

The Healthy Male

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Newsletter of Andrology Australia – Australian Centre of Excellence in Male Reproductive Health

Introducing the National Male Health Policy

The recent release of the first National Male Health Policy is a great step forward for men's health and is welcomed by Andrology Australia.

The policy's release brings focus to a range of men's health issues that for too long have been truly out of the spotlight.

One of the most important aspects of the policy is its consideration of the genetic, social, environmental and genetic factors as well as the biological factors that influence the health and well-being of Australian men. Only with such a holistic approach can progress be made in understanding the associations between a range of factors to identify opportunities for the improvement of men's health in Australia.

The policy's whole-of-life viewpoint also recognises the need to establish a longitudinal study to identify the determinants of male health across the lifespan, an initiative Andrology Australia has been pushing for since 2002.

The importance of a longitudinal study has been shown in other health areas. Both the 'Women's Health Australia: The Australian Longitudinal Study on Women's Health' study and the 'Growing Up in Australia: The Longitudinal Study of Australian Children' have provided important recommendations for future health policies as well as the re-evaluation of current ones as issues emerge across the study's span.

With a growing number of organisations promoting men's health in Australia, the policy provides a solid framework to achieve a more coordinated response to the issues in men's health.

For the policy to be truly effective organisations, service providers, governments and individuals need to work together to ensure it is implemented properly and to its full capacity.



From the Director

The release of the first Australian National Male Health Policy is a welcome and exciting addition to the proposed health reforms being announced by the government. Focusing on the needs of men through a defined and co-ordinated framework is expected to make important inroads to improve the health of all Australian men, particularly those from more disadvantaged communities.

However, on a much sadder note, I wish to advise of the sad and recent passing of a dear friend, Michael Schildberger, who died of prostate cancer on 2nd June. Michael was one of our first Board members and was an avid supporter of Andrology Australia throughout his 10 years with the program. Michael was a true gentleman and expert communicator who gave generously of his time and wisdom in a continued effort to raise awareness of men's health, and particularly prostate cancer.

This edition focuses on the area of Andrology as a field of medicine and the opportunity to improve men's health by incorporating the principles of Andrology into other specialities, such as urology and endocrinology, and extend the training into more general physician roles.

We also overview the recently released Australian Institute of Health and Welfare (AIHW) report entitled 'A snapshot of men's health in regional and remote Australia'. The report is an important and timely contribution to our understanding of men's health in Australia, and reinforces the urgent need for a policy framework to address a range of men's health issues.

Professor Rob McLachlan

Community education

Play ball with Merv to help raise awareness of men's health

After a successful inaugural Merv's Have a Crack Day event in 2009, Andrology Australia and Ambassador Merv Hughes are pleased to announce that registrations are now open for the 2010 Merv's Have a Crack Day.

The carnival-style afternoon of cricketing fun will take place on Friday, December 10 at the beautiful sports grounds of Trinity Grammar School in Bulleen, Victoria. Each team will once again boast a legend and the event will continue to raise awareness of Andrology Australia and raise funds to support the program's community education program, particularly the provision of resources for communities running local men's health events.

While Merv's Have A Crack Day will be more a battle of the 'Bashes' than the 'Ashes', it is a day of unrivalled cricketing enjoyment where

companies have the opportunity to merge Christmas celebrations (with clients and/or staff), while rubbing shoulders on the cricket field with an array of Aussie sporting legends. The celebrity participants in 2009 included Andrew Gaze, Steve Moneghetti, Ian Healy, Damien Fleming and Rodney Hogg amongst others.

So come on and join Andrology Australia Ambassador Merv Hughes, Patron Governor Professor David de Kretser AC and some of your cricketing/sporting heroes and let's put men's health firmly on the agenda of all males.



Andrology Australia Ambassador Merv Hughes and Patron Governor Professor David de Kretser AC talk tactics for the next innings.

For more information on the event please sign up to receive the event e-newsletter at www.mervshaveacrackday.com.au. Our website will provide further information on team registration, sponsorship and how you can donate to support men's health.

Professional education

Developing a consistent approach to the reporting of prostate and testicular cancer

The collection and reporting of cancer data at the time of diagnosis (incidence) and at death (mortality) is mandatory in Australia. These data are used for monitoring trends in incidence and survival outcomes, planning and evaluating services, and research. The data are important for policy development and to indicate service requirements.

With improvements in screening diagnostic technologies and treatment, survival rates for many cancers have increased. Many Australians now live with cancer for many years following diagnosis. This has implications for needs for ongoing support and care. However, there are currently little national data to monitor survivorship, or to assess effects of new treatments and technologies, which is important information needed for policy and planning.

The Australian Government has recognised this need, and through Cancer Australia¹ and the Australian Institute of Health and Welfare² has provided funding to reduce the health, social and economic inequalities of cancer through better coordination and timely access to national data.

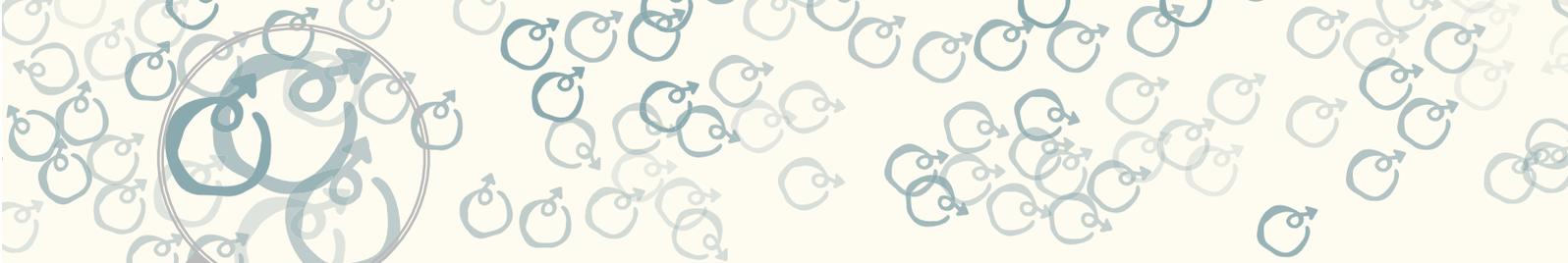
Cancer Australia has recently partnered with Andrology Australia to develop Data Set Specifications (DSS) for prostate cancer and testicular cancer. The intention is to achieve more co-ordination and consistency in data collection across Australia to support service delivery and research. The availability of these data will provide more accurate and complete information on national trends for these cancers, associated health service utilisation and health outcomes.

The data are expected to contribute to better policy development and evaluation of cancer control.

To inform the development of a data set specification for both prostate cancer and testicular cancer, discrete working groups have been established by Andrology Australia and Cancer Australia.

These working groups will determine the specialist data set specification for prostate cancer and testicular cancer, in consultation with clinicians and other stakeholders.

- 1 The national agency established to work to reduce the impact of cancer on all Australians
- 2 The national agency established to provide information on Australia's health and welfare, through statistics and data development that informs discussion and decisions on policy and services.



Focus on: **Andrology: Challenges in medicine**

Authors: **Professor David Handelsman and Professor Rob McLachlan**

What is Andrology?

Andrology (pronounced an-drol'-uh-jee) is the study of male reproductive health, associated medicines and biology; including the functions and diseases specific to men, especially of the reproductive organs. The term andrology is an old term, envisaged as the male counterpart to the study of female reproductive health by gynaecology. Recognition of andrology as an area of study has grown over the past forty years, and awareness of this medical term continues to increase, but is still far less well known or prevalent as a medical discipline.

What does Andrology cover?

The core knowledge, expertise and skills involved in andrology include androgen physiology, pharmacology and pathology, male fertility, sexual function, and reproductive system development and disease.

However, Andrology naturally extends into and has emerging links with men's health in a more general sense including disorders with an excess male burden such as cardiovascular disease, diabetes, gastrointestinal cancers and respiratory disease.

What kinds of doctors practice Andrology?

Unlike in Europe, there is no recognised medical specialty of Andrology in Australia. However, health professionals such as endocrinologists, urologists, gynaecologists, oncologists, general physicians and GPs can develop special expertise and skills in the area of andrology. More recently practice nurses and nurse practitioners are also becoming increasingly involved in men's health, and interested in the area of andrology.

What are the specific focus areas of andrology?

- **fertility**
 - > male infertility
 - > male contraception
- **androgen-dependent development and diseases**
 - > sexual differentiation, development (puberty), ageing
 - > prostate diseases (prostate cancer, prostate enlargement and prostatitis)
 - > Testicular cancer
 - > Cardiovascular diseases and cancers
- **Sexuality**
 - > Gender role and identity
 - > Sexual function and dysfunction (including erectile dysfunction)

Is Andrology a medical specialty?

Andrology is not recognised as a medical specialty nor does it have a guild.

Originating in medieval times, guilds were formed by craftsmen engaged in the same occupation. It was out of these guilds that medical specialties such as surgery arose.

There are currently 12 medical guilds or colleges in Australia – the first being the Royal Australasian College of Surgeons established in 1927. Others include the Royal Australasian College of Physicians (1938), Royal Australian College of General Practitioners (1958) and the Royal Australian and New Zealand College of Obstetricians and Gynaecologists (1978).

Although it's not a medical specialty and has no guild, the discipline of Andrology as a medical field crosses over and includes parts of other medical specialties like urology, endocrinology and oncology.

So where does Andrology fit?

The challenge for Andrology is not to become a specialty medical area of its own or to establish its own guild. Rather, it is to increase the skills and knowledge base of health professionals working in men's health, and to raise awareness of the importance of andrology amongst the public.

Not only is an Andrology knowledge-base the key to understanding male reproductive health and well-being, it provides a crucial focus on men's general health also offering windows of opportunity for early detection of more serious chronic men's health diseases. For example, erectile dysfunction can be an early warning sign for cardiovascular disease.

What is the history of Andrology as a unique medical discipline?

The first noted book on Andrology was *Male Diseases in General Practice: An Introduction to Andrology* by Edred M Corner, published by the Oxford University Press in 1910.

The German periodical *Andrologie* (now called *Andrologia*), published from 1969 onwards was the first specialist journal on the subject of Andrology. There are now five international andrology journals; however the best papers still appear in top general or specialist (endocrinology, urology, pathology) journals.

The first International Committee of Andrology was founded in 1970, later to become the International Society of Andrology (ISA) in 1981.

Now there are two comprehensive textbooks on the field of Andrology: *Andrology: Male Reproductive Health and Dysfunction* by Eberhard Nieschlag, Hermann M. Behre, and Susan Nieschlag, and *Andrology for the Clinician* by Wolf-Bernhard Schill, Frank H. Comhaire, and Timothy B. Hargreave.

A search of Amazon (the online bookshop) reveals 63 books listed with Andrology in the title.



cal education

What is the status of andrology internationally?

There are four major international societies of andrology that operate in an international and world-wide context.

The **American Society of Andrology (ASA)** is a unique partnership of scientists and clinicians. Founded in 1975, the society has over 775 members from all over the world whose specialty fields include male reproduction, endocrinology, urology, anatomy, gynaecology/obstetrics, biochemistry, animal science, molecular and cell biology, and reproductive technologies.

The society, which fosters a multi-disciplinary approach to the study of male reproduction, exists to promote scientific interchange and knowledge of the male reproductive system. The *Journal of Andrology*, the official Journal of the American Society of Andrology, publishes significant new findings of basic and clinical research on human and animal male reproductive tracts.

www.andrologysociety.com/

The **International Society of Andrology (ISA)** was founded in 1981 and now brings together around 40 national and regional member societies, representing 10,000 andrologists world-wide. The positions of president and secretary have been held by an Australian during this time. ISA aims to disseminate knowledge of andrology, and to promote basic and clinical research in andrology. These objectives are achieved through organisation of the International Congress of Andrology (the next being in Melbourne in 2013), support of regional meetings, and involvement of ISA member societies in compiling international consensus recommendations regarding important aspects of andrology. The ISA aims for world-wide collaborations in the area of andrology.

www.andrology.org/

The **European Academy of Andrology (EAA)** is an association of scientists and clinicians active or interested in the field of andrology. Founded in May 1992, the EAA is a non-profit making organisation which aims to promote research into and raise public awareness of male reproductive health. The EAA has a worldwide scope in terms of membership, research and influence but retains a clear focus upon Europe – based in Münster, Germany and with andrology training centres across Europe.

Specifically the EAA aims to raise scientific standards of andrology in Europe, provide specialist training for physicians in andrology, increase public awareness of andrological issues, and encourage research and publishing academic papers. The EAA has 120 members and publishes the *International Journal of Andrology*.

www.andrologyacademy.net/

The **Asian Society of Andrology (ASA)** was also established in 1992 and is an association of scientists and clinicians active or interested in andrology. The scope of the society is worldwide, with a clear emphasis on Asia. The objectives of the ASA are to advance and promote the knowledge of the male reproductive system and andrology in general by coordinating and organising conferences and courses, by fostering interdisciplinary communication and collaboration and by publication of studies of merit. The *Asian Journal of Andrology (AJA)* is the official journal of the Asian Society of Andrology and is published in English.

<http://www.asiaandro.com>

What is the status of andrology in Australia?

Although andrology is not a recognised specialty in Australia, Australian's have made significant contributions to the development of andrology in both a national and international context.

Australia was among the first country's to have a Professor of Andrology appointed, and the first hospital Andrology department established. Many Australian specialists, predominantly endocrinologists and urologists, are active members of the international societies mentioned, contributing to research and knowledge sharing, publishing in the international journals, and presenting both nationally and internationally.

The establishment of Andrology Australia in 2000 was a 'world first' for that type of organisation.

Andrology Australia was established as the Australian Centre of Excellence in Male Reproductive Health to enhance men's health and well-being by addressing disorders of the male reproductive system and associated conditions. A unique 'centre without walls', the program operates nationally to bring together such expertise from across Australia to inform program activities and evidence-based resources development.

Funded by the Australian Government Department of Health and Ageing, the program raises awareness of men's health through collaborative programs of community and professional education and support of research. The program priority areas include prostate disease (including prostate cancer), testicular cancer, male infertility, use and abuse of androgens, and sexual dysfunction (including erectile dysfunction).

www.andrologyaustralia.org



In memoriam

In memoriam for Mr. Michael Schildberger

With great regret we note the recent passing of Michael Schildberger, a member of the Andrology Australia Board and men's health campaigner, who died of prostate cancer on 2nd June, 2010.

Michael was one of the first Board members appointed and was an avid supporter of Andrology Australia through his ten year term on the Board. In this time, he made invaluable contributions which have helped to guide and ensure the success of the Andrology Australia program, now and into the future.

A well-known business and media personality and prostate cancer advocate, Michael always gave his time and experience generously as he continued to raise awareness of men's health, and in particular prostate cancer. It is with great sadness that we have lost Michael to the disease that he fought so hard to let other men know about.

Michael had a long career in media and was the Executive Chairman of the media production company Business Essentials Pty Ltd.

Our thoughts are with his family, Tim, Kate, Nick and Amy, and stepdaughter, Randi.



In brief

Farewell to Andrology Australia Project Officer, Dr Megan Cock



CEO Dr Carol Holden, Director Professor Rob McLachlan, and Dr Megan Cock

After five years with the program Dr Megan Cock resigned from her position as Project Officer in 2010, to capitalise on a unique opportunity to work and live in Arnhem land in the Northern Territory. Megan has been an integral part of the development of the professional education component of the program and coordinated Andrology Australia's working groups and relevant research projects. We are sad for Megan's departure, but wish her the best for her journey ahead.

Research round-up

Lifestyle and male reproductive health disorders – latest findings from the Men in Australia Telephone Survey (MATEs)

There is increasing evidence that male reproductive health disorders, such as erectile dysfunction (ED) and lower urinary tract symptoms (LUTS), are linked to general health conditions and share some common risk factors.

In 2003, Andrology Australia conducted a large population-based telephone survey of Australian men aged 40 years or older 'the MATEs study' that has provided valuable information about many aspects of men's health. The study is unique in that it provides the opportunity to look at a range of reproductive health disorders (ED, LUTS, prostate disease), perceived symptoms of androgen deficiency (pAD) and the links with general health and lifestyle factors within one large sample population representative of middle-aged and older Australian males.

An article recently published from the MATEs study¹ showed that a range of lifestyle factors, more often associated with chronic diseases like heart disease or diabetes, were linked with reproductive health disorders. Low physical activity and being very underweight were linked to ED and pAD. Diabetes and cardiovascular disease were linked to ED and hypertension (high blood pressure) was also strongly linked to LUTS and pAD.

Importantly depression, measured either by symptoms reported by men in the survey or by use of anti-depressive medication, was strongly associated with all four reproductive health disorders investigated. Other studies have shown links between ED and depression but this is the first time links have been shown with other male reproductive

health disorders within the same population. This finding highlights the effects of reproductive health disorders on men's quality of life, and highlights the need for psychological well-being to be considered by health professionals when managing men with reproductive health problems.

The overlap between reproductive health and general health identified in this study adds more evidence to the notion that reproductive health should not be considered separately from general health in middle-aged and older men. Health programs that aim to improve general health through modifying lifestyle are likely to also have benefits for reproductive health.

¹ Holden CA, McLachlan RI, Pitts M, et al. Determinants of male reproductive health disorders: the Men in Australia Telephone Survey (MATEs). BMC Public Health 2010;10:96

Recent events



Forum speakers Dr Noel Richardson, Director Professor Rob McLachlan, Hon. Warren Snowdon MP, and Patron Governor Professor David de Kretser AC

Tackling the inequities of men's health – Andrology Australia Forum 2010

Approximately 70 Andrology Australia associates, key stakeholders, policy makers and health professionals gathered in Bondi NSW in early June 2010, to initiate discussion regarding the issues and possible solutions to the health disparities that exist between different groups of men in Australia; as identified in the National Male Health Policy.

The fourth annual Andrology Australia forum, sponsored principally by the Australian Government Department of Health and Ageing, was officially opened by special guest, the Minister for Indigenous Health, Rural and Regional Service Delivery, Hon. Warren Snowdon MP, who shared his thoughts on how the policy framework aimed to address some of these disparities in men's health. Plenary speaker and international guest Dr Noel Richardson (Ireland), principal author of the first ever national policy in men's health (published in Ireland in January 2009), followed sharing his unique experience and key lessons learned, that may be of benefit for the implementation of the proposed Australian policy actions.

Attendees were educated on topical areas where inequities in men's health exist, including Indigenous men, gay men, men from Culturally and Linguistically Diverse (CALD) communities and men living in rural and regional areas, and both workforce capacity and empirical research. Networking opportunities with others in the men's health sector were also a key feature of the meeting to further progress the issues raised during the forum discussions.

Andrology Australia would like to thank the conference organisers (ASN Events), the sponsors (The Australian Government Department of Health and Ageing, and the Prostate Cancer Foundation of Australia) and the speakers for their involvement and support.

Latest news

Addressing the poorer health of rural Australian men

In developing the first National Men's Health Policy, the Australian Government has identified the need for targeted policy development for several priority groups of Australian men suffering poorer health. A recent Australian Institute of Health and Welfare report¹ confirms the need for rural males to be included as a priority group. About 3.1 million men lived outside major cities in 2006.

The report, 'A snapshot of men's health in regional and remote Australia', highlights that rural men (including Aboriginal and Torres Strait Islander males) are more likely to experience chronic conditions and health risk factors compared to those in major cities. This is due to several factors including poorer social and economic status, limited access to health services, and lower health literacy (to enable them to interact effectively with health services).

Compared to major cities, death rates for men during 2004 to 2006, increased with remoteness from eight per cent higher in 'inner regional' areas up to 80 per cent higher in 'very remote' areas. Death rates from cardiovascular disease and diabetes, in particular, increased with remoteness, accounting for nearly a third of the elevated male death rates outside 'major cities'. Male death rates from diabetes were 1.3 times as high in 'inner regional' areas and 3.7 times as high in 'very remote' areas as compared with 'major cities'.

The report highlights the need for greater workforce capacity, appropriate and accessible health services and programs, and strengthened community networks to meet the needs of all Australian men, regardless of geographical location, socioeconomic status and literacy level. It is hoped that the implementation of the first National Male Health Policy will directly address some of the issues identified in the report for a more coordinated and multidisciplinary primary care system, addressing both primary prevention and disease management throughout Australia.

1 Australian Institute of Health and Welfare 2010. A snapshot of men's health in regional and remote Australia. Rural health series no. 11. Cat. No. PHE 120. Canberra: AIHW.

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