

Study refutes testosterone as 'fountain of youth'

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A new study of older Western Australian men has revealed that testosterone might not be the fountain of youth.

Published online this week in the *Journal of Clinical [Endocrinology and Metabolism](#)*, researchers from The University of Western Australia's Western Australian Centre for Health and Ageing set out to explore the association between [testosterone levels](#) and cause of death.

They confirmed earlier studies suggesting that men with low testosterone were more likely to die of cardiovascular disease.

But lead author and WA Centre for Health and Ageing researcher Zoë

Hyde said low testosterone levels were not linked to death from other diseases, which was surprising.

"Previous studies suggested that men with low testosterone levels are likely to die earlier, and some researchers have argued that testosterone therapy might improve longevity," Ms Hyde said.

"However, our results suggest that low testosterone is a risk factor only for cardiovascular disease, and do not provide support for more widespread use of testosterone."

Testosterone therapy is available in Australia only for men whose levels have been found to be low on testing and are experiencing symptoms of testosterone deficiency.

Ms Hyde said it was premature to recommend testosterone therapy to prevent [cardiovascular disease](#).

"Although our study suggests that preventing testosterone deficiency might have some health benefits, we need to first conduct clinical trials of [testosterone](#) therapy to see if these findings are real, and to also properly evaluate the risks of therapy," she said.

Ms Hyde said sex hormones played an important role in maintaining health and quality of life, particularly as their concentrations changed over time.

The research forms part of the Health In Men Study (HIMS) that has been following a group of men living in Perth, Western Australia since 1996 and is the largest study of ageing men in Australia. It involves community-dwelling men aged in their 70s and 80s but excludes men receiving hormonal therapy or men with prostate cancer.

Provided by University of Western Australia

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