

TAKE HOME MESSAGES

- Prevalence of **Testosterone Deficiency (TD)** increases with age in particular in men with metabolic syndrome (about 50%) and sexual dysfunction.
- Established male hypogonadism is almost always **a chronic and irreversible disorder** that compromises his health and quality of life, increasing morbidity and often mortality as well as frailty in elderly men. Moreover, low testosterone levels are associated with increasing the erectile dysfunction, obesity, osteoporosis, depression and reducing sexual drive.
- Replacement Testosterone Therapy (**TRT**) in Metabolic Syndrome (**MetS**) **reduces** waist circumference, BMI and insulin resistance as well as other parameters of **MetS** (Cholesterol and Hypertension). Furthermore, recent data have pointed out a positive effect on glycaemic control in men with type 2 diabetes melitus.

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- No definite evidence has been reported between **TD**, incident Cardiovascular (**CV**) disease and mortality as well as **CV** risk-benefit profile of **TRT** remains largely evasive.
- Young men with **TD** must be treated, while benefits and risks of testosterone replacement should be carefully assessed in older men, especially if they are frail.
- As there are several compounds that can be prescribed, taking into consideration both patient compliance and the possible major adverse effects, it is necessary to agree with the patients about the modality of TRT.
- Nevertheless, even though this evidence, **TD** may be underestimated and undertreated.



Many Thanks