

# Hysterectomized women may benefit from testosterone

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Hysterectomy and oophorectomy (the removal of ovaries) are performed to treat various diseases in women, including cancer. These procedures are accompanied not only by a decline in estrogen but also testosterone levels in the blood. Many women who have undergone surgical removal of their uterus and/or ovaries can develop symptoms of sexual dysfunction, fatigue, low mood and decreased muscle mass. New research from Brigham and Women's Hospital (BWH) has found that testosterone administration in women with low testosterone levels, whom previously had undergone hysterectomy with or without oophorectomy, was associated with improvements in sexual function, muscle mass and physical function. This research appears in the November 27, 2013 online issue of *Menopause*.

"Recently, there has been a lot of interest in [testosterone treatment](#) in postmenopausal women for sexual dysfunction and other various health conditions. However, no previous studies have evaluated the benefits and negative effects of [testosterone replacement](#) over a wide range of doses," explained Grace Huang, MD, a research physician in BWH's Department of Endocrinology and lead author on this study.

There has been emerging interest in supplemental hormonal treatment with testosterone for disrupted sexual functioning, loss of muscle mass, physical limitations and osteoporosis in postmenopausal women. In this study, researchers sought to determine the dose-dependent effects of testosterone on [sexual function](#), body composition, muscle performance and physical function in women with [low testosterone levels](#) who had undergone hysterectomy with or without oophorectomy. They studied 71 women over the course of 24 weeks. Participants were randomly assigned either to placebo or one of four testosterone doses given weekly. They found that the higher dose, 25mg, of testosterone tested in this trial after 24 weeks was associated with gains

in sexual function, [muscle mass](#) and measures of physical performance.

"A primary concern with testosterone therapy is that it can cause symptoms of masculinization among women. These symptoms include unwanted hair growth, acne and lower voice tone. It's important to note that very few of these side effects were seen in our study," explained Huang.

Currently the FDA has not approved [testosterone therapy](#) for women because of inadequate long-term safety data. The researchers note that longer term studies are needed to determine if testosterone can be given safely to women to improve important health outcomes without inducing other health risks such as heart disease and breast cancer.

Provided by Brigham and Women's Hospital

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