion: With testosterone treatment over 42 months, the most significant improvement of the metabolic syndrome was noted over the first 12 months with further improvement over the following 12 months. Body weight and waist circumference declined further but glucose and lipids and liver functions did not further improve but were stable with continued testosterone treatment.