

TESTOSTERONE THERAPY SAFETY



Is Testosterone Therapy Safe?

The two biggest fears, heart attacks and prostate cancer, were put to the test in the largest trial ever done. Here is what it found.

Swipe

WHERE THE FEAR STARTED

The Warning Came From Weak Evidence

Regulators worried it might raise the risk of heart attacks and strokes, based on a couple of older, weaker studies. The original scare was built on weak evidence, and it was tested head-on.

THE TRAVERSE TRIAL

More Than 5,200 Men, About Three Years

A major trial known as TRAVERSE followed more than 5,200 men for about three years, the largest trial built to test testosterone's safety for the heart. They were older men who already had heart disease or a high risk of it.

HEART ATTACKS AND STROKES

No Rise In Heart Attacks Or Strokes

In the largest study to date, testosterone therapy did not increase heart attacks, strokes, or heart-related deaths compared with placebo. That was in over 5,200 higher-risk men followed for about three years.

PROSTATE CANCER RISK

The Trial Found No Increase In Prostate Cancer

The same study found no increase in prostate cancer or prostate-related problems. Rates were low and similar to the placebo group. Testosterone therapy also did not worsen urinary symptoms.

ENERGY AND LIBIDO

Energy And Libido Improved For Many Men

Safety was the headline, but testosterone trials have also documented genuine quality-of-life benefits. Testosterone corrected anemia (a low red blood cell count) in many men, and desire and sexual activity improved. In this trial modest rises in red-blood-cell levels (hematocrit) were not linked to more clotting events, though the wider evidence on large rises is still debated, which is why it is monitored.

THE SMALLER SIGNALS

Signals To Watch, Not Proof Of Organ Damage

The trial noted slightly higher rates of an irregular heartbeat (atrial fibrillation), short-term kidney injury, and lung clots, plus a small rise in fractures in a separate analysis. The reasons are not fully established, so these are treated as signals to watch, not proof of organ damage. Handled that way, these are a reason for proper supervision, not a reason to avoid a treatment with well-documented benefits.

WHO THE EVIDENCE COVERS



Diagnosed, Dosed, And Monitored

The evidence applies to men with a confirmed diagnosis of low testosterone who are treated to normal levels and monitored by a doctor. It does not support using high, unsupervised doses for performance. Testosterone therapy is a prescription treatment, and this is general information only, not medical advice, so always speak with a qualified doctor about whether it is right for you and how to monitor it.