Department of Clinical Biochemistry: Information for Clinicians

Full guidance available at BSW formulary:
https://www.bswformulary.nhs.uk/chaptersSubDetails.asp?FormularySectionID=6&SubSectionRef=06.04.01.01&SubSectionID=E100#5808

BSW Pathway for using testosterone in women for low sexual desire

1. Specialist assessment and recommends treatment. Informed consent required for off-label use.

2. **Measure baseline:**
   - FAI (Testosterone and SHBG, FAI <2% supports testosterone use; do not prescribe if >6%*)
   - BP
   - BMI

3. **Review at 3 and 6 months**
   - FAI (reduce dose if FAI>6%*) (9% for RUH lab)
   - Stop if no clinical response
   - If good response and FAI 2-6%* (9% for RUH lab) continue
   - Agree monitoring schedule, target FAI, and how to obtain advice/support
   - Monitor for signs & symptoms of androgen excess (hirsutism, acne, alopecia, voice deepening)

4. **Review annually thereafter**
   - Topical testosterone should be stopped when ERT is stopped or if the specialist advises for it to stop.

Do not consider testosterone replacement for androgen deficiency, cognitive dysfunction, bone health, well-being or cardiovascular/metabolic benefits.

Contra-indications to Testosterone replacement:
- In cases of known or suspected breast carcinoma, known or suspected androgen-dependent neoplasia, nephrotic syndrome, history of thromboembolism or hypercalcaemia
- In cases of known hypersensitivity to the active substance or any of the excipients.
- Pregnancy & breastfeeding
- High total testosterone >2nmol/l OR High FAI >6%* (>9% for RUH lab)

Testosterone therapy for postmenopausal women, in doses that approximate physiological testosterone concentrations for pre-menopausal women, is not associated with serious adverse events (Level I, Grade A).

Caution

Cardiac/hepatic/renal insufficiency; Migraine; Epilepsy; Diabetes Mellitus; IHD; Polycythaemia; Elderly; HTN; Competitive athletes; may potentiate sleep apnoea in some patients, especially those with risk factors such as obesity or chronic lung disease.