

The Healthy Male

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Australian Centre of Excellence in Male Reproductive Health

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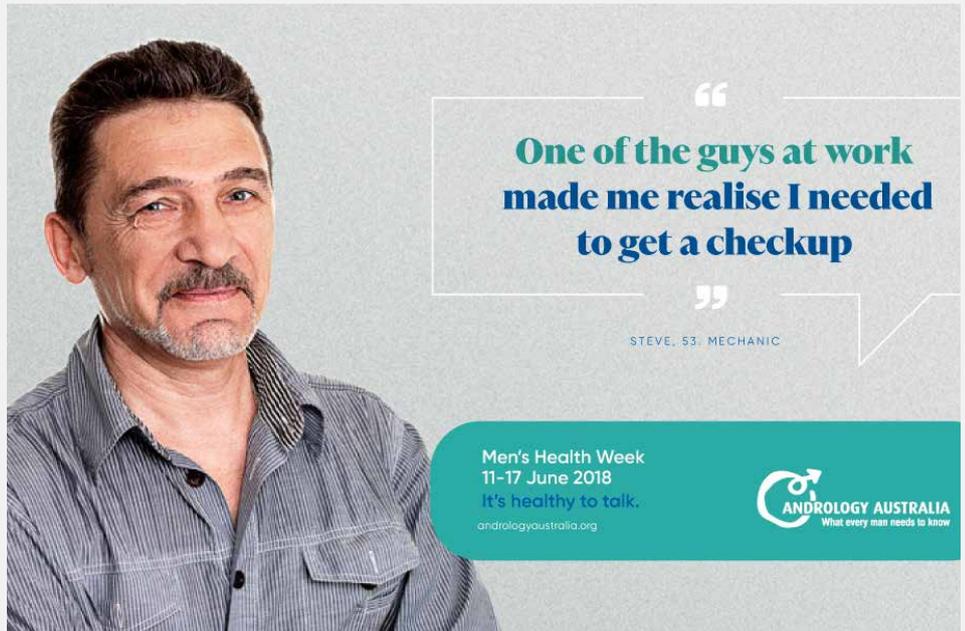
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It's Healthy to Talk

For many different reasons, men often feel they can't talk about their own physical health or emotions. Men tend to battle through, ignoring warning signs just hoping they will go away. But it's healthy to talk. Having a chat to someone in your family, or a mate at work, in the men's shed, at band practise or the local sporting club, can stop a minor problem turning into something bigger.

Conversations can help address worries and concerns a man may have had for some time. That conversation can be the first step to making an appointment to see a doctor.

In Men's Health Week 11-17 June 2018, Andrology Australia is encouraging all men to start a conversation about their health and wellbeing with someone they trust. The simple act of sharing a concern can turn someone's life around. We urge all men to talk about how they are feeling.

During Men's Health Week we will be encouraging all men to remember:

- It's healthy to talk. Have a conversation with someone you trust.
- You are not alone. Many men experience problems with their reproductive health. And these are commonly linked to more serious problems, like heart disease, diabetes, anxiety and depression.
- Be informed. Having knowledge about potential problems is a good way to help avoid them. Visit www.andrologyaustralia.org for more information.
- Don't ignore change. Go and see your doctor for any concerns.

Andrology Australia will be providing free men's health information about reproductive health and wellbeing to the community and health professionals, including posters and brochures specifically developed for Men's Health Week 2018. If you or your organisation would like to order resources, please visit www.andrologyaustralia.org



The new year is well underway, and we have started refreshed and ready to take on new goals and challenges. Andrology Australia is already busy with preparations for this year's Men's Health week, 11-17th June. The theme, *It's Healthy to Talk*, is outlined in our **front-page story**. We will be working with our partners to spread the word that it's ok for men to talk about their health. Having a chat about a health concern, or how you are feeling, with someone you trust can literally be lifesaving.

A subject that can be very difficult to talk about is sexual health problems. Unfortunately, these are experienced by many men with diabetes. This edition's Focus On article describes the sexual health and reproductive problems related to diabetes. Some of these problems can improve when diabetes is well-controlled, while others can be treated with medication. Like many conditions, early detection can increase the effectiveness of preventative solutions as well as control any existing symptoms from worsening.

Our **Health Spot** article comments on controversial stories appearing in recent news. These include the availability of a new at-home PSA testing kit, and amusing coverage of research in Japan alluding to a link between eating McDonalds and a cure for baldness.

We hope you enjoy this Autumn edition of *The Healthy Male*. As always, we welcome your thoughts about how we can improve this newsletter. Please email your ideas and feedback to: media@andrologyaustralia.org



Professor Rob McLachlan AM

Health spot – At-home PSA testing kit met with controversy

A new at-home blood test to measure prostate specific antigen (PSA) has become available for purchase online. This has been met with controversy, as routine PSA testing is not necessary or recommended in most men and may inadvertently cause fear and panic if PSA levels are misinterpreted.

What is PSA?

PSA, or prostate specific antigen, is a protein made in the prostate gland. PSA levels are measured as one part of the testing process for prostate cancer. However, PSA is not specific for cancer. Studies have found around 3 out of every 4 men with elevated PSA levels do not have cancer, while 1 out of every 7-10 men with normal PSA levels have cancer^{1,2}.

What causes high PSA levels?

PSA levels can rise for many reasons. These include an enlarged prostate (which is common with aging), inflammation or infection of the prostate (prostatitis), and, although less often, prostate cancer. PSA levels also increase naturally as the prostate enlarges with aging, following sexual activity and following a digital rectal exam. Unfortunately, test results do not distinguish the cause of raised PSA blood levels. Keeping a healthy body weight and reducing alcohol intake can all help to improve the health of your sperm.

When should PSA testing be done?

Current guidelines recommend against standardised population screening. All men should have an informed discussion with their doctor (GP) and/or urologist about the pros and cons of PSA testing. Men who have been appropriately informed can then undergo 2 yearly PSA testing from age 45, or earlier if at increased risk (e.g. men with a family history of prostate cancer). Men over the age of 75 should not have routine PSA testing.

If you are concerned about your prostate health, we recommend you do not undertake your own testing program but rather you should see your GP who can discuss your options with you and conduct any necessary screening tests.

Where can I go for information about PSA testing?

In 2016, the Prostate Cancer Foundation of Australia and Cancer Council Australia, developed evidence-based guidelines for PSA testing. These guidelines are available at <http://www.prostate.org.au/awareness/for-healthcare-professionals/clinical-practice-guidelines-on-psa-testing/>

References

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Can McDonald's fries cure baldness?

Headlines around the world have attracted recent attention claiming a chemical in McDonald fries holds the cure for baldness. While this has overstepped the mark somewhat, the original research published in the journal *Biomaterials*, still warrants attention.

The researchers report a new technique that efficiently grows large numbers of human follicle germ structures - the base from which hair grows. These human follicle germs (or HFGs) were transplanted into the skin of nude mice, where they developed into hair follicles and grew hair shafts. Researchers claim this new technique holds promise for improving current methods of hair regeneration to treat hair loss. This may come as good news to many, as around 1 in 5 of men in their 20s and 2 in 5 men in their 40s are affected by significant balding.

So where does McDonalds enter the story? It seems one of the chemicals (dimethylpolysiloxane) used in the laboratory to grow the human follicle germs is also added to the cooking oil for McDonalds fries to prevent oil splattering. So, despite the promises made in the headlines, eating fries is still more likely to add to your waistline than to the cover on your head.

Focus on: Sexual health and diabetes

Sex is meant to be fun, intimate and bring you and your partner pleasure. But for men with diabetes, this is not always the case, as sexual problems often occur. The good news is these problems can usually be reduced or slowed by actively managing diabetes and making lifestyle changes. And when that isn't enough, other medications are available. The first step to improve your sexual health is to talk to your doctor to get the help you need.

What is diabetes?

Diabetes is a condition where there is too much sugar (glucose) in the blood. In healthy people, blood sugar levels are normally controlled by the hormone insulin, which is made by a gland called the pancreas. Insulin controls how the body stores or uses glucose to keep blood sugar levels in a healthy range. Diabetes occurs when the specialised cells within the pancreas (known as the 'Islets of Langerhans') are unable to make insulin, or when the insulin doesn't work properly. When this happens, blood sugar levels get too high, which can lead to a number of health problems

What are the main types of diabetes?

Type 1 diabetes often starts in childhood or young adulthood and cannot be prevented. In type 1 diabetes, the pancreas cannot make enough insulin. This means daily medication (insulin) is needed to control blood sugar levels.

Type 2 diabetes is more common than type 1 and is largely preventable. It develops with prolonged exposure to a poor diet and a lack of exercise, and is linked to obesity and a family history. Type 2 diabetes occurs as the pancreas loses the ability to make enough insulin, or the body becomes resistant to insulin. These both result in high blood sugar levels, which can be avoided with lifestyle modification and medication.

What health problems are caused by diabetes?

Diabetes can cause many serious health problems, particularly if high blood sugar levels are left untreated. This includes renal (kidney) failure, damage to the nerves and blood vessels and poor circulation. Damage to the blood vessels and poor circulation can result in heart disease and stroke, blindness, potential amputation of lower limbs and a number of sexual health problems.

What sexual health problems are caused by diabetes?

- Diabetes can cause:
- Erectile dysfunction
- Lower testosterone levels
- Reduced sex drive (low libido)
- Retrograde ejaculation (where semen flows back into the bladder)
- Balanitis (inflammation of the head of the penis)

How does diabetes cause erectile dysfunction?

Erectile dysfunction (ED) is the inability to achieve or keep an erection firm enough for sexual activity with penetration. It is a symptom of an underlying medical and/or psychological problem and can be prevented and treated. Men with diabetes are twice as likely to experience erectile dysfunction as men without diabetes. This is because high blood sugar levels in men with diabetes can reduce blood flow and damage the blood vessels or nerves in the penis. This makes it difficult to get and maintain an erection. Drugs such as Viagra, Levitra and Cialis (PDE5 inhibitors) are often effective in men with diabetes, provided the nerves and blood vessels have not been too badly damaged. These treatment options should be discussed with your doctor.

Why is diabetes associated with reduced testosterone levels?

Testosterone is the main male sex hormone responsible for sex drive, getting and maintaining erections, but also energy, muscle and bone strength and a host of other important effects. Low testosterone levels can therefore impact on sexual and reproductive health. Low testosterone levels are common in men with diabetes and/or obesity due to complex changes in the way testosterone is metabolised (broken down and used by the body), and how it is controlled by the brain. These changes are often reversible with weight loss and improvement in diabetic control. In some cases, testosterone treatment may be considered.

How does diabetes cause low libido?

Low libido refers to a lack of interest in sex or a reduced sex drive. Interest in sex changes over time, and is influenced by different physical, hormonal, emotional and relationship factors. Losing interest in sex at different times in life is normal, but when it occurs for no apparent reason it may indicate a problem. Low libido commonly affects men with diabetes, due to both physical and psychological factors, general poorer health, and potentially low testosterone levels and erectile dysfunction. This can lead to anxiety, distress and feeling vulnerable, which can also lower libido.

How does diabetes cause retrograde ejaculation?

Retrograde ejaculation is when semen flows into the bladder when ejaculation occurs, instead of passing out through the penis. This occurs when a muscle at the top of the bladder



Losing interest in sex at different times in life is normal, but when it occurs for no apparent reason it may indicate a problem.

does not close properly before ejaculation, allowing semen to enter. This is generally harmless, but can become a serious problem when trying to father a child. In this situation, assisted reproductive treatment may be needed. Retrograde ejaculation occurs in men with diabetes because the high blood sugar levels cause damage to the nerves and muscles that close the neck of the bladder. This prevents it from closing during ejaculation.

How does diabetes cause balanitis?

Balanitis is a swelling of the foreskin or head of the penis, caused by a bacterial or fungal infection. This occurs more frequently in men with diabetes because their urine contains higher sugar levels than men without diabetes. The sugar helps bacteria and fungus to grow. This can be treated with antibiotics or anti-fungal medication.

Can diabetes be managed to improve sex problems?

Effective control of diabetes can vastly improve sexual health and prevent problems from occurring. The best way to control diabetes is through regular monitoring of blood glucose levels, taking medication as required, and through lifestyle changes well known to help control blood sugar levels. These include aiming for a healthy weight, eating a balanced diet, taking part in regular exercise, reducing stress and anxiety, drinking responsibly and quitting smoking. Your doctor can help and refer you to experts to find the right information and support.

If you continue to experience sex problems with diabetes, discuss this with your local doctor (GP). There are many factors that affect sexual health that should be considered, including other medical conditions, medications, lifestyle factors and your personal circumstances. Your doctor can also discuss other treatment options that may be suitable for your circumstances.

WHERE TO GET HELP

What should I do if diabetes is causing sexual problems?

Sexual problems are the same as any other health problems and should be discussed with your GP, even when this feels awkward or embarrassing. Your doctor is used to discussing these types of issues and will help with ways to control your diabetes and improve your sexual health. Getting your blood glucose under control and making lifestyle changes can be enough to improve your sexual health and will also avoid long-term damage to nerves and blood vessels. If not, other medications for sexual health problems are available. Your doctor can discuss this with you and may refer you to a specialist if needed.

Is counselling helpful?

Sexual problems can often lead to anxiety, depression and distress, and put pressure on relationships. Talking to a psychologist, relationship counsellor or sex therapist, either alone or with your partner, can be helpful. Your doctor can refer you to a skilled counsellor for the help and support you need.

Review of Primary Health Care resources

ANDROLOGY AUSTRALIA regularly reviews their free resources for professional development to ensure they are relevant, up to date and address current needs. The module Primary Health Care for Men is currently under review. This educational resource assists primary health care nurses in engaging men in discussions about sensitive health issues, including reproductive health disorders. Opportunities for developing new education resources will be explored with Andrology Australia's Primary Health Care Nurses (PHCN) Education Reference Group, who are responsible for overseeing this program.

If you are interested in becoming a reviewer, or would like further information regarding our PHCN Education Reference Group, please contact Taletha at info@andrologyaustralia.org

APNA national conference

Andrology Australia will be an exhibition sponsor at the up-coming Australian

Primary Health Care Nurses Association (APNA) National Conference in Brisbane 10-12 May 2018. During this conference, we will showcase our resources, and gather support in the primary health care sector for our Men's Health Week campaign.

Welcome to the team

Andrology Australia is delighted to welcome Professor Anthony O'Brien to our team for a two-month period from the Faculty of Health and Medicine, School of Nursing and Midwifery, University of Newcastle. Anthony has been a valuable contributor to Andrology Australia for many years, including as a member of the PHCN Education Reference Group. Anthony brings great knowledge to our team, incorporating findings from nursing research about men's preconception health into primary health care. For example, he recently conducted a retrospective study investigating the prevalence of ICD-10 diseases in men aged 20-25-30-35 years, admitted to the John Hunter Hospital,

Newcastle. He found these men had higher rates of admission with COPD, Drug and Alcohol use, Diabetes Mellitus, smoking and hypertension than other ICD-10 diseases - all of which have the potential to affect male preconception health. These issues can inform discussions and lifestyle interventions at primary health care level, and may help direct new research related to men's preconception health.

While he is here, Anthony will help review education modules, develop research collaborations and shared publications. He will also present a keynote address at the 2018 17th World Congress on Clinical Nursing and Practice in Zurich, Switzerland. The presentation entitled 'Men's preconception health, healthy fathers - a practice nurse approach', was developed by researchers across four universities (University of Newcastle, Southern Cross University, University of East Anglia (UEA) and Monash University) as well as the Apunipima Cape York Health Council.

Research round-up

Improving our understanding of the effects of anabolic steroids

DO YOU see men who are current or past users of non-prescribed androgens ("anabolic steroids")? A Men's Health research group at Concord Repatriation General Hospital is recruiting for a study looking at reproductive and cardiac (heart) health of men using non-prescribed androgens (or "anabolic steroids").

While anabolic steroids are known to affect testicular function and sperm production, these changes appear reversible once men stop taking these steroids. However, many questions remain, including the time course and completeness of this reversal. It is also unclear how non-prescribed anabolic steroids effect cardiac (heart) structure and function. This study aims to answer some of these questions.

Researchers are looking for men aged between 18-50 years, who exercise regularly (at least 3 times/week) and are current or past (last use > 3months) users of non-prescribed androgens. Participants must be able to travel to Concord Hospital, Sydney.

The study is carried out in a single visit over 4 hours, or 2 visits of 2 hours each. The study involves blood and urine samples (to measure hormone levels), biochemistry, semen analysis, testicular ultrasound, body composition scans, heart scans and heart monitoring.



The study is cost-free to participants and they may get the hospital lab test results, but they will not be paid for participation.

If you have suitable participants please contact the Andrology Department on (02) 9767 7222 or email androgens.study@anzac.edu.au or simply put in participant's details (if willing to participate) on <https://goo.gl/forms/P7uipDaan5NgBfMn2> and the researchers will get in touch with them.

In brief

ACCC bankrupts phony impotence expert

An article appearing in the Sydney Morning Herald (Jan 31) reports Jacob "Jack" Vaisman was declared bankrupt after failing to pay court costs exceeding \$3.6million, following prosecution by the ACCC consumer watchdog. Mr Vaisman has a long history of unethical medical practices, taking advantage of men with erectile dysfunction and premature ejaculation.

Latest News

Congratulations to Professor David Handelsman

PROFESSOR DAVID Handelsman was awarded the Officer (AO) in the General Division of the Order of Australia in this year's Australia Day Honours. David was recognised for his "distinguished service to medicine, particularly to reproductive endocrinology and andrology, as a clinician, author and researcher, to the science of doping in sport, and to medical education."

David Handelsman is a Professor of Reproductive Endocrinology and Andrology and is the Founding Director of the ANZAC Research Institute, a role he has held since 1998. David began his research career after graduating from Medicine in 1974 and obtaining specialist qualifications in Endocrinology. In 1996, David was promoted to a Personal Chair at the University of Sydney, where he became the first Professor of Andrology in Australia and created the first hospital Andrology Department at Concord Hospital (1999).

His international reputation as an expert in andrology stems from his research spanning basic science, clinical and public health domains. He has over 500 peer-reviewed papers, including studies of androgen physiology, pharmacology and toxicology, genetic models of androgen action, steroid mass spectrometry, anti-doping science, and both clinical and epidemiological investigations of androgen pharmacology. He has contributed widely to landmark studies in Andrology, including two World



Health Organisation male contraception studies. His contributions to clinical and science research have been recognised through many national and international awards and accolades and invited roles on expert advisory panels and scientific committees.

David continues to be actively involved in Andrology Australia, serving on the Advisory Board and as a member of several specialised reference groups. We congratulate David for this well-deserved recognition and his tireless dedication to improving men's health.

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