

Informed Consent for Testosterone or Dehydroepiandrosterone (DHEA) Therapy

It is important that you understand the potential risks of starting testosterone therapy along with the many benefits we have already discussed. There are many alternatives to testosterone or dehydroepiandrosterone (DHEA) replacement, such as the lifestyle changes that have been discussed with you.

The following is a list of some common side effects:

- Some patients can become more aggressive or have other subtle mental health changes while on testosterone or DHEA replacement.
- Small testicles or decreased sperm counts can occur.
- Bone marrow can be stimulated with testosterone or DHEA replacement, so blood cell counts must be monitored.
- Testosterone or DHEA can make the blood “thicker,” which can increase the risk of blood clots.
- If you have prostate cancer that has not yet been diagnosed, it can grow with the use of testosterone or DHEA replacement. Your doctor will need to monitor your PSA levels and perform rectal exams to check for prostate nodules every 6 months while on treatment.
- It is possible that testosterone or DHEA replacement can increase prostate size, leading to a condition called benign prostatic hypertrophy (BPH), which can make it hard to urinate.
- Testosterone or DHEA can irritate the liver in some people, so your doctor will need to order regular liver function tests.
- Some studies hint at increased risk of heart attack and stroke in men on testosterone or DHEA replacement, especially older men and men who already have cardiovascular diseases.
- Because testosterone can break down into estrogen, males and females who have breast cancer (or who are at high risk for breast cancer) should not use testosterone. Mammograms for women are recommended while using testosterone, DHEA, or estrogen.
- Testosterone replacement has been associated with changes in cholesterol, calcium levels, or kidney function; severe congestive heart failure; severe sleep apnea; swelling; or changes in libido (sex drive). It can cause acne, enlarged or tender breasts, or elevated blood pressure.
- Testosterone or DHEA cannot be used during pregnancy or while breast-feeding.
- Masculinizing signs, such as facial hair growth, have been seen in women and children exposed to testosterone or DHEA replacement.

I, (print name) _____, understand the indications, risks, benefits, and alternatives for using testosterone and/or DHEA therapy and agree to proceed.

Signature _____ Date _____