

# Hormone Replacement Therapy Masculinizing Guide

The goal of masculinizing therapy for transgender people is to reduce the effects of estrogen on the body and induce virility, that is the development of masculine secondary sexual characteristics. This requires the introduction of testosterone into the system.

The effects from this treatment are both reversible and irreversible, and all medication and treatment should be consulted carefully with your physician to ensure a safe approach to your healthcare.

Please see the ensuing documents for information regarding medications, potential side effects, and more.

# Testosterone

Testosterone is a medication that works to create bodily changes associated with typically 'masculine' characteristics. Testosterone works to directly affect your body tissue in addition to suppressing the body's natural output of estrogen

The most commonly made available form of testosterone is in an injectable form, either intramuscular or subcutaneously. It is also made available in a transdermal patch, or as a gel/cream. Greater care should be taken with gels and/or creams to ensure it is kept away from those with whom contact might prove harmful, such as children and pregnant people.

## Possible side effects:

There are potential side effects of hormone replacement therapy that should be taken into consideration as well, including but not limited to:

- Metabolic effects and cardiovascular disease
- Hepatic dysfunction
- Polycythemia
- Obstructive sleep apnea
- Psychiatric effects
- Endometrial cancer

It is important to discuss these issues with your doctor before starting hormone replacement therapy to ensure the risks are noted ahead of time. While hormone replacement is more often than not a safe procedure, the potential risks warrant consideration ahead of time to ensure that any harm is mitigated.

In addition to health issues, there are physical side effects to be taken into consideration as well, such as increase or worsening of acne, alopecia, vaginal atrophy and more. It is recommended to do some family planning ahead of beginning treatment if this is of interest to the individual, as long-term effects of hormone replacement therapy have lasting effects on a patient's fertility and sexual function.

Physical Effect	Estimated Start	Estimated Max. Effect	Reversibility
Skin Oiliness/acne	1-6 months	1-2 years	Reversible
Body fat redistribution	3-6 months	1-5 years	Reversible
Increased muscle mass*	6-12 months	2-5 years	Reversible
Facial hair growth	3-6 months	1-5 years	Irreversible
Scalp hair loss	Variable	Variable	Irreversible
Cessation of menses	2-6 months	Variable	Reversible
Clitoral enlargement	3-6 months	1-2 years	Irreversible
Vaginal atrophy	3-6 months	1-2 years	Reversible
Deepened voice	3-12 months	1-2 years	Irreversible
Infertility	Variable	Variable	irreversible

These figures are meant to be taken as estimations and not hard and fast truths, and no two trans men are alike. Everyone reacts to hormone replacement therapy in a different way, and as such there can be no predictions made as to how effective any of these changes will be.

\*effects are based on amount of exercise

## Medications:

### Testosterone

Variety	Form
Testosterone enanthate	Injection
Testosterone cyponiate	Injection
Testosterone path	Transdermal patch
Testosterone Gel	Transdermal gel

# Hormone monitoring

Test	Baseline	1 month	3 months	6 months	12 months
CBC	X	X	X	X	X
ALT/AST	X	X	X	X	X
FASTING GLUCOSE		X			X
LDL/HDL/TG	X			X	X
TESTOSTERONE (+/- ESTRADIOL)	X	X	X	X	X
LH	X				
OTHER	HEP ABC Pregnancy test before 1 <sup>st</sup> injection				

These are the recommended baseline tests your doctor should undertake in order to ensure a maintained level of health throughout your treatment. In addition to blood work, work with your physician to monitor your physical changes as well. A full physical is encouraged at the baseline point and continue monitoring of body proportions, height, weight, EKG and cardio stress factors should be undertaken at the 3 month intervals as well as bloodwork analysis.

An endocrinologist with WPATH or trans related health care training is also recommended if at all possible to ensure hormone levels are maintaining at healthy levels.

Dosage of medication should be monitored and modified slowly over time.