

# CASE STUDY: Anti-Aging (Andropause)

## Indications/Presentation

- 44 year old Male
- Having a hard time losing weight
- Joint pain
- Decreased drive to succeed and no sex drive
- Used Wellbutrin and Effexor in past, lost weight but did not feel any better
- Falls asleep OK but can't stay asleep
- Meds: Lipitor
- DHEA 25mg didn't help
- PSA = 0.8 earlier this year

## Objective Findings:

Physical exam shown to be non-contributory

## Test Results

### Saliva Test

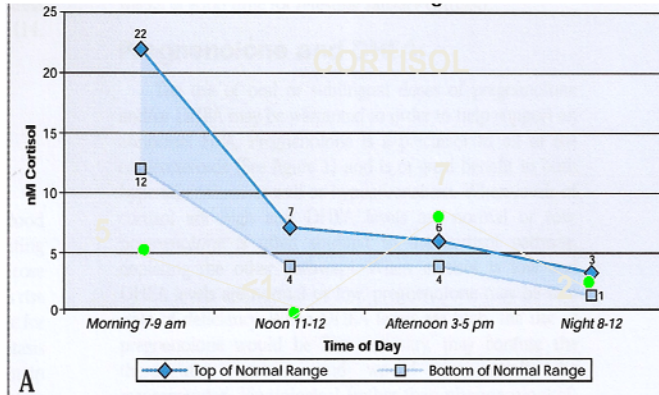
- Estradiol            6 pg/ml        (1-3)
- Progesterone       32 pg/ml       (5-95)
- Testosterone       12 pg/ml       (40-70)
- Androstendione 104 pg/ml       (151-350)
- DHT                    33 pg/ml       (52-123)
- DHEA    3 ng/ml    (3-10)

### Thyroid Panel

- TSH    2.18    (.35-5.5)
- FT4    1.1     (0.7-1.9)

■ FT3 2.7 (2.3-4.2)

■ TPO Neg.



### Diagnoses

- Andropause
- Adrenal Fatigue

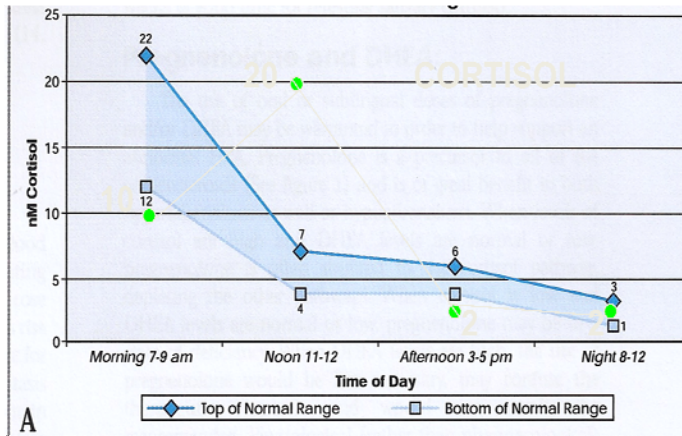
### Treatment

- Testosterone Cream (compounded) 20mg daily
- Hydrocortisone 5 mg p.o. at wakeup and 2.5 mg p.o. at noon
- DHEA 25mg daily
- Adrenal Support vitamin

### Follow-up 6 weeks later

#### Saliva Test

- Estradiol 6 pg/ml (1-3)
- Progesterone 41 pg/ml (5-95)
- Testosterone 73 pg/ml (40-70)
- Androstendione 226 pg/ml (151-350)
- DHT 69 pg/ml (52-123)
- DHEA 5 ng/ml (3-10)



## Results

- Feels younger, more energy
- Doesn't think about wanting a nap during the day
- Changes to therapy
  - Decrease Hydrocortisone to 2.5mg in morning and in afternoon.
  - Instructions on tapering Hydrocortisone in afternoon first over next 1-3 months.
  - Continue Testosterone as prescribed
  - Add flax seed meal to diet to help estrogen excretion