

The Healthy Male

Issue 36 – Spring 2010

Andrology Australia is supported by a grant from The Australian Government Department of Health and Ageing.

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

Buyer beware: Seek medical advice before buying erectile treatments online

The potential dangers of buying drugs for erectile dysfunction over the internet or from other unregulated markets were brought into sharp focus by a report of severe hypoglycaemia (very low blood sugar level) from the use of counterfeit medicines or herbal remedies for erectile dysfunction in 150 men in Singapore.¹ Now, the first report of an Australian man with severe hypoglycaemia associated with taking a "sexual performance-enhancing" medicine has been published.²

The Australian man was treated in hospital for hypoglycaemia and discharged without a clear diagnosis. In later clinic visits he mentioned taking a "sexual performance-enhancing" medicine, bought in Vietnam, one hour before his symptoms started. The Therapeutic Goods Administration (TGA) analysed the medicine and found a potentially lethal dose of a drug normally used to treat diabetes by lowering blood sugar levels, as well as a very low (non-therapeutic) dose of a drug used for erectile dysfunction that was not listed on the label.

The World Health Organization³ reports that up to one per cent of medicines in industrialised countries may be counterfeit, but this figure is much higher in developing countries with less regulation. As medicines for "sexual

performance enhancement" have a huge market around the world, there is potential for any unsuspecting man to purchase counterfeit medicine if buying overseas or from the internet. As the class of medicines used to treat erectile dysfunction (PDE-5 inhibitors) are not on the Australian government list of "prohibited imports and exports (drugs and precursor chemicals)" and can therefore be bought on the internet with an Australian prescription, the authors of the recent Australian article call for health warnings to be placed on the TGA website and for universal regulation of the sale of drugs on the internet.⁴

This case also highlights the importance of proper medical assessment of men with erectile dysfunction and the role of health professionals in helping men to identify safe sources of medicines.

- 1 Kao SL et al. An unusual outbreak of hypoglycaemia. *NEJM* 2009; 360: 734-736.
- 2 Chaubey SK et al. Severe hypoglycaemia associated with ingesting counterfeit medication. *MJA* 2010; 192: 716-717.
- 3 World Health Organization. Medicines: counterfeit medicines. Fact sheet N°275, January 2010. See: <http://www.who.int/mediacentre/factsheets/fs275/en/>
- 4 Chaubey SK et al. Severe hypoglycaemia associated with ingesting counterfeit medication. *MJA* 2010; 192: 716-717.



From the Director

Andrology Australia recently convened the Tackling the Inequities in Men's Health Forum, an overview of research, policy and practice to address the disparities that exist between different groups of men, in response to the recently launched National Male Health Policy.

The forum was well attended by participants from professional, academic, government, education and public health backgrounds, including the Minister for Indigenous Health, Rural and Regional Health, the Hon Warren Snowdon MP, who gave the first plenary speech. The forum provided a unique experience for health professionals and service providers to hear about topics highlighting the continued disparities among different subgroups of men, with the intent that the information could advance their own work in men's health.

A significant highlight for delegates were the sessions and discussions addressing Indigenous men's health, in particular the GP workshop on engaging Aboriginal and Torres Strait Islander males in health – facilitated by Dr Mark Wenitong (Apunipima Cape York Health Council, Queensland).

On a different theme, A/Professor Doug Lording (Andrology Australia and Cabrini Health) highlighted emerging areas that required better policy, such as purchasing medicines from the internet or other unregulated markets. His talk reflected on the recently published reports (as described above) of men with severe hypoglycaemia following use of "sexual performance-enhancing" medicines.

A/Professor Lording's talk and his Focus On article in this edition of The Healthy Male make it clear that improved health literacy and promotion, as well as legal and legislative approaches, are needed for policy and service provision. This would facilitate a better response to areas where men are more vulnerable to predatory practices that bypass the health system, and may not be explicitly addressed in the current National Male Health Policy.

Professor Rob McLachlan

Community education

Check the Manual to make sure things are on track



Whether it's cars or gadgets, even the most mechanically-minded of us sometimes need to refer to "the manual" to make sure things are running well.

The Andrology Australia Men's Health Manual is a great reference to help men recognise when their overall health is a matter of concern.

The Manual aims to get men thinking about factors which can greatly influence their overall wellbeing both physically and mentally. Even if there's nothing wrong, being aware of possible issues goes a long way to help when things get off track.

The Men's Health Manual contains a selection of information for men covering reproductive and general health. It offers a great starting point for men wanting to know more about how they can improve their health for themselves and their family.

The pack contains the Men's Health Tool Kit, a resource developed by Foundation 49.

This excellent booklet touches on a number of health issues men need to think about – healthy eating, talking to the doctor, getting regular exercise, as well as health tips for every decade of a man's life.

For men who want to find out more specific information, the pack contains a range of other resources and order forms, including the popular Men's Health Contact List. This wallet-sized fold out list contains the contact details of a wide range of services in the area of men's health.

The Men's Health Manual is now available free of charge to order through the Andrology Australia website www.andrologyaustralia.org or by calling us on 1300 303 878.

Professional education

More active learning online

Andrology Australia will soon launch a new active learning module (ALM) for health professionals focusing on older men in preparation for the 2011-2013 triennium.

As Australia's population ages, it is vital for our health professionals to be able to effectively treat conditions that occur later in life.

The older men's health ALM covers the diagnosis, treatment and management of conditions that are more common in older men – erectile dysfunction, androgen deficiency and benign prostate hyperplasia (BPH) and their co-morbidities. One in three men over the age of 40 is affected by a reproductive health disorder.¹

Each of the three case studies puts learners in the position of a GP and plays out as a series of consultations exploring possible diagnoses and treatment options. The case studies include links to comprehensive resources as well as video

commentary by experts in different areas of men's health, who offer their insights on various aspects of treating older men.

The ALM aims to not only help health professionals effectively treat and manage these conditions, but also focuses on engaging patients who might be reluctant to talk about their health concerns, even with a trusted professional.

Andrology Australia is approved as an Accredited Provider of professional learning by the Royal Australian College of General Practitioners (RACGP).

GPs choosing to complete the entire ALM will receive 40 Category 1 RACGP QA&CPD points. GPs completing individual case studies will be awarded two Category 2 QA&CPD points.

The older men's health ALM will be the first learning activity on Andrology Australia's new in-house online learning system.



This new system, which will be part of the Andrology Australia website, has been customised to suit the needs of our professional learners. It offers a straightforward way to complete learning activities in their own time. As learning providers, the new system enables Andrology Australia to deliver effective learning activities and be able to easily update them as things change.

The new learning system and the older men's health ALM will be launched in October. Keep an eye on the Andrology Australia website for more details.

¹ Holden CA, McLachlan RI, Pitts M, Cumming R, Wittert G, Agius P, Handelsman DJ and de Kretser DM. Men in Australia, Telephone Survey (MATEs) I: A National Survey of the Reproductive Health And Concerns Of Middle Aged and Older Australian Men. *Lancet* 2005; 366: 218-24.



Focus on: Unsafe consumer practices for

Authors*: A/Professor Doug Lording (Andrology Australia and Cabrini Health)

What are potentially unsafe consumer practices in healthcare?

The traditional path to seeking treatments for health conditions is through a consultation with a health professional for a full assessment with a view to making a diagnosis, with treatments prescribed as needed. Although this is still the path taken by most people, there are now many other options, some of which pose risks to the unsuspecting patient. Men with erectile dysfunction (ED) and other sexual problems have been targeted by various unscrupulous practices as they tend to be particularly vulnerable.

Sexual medicine is an area of significant focus for companies selling and promoting products and services through the internet, and for clinics that exist outside the mainstream health system using emotive and alluring advertising. As sexual health is an area where people can feel vulnerable, they may be attracted to the anonymity provided by these pathways for obtaining treatment. They can avoid the embarrassment of speaking to health professionals about sexual problems and in some cases, avoid scrutiny if they want to use treatments when they do not have a specific diagnosis. The internet also offers cheaper medicines and can be very convenient. These practices expose men to two issues – inadequate medical assessment, and exposure to inappropriate, inactive or potentially harmful medicines.

What is the impact of bypassing health professionals?

When men bypass health professionals to obtain sexual health treatments there can be serious health implications. For instance, it has been well known for many years that ED often co-exists with other health conditions such as diabetes, cholesterol problems, hypertension or depression.¹ Several studies have also shown that men with ED are at higher risk of developing cardiovascular disease in the future, compared to men without ED. One study showed that about 11 per cent of men aged 55 years or older experienced a cardiovascular event (e.g. heart attack or stroke) within five years of developing ED.² This is the same as the risk of cardiovascular disease from having a family history of heart disease or smoking. Other more recent studies, including one from Australia with a broad age-range, have supported these findings and also showed that the risk of cardiovascular disease associated with ED (relative to that for men without ED) is greater in younger men than older, even men in their 20s or 30s.³

For men with ED who bypass a consultation with a health professional, the opportunity to have an overall health assessment to identify the presence of other co-existing conditions that may not be showing obvious symptoms, or to discuss their risk of developing cardiovascular disease, is missed. ED can also be associated with relationship or emotional/psychological issues and with significant depression. These important conditions will not be identified or addressed without a proper face to face assessment.

How many men are buying drugs on the internet?

We have all received emails advertising cheap drugs for erection problems. It is difficult to be sure how many men purchase their

medicines in response to such advertising. One recent internet-based survey of men in UK, Italy and Germany found that of 11,889 men who responded, 10.5 per cent had used PDE5 inhibitors (the main class of medicines for ED) in the past 12 months and about one third of those men had bypassed the healthcare system – with about half using the internet to do this. This study confirmed the main reasons for bypassing the healthcare system related to avoiding the embarrassment of speaking to a health professional and/or the perception that the drugs were cheaper.⁴ Anecdotally, it appears these factors also influence Australian men using the internet to access ED medications.

There are some legitimate cut-price Australian pharmacies that require a prescription and may offer a good deal for men. However, overseas-based pharmacies, many with sophisticated websites, are often unreliable. Some do sell legitimate medicines, but more and more there is evidence of significant drug counterfeiting.

Counterfeit medications: are they a big problem?

Counterfeit medication is defined as “products deliberately and fraudulently produced and/or mislabelled with respect to identity and/or source to make it appear to be a genuine product”⁵ Drugs of all kinds are subject to counterfeiting (see Pie Chart) but drugs for ED (part of the genito-urinary category) make up a significant proportion.

It is estimated that half a million counterfeit tablets are sold per month in the USA and nearly half (44 per cent) of these are internet purchases.

In Europe, between 2004 and 2008, 35.8 million tablets were seized by authorities. A Dutch study⁶ of seized “Viagra” tablets (Viagra™ contains sildenafil, a PDE5 inhibitor) showed that only 10 of 370 tablets contained the active ingredient, sildenafil. Some contained substances related to sildenafil but with unknown effects and others contained totally unrelated substances. An analysis of confiscated “Viagra” by Pfizer⁷ showed only one in 10 had within 10 per cent of the stated amount of sildenafil (100 mg tablets had between 0 and 200 mg) and some tablets contained talcum powder, commercial paint or printer ink.

What can happen if men take counterfeit medicines?

Depending on the ingredients used in counterfeit medicines, effects can range from no effect to death. There have been two published reports from Asia documenting severe hypoglycaemia (low blood sugar that can lead to coma and even death if not treated) associated with taking counterfeit medicines for ED or herbal remedies promoted as enhancing sexual performance.

“We have all received emails advertising cheap drugs for erection problems”

men with sexual problems

In Singapore⁸ there were 150 admissions to hospitals resulting in four deaths, and in Hong Kong⁹ 144 patients were reported, with three deaths and one man severely disabled. Analysis of some of the medicines taken showed that the "medicines" contained substances used to treat high blood sugar in people with diabetes, in doses that were far higher than in diabetes medicines. Very recently there was the first report of an Australian man admitted to hospital with hypoglycaemia resulting from taking a "sexual performance enhancing" drug purchased in Vietnam.¹⁰ Those selling these toxic counterfeits appear to be completely irresponsible, with no regard for the men they harm.

What is being done about counterfeit medicines?

There are now national and international organisations trying to monitor and prosecute those producing counterfeit medicines. The International Medical Products Anti-Counterfeiting Taskforce (IMPACT)¹¹ was formed in 2006 by the World Health Organisation to find global solutions to this problem and to raise awareness of the dangers of counterfeit medical products. They have developed guidelines providing advice on measures that should be taken by various stakeholders to combat counterfeiting of medicines.

Commercial sexual medicine clinics: why are they a problem?

The promotion of sexual medicine clinics is all around us – on billboards, in newspapers, on radio and television, and on the internet. Often men contacting these clinics have no face to face consultation with a doctor, and no adequate medical assessment.

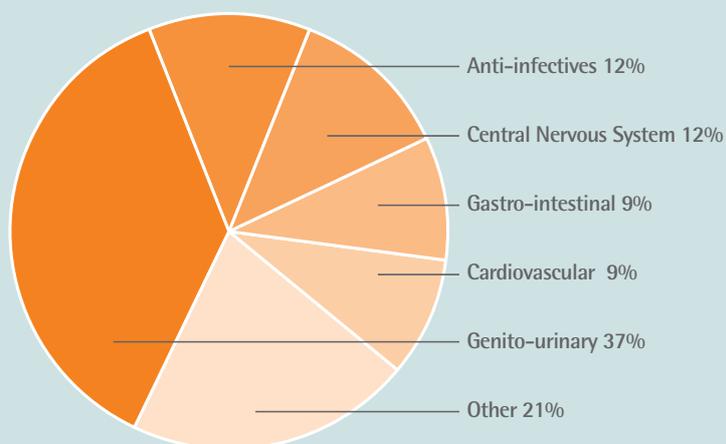
These clinics do not offer the proven effective treatments endorsed by experts, instead offering "in-house" compounded preparations of unproven quality and efficacy. The products are often sold on long-term contracts or at inflated cost. Men may perceive these clinics to have well trained specialist doctors, but this is not so. The result for many men is that they feel humiliated by this experience, lose trust in the healthcare system and do not seek further help.

What is the way forward for Australian men?

Although there has been some government scrutiny of these practices, it remains necessary to lobby governments to enforce laws that already exist. The reimbursement of legitimate ED medicines through the Pharmaceutical Benefits Scheme (PBS) could also help the situation, as the much lower cost of medicines available over the internet is a factor in why men choose to use them.

In the meantime, the most effective means to help men in choosing a safe path to look after their health is through education and raising awareness. Community education targeted at men and women is needed to alert them to the potential dangers in using services or pharmacies outside the health system. If men are able to distinguish between legitimate sources of health information, medicines and services from those that might be either ineffective or harmful to their health, they will be much better able to make informed decisions.

Reports of counterfeit medicines
by therapeutic category
2007 - Total number of cases: 1513



One case reflects at least one production lot, e.g. thousands of tablets, capsules, or other forms. Several cases included multiple therapeutic categories (only the most frequent category is included in the chart). Available data underestimate reality, especially in poorer areas where detection and reporting are extremely weak.

Source: PSI – Pharmaceutical Security Institute <http://www.psi-inc.org/index.cfm>

More open discussion about sexual and reproductive health could help, as well as providing reliable sources of health information and advice that men can find easily and can understand.

Men with sexual and reproductive problems should discuss their concerns with their local GP. They should expect to have a medical history taken, to be examined and have tests ordered if appropriate. If medicine is needed, this should be obtained on prescription through an Australian pharmacy. If the GP is not able to deal with the problem then it is a good idea for the man to ask for a referral to a specialist.

Education of health professionals is the other side of the equation – to allow more open discussion about sexual health issues and to improve knowledge of health professionals so that they feel equipped to speak to men confidently. Studies have reported low levels of discussion about sexual health issues between men and health professionals. More importantly, men would like doctors to initiate these discussions more frequently, as they often do not raise issues around sexual health despite having concerns.¹²

For a full list of references, please email sophia.browne@monash.edu

*Co-authored by Dr Veronica Collins, Andrology Australia

Recent events

'Getting to work on men's health': support for International Men's Health Week 2010

For the past six years, Andrology Australia has provided resource support for organisations running men's health events in their local communities during International Men's Health Week (IMHW) – a platform to leverage men's health promotion activities.

More than 1000 individuals and organisations received resource material for their men's health promotion activity during IMHW 2010. This is a significant increase from about 700, who received resources in 2009. This may be attributed in part to greater community awareness of men's health due to the development of the National Male Health Policy.

Following IMHW 2010, about 730 organisations were invited to provide feedback about their event, with 221 surveys returned (30 per cent response rate). The evaluation sought feedback on the suitability of the resource material and the success of the men's health promotion activity held during IMHW 2010.

The survey results indicated that the majority of respondents had held a men's health promotion activity during IMHW 2010 within the workplace, hospitals or community health centres, with regional communities continuing to be popular settings for men's health events.

While a new theme – "Get to work on men's health" – was adopted in 2010, the quality of the Andrology Australia IMHW resources still rated highly in regard to design and content. More than half of respondents also indicated they had used the Andrology Australia Men's Health Education Kit (54 per cent, n=86) for IMHW, again being significantly more than in 2009 (38 per cent, n=68). Although the kit highlights the potential of working with other organisations to run a successful men's health event, half the respondents (50 per cent, n=79) had no local support for their men's health activity. Furthermore, almost half of respondents (44 per cent, n=69) were unsure whether other men's health programs were available locally.



These survey findings will help Andrology Australia to plan and continue supporting IMHW. Future support for men's health events should involve providing organisations with the resources to help build greater capacity at the local level to assist with the planning and delivery of men's health events.

Research round-up

Men's Health Education Kit

The Men's Health Education Kit continues to be a popular resource for individuals and community organisations running men's health events and information sessions across Australia. Since being launched in October 2007, more than 2100 kits have been distributed nation-wide.

Its popularity and success can be attributed to the extensive consultation and review process that occurred during the development of the Education Kit, with a number of collaborative partners and specialist reviewers. This comprehensive process ensured that evidence-based and consistent health messages were delivered. Another positive element of the kit is the way it encourages individuals to engage the local community in running an event that meets the needs of local men and their families.

Due to the strong associations and links between reproductive and general health issues, the presentations contained in the Men's Health Education Kit also provide information on men's mental health, relationships and a healthy lifestyle.



During 2010, Andrology Australia, together with existing and new collaborative partners, has been reviewing and updating the information contained within the kit. From this update and review process, Andrology Australia has broadened the depth of

health issues which are pertinent to men in Australia following feedback from individuals using the kit. Two new topics have been added to the current list – 'Sun Exposure' and 'Bowel Cancer'. Specialist information on these health issues was provided by new collaborative partners, SunSmart Victoria and Cancer Council Victoria respectively.

Updated information will be available from October 2010.

If you already use the Men's Health Education Kit for running men's health events, you can express your interest in obtaining a new CD-ROM (to include the new health topics, along with accompanying comprehensive speaker notes and an updated Men's Health Education Kit manual) by contacting Andrology Australia info@andrologyaustralia.org.

In brief

Get the latest information on men's health conditions

The Andrology Australia consumer guides are hard copy booklets that provide comprehensive information on the causes, symptoms and treatment options of specific male health conditions. These guides are developed to support men who have been diagnosed with erectile dysfunction, male infertility, testicular cancer, prostate enlargement or androgen deficiency, and their families.

With the first guide on Androgen Deficiency published in 2003, more than 220,000 guides have been distributed nation-wide. Each guide is currently being reviewed to ensure the most relevant and up-to-date information is provided.

Please visit www.andrologyaustralia.org or call 1300 303 878 to order your individual copy, or display copies (a maximum of six) and consumer guide forms for your upcoming men's health event.



Younger Men's Health Active Learning Module

The Andrology Australia Younger Men's Health Active Learning Module (ALM) is a great way to earn those last QA&CPD points as the current RACGP QA&CPD triennium comes to a close.

The ALM awards either Category 1 or Category 2 QA&CPD points and covers reproductive disorders specific to younger men.

For more information, go to the Health Professionals section of the Andrology Australia website.



Congratulations to Dr Mick Adams

Andrology Australia would like to congratulate Dr Mick Adams for being recognised in the

2010 QUT Outstanding Alumni Awards.

Over his 30-year career, Dr Adams has been instrumental in improving the health of Indigenous Australians. Andrology Australia has worked with Dr Adams for many years and is pleased to have supported his PhD at QUT entitled, "Sexual and reproductive health problems among Aboriginal and Torres Strait Islander males".

Latest news

Testosterone supplements and cardiovascular disease

There are often reports in newspapers and magazines of the "benefits" of testosterone supplements in healthy men, with claims ranging from improved muscle strength to anti-ageing effects. It is important to critically examine claims of benefit and to determine if there are any adverse effects from taking testosterone supplements.

A recent journal article¹ has reported adverse cardiovascular effects associated with testosterone supplements in older men (65 years plus) with limited movement and age-related low testosterone levels. These men also had high rates of chronic conditions such as hypertension and diabetes.

The aim of this clinical trial was to see if testosterone supplements could improve lower limb muscle strength and physical function. Adverse events were being monitored (as is done in all clinical trials) and after six months the trial was stopped due to a higher frequency of cardiovascular events in the group receiving testosterone (23 men) compared to the control group receiving placebo (five men). The cardiovascular events ranged from increased blood pressure to heart attack.

The trial did appear to show an improvement in strength with testosterone supplements but as the trial was stopped early this needs to be confirmed.

The findings related to cardiovascular events should be treated with some caution because the study was not designed specifically to look at cardiovascular outcomes, the number of events was small and these men had high rates of pre-existing chronic conditions. However, it does raise some concerns about the use of testosterone supplements in older men with mobility problems that should be investigated further.

This study cannot be translated to younger men who may be taking testosterone supplements for a diagnosed testosterone deficiency. It is best that men with testosterone deficiency see their doctors for advice.

¹ Basaria S et al. Adverse events associated with testosterone administration. N Engl J Med 2010;363:109-1022.

Newsletter of Andrology Australia

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