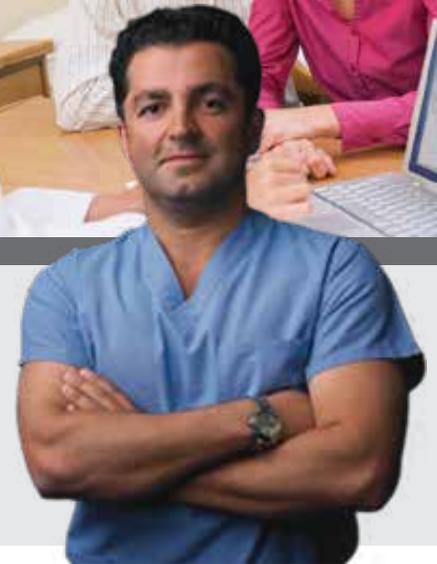




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Welcome to the May 2014 issue of the

## YOUrology Update!

With the spring upon us, people are heading to the outdoors to enjoy the warmer weather by entertaining with family and friends. It's really a magical time of year.

And speaking of entertaining, don't miss our recipe for the perfect side dish to accompany your favorite grilled meat or fish. Our tender grilled new potatoes and green asparagus are the perfect compliment to any meal.

We know that everyone is excited to get to the three-day holiday weekend that officially starts off the summer, but don't forget that Armed Forces Day is May 17! This is the one holiday that celebrates all members currently serving in our military. To get you in the right mindset to pay tribute, we're sharing some of our favorite quotes that are sure to inspire you.

**On the medical side, be sure to check out our very important information regarding Testosterone Replacement Therapy (TRT) After Prostate Cancer Diagnosis and What You Need To Know About Low T (Testosterone) and Heart Disease.**

*We hope that you and your family are enjoying a fabulous spring!*

- Dr. Shahram Shawn Gholami

*"My mother said to me, 'If you are a soldier, you will become a general. If you are a monk, you will become the Pope.' Instead, I was a painter, and became Picasso."*

*~Pablo Picasso*

# Testosterone Replacement Therapy (TRT) After Prostate Cancer

For nearly 50 years, the medical profession has had the opinion that men with prostate cancer - or at risk for prostate cancer - should avoid testosterone as it was like adding gasoline to a fire. Well, that assumption has been reversed and there are certain men with prostate cancer who have symptoms of low testosterone, such as lethargy, falling asleep after meals, loss of muscle mass, and decreased libido, and who have documented low blood testosterone levels.

Testosterone replacement therapy (TRT) might be suitable for men with hypogonadism, who also have a history of prostate cancer, but more research is needed, according to a group of Canadian and American scientists.

Typically, TRT is not considered for this population because exogenous testosterone is believed to stimulate the growth of prostate cancer cells. However, recent research has suggested that TRT might be safe for these men. Still, these studies have been small and the safety of TRT is still questioned.

This study took another look at this issue. Using Surveillance, Epidemiology, and End Results (SEER)-Medicare data, the researchers examined the prostate cancer-specific outcomes, disease-specific survival, and overall survival information for 149,354 men with prostate cancer. The men's median age was 73 years. Less than one percent of the men (1,181) underwent TRT after their cancer diagnosis.

Testosterone was administered via injections or subcutaneous pellets. Men on TRT underwent a median of 8 years of follow up; for men who did not take testosterone, the follow-up median was 6 years. TRT was more common among men who had had radical prostatectomy and those who had well-differentiated tumors. TRT was less common among men on watchful waiting or active surveillance protocols.

Overall and cancer-specific mortality rates were higher among men who were not on TRT. Also, TRT was not associated with higher rates of salvage androgen deprivation therapy.

## The researchers noted the following:

- TRT did not appear to raise the rates of overall or cancer-specific mortality. In fact, the men taking testosterone had fewer mortality



events than those who were not on TRT. The researchers were not certain why this occurred and noted the need for more follow-up.

- The percentage of men using TRT was low and declined over time. In 1992, 1.24% of the men underwent TRT after prostate cancer diagnosis. By 2006, that rate fell to 0.40%. In contrast, the researchers pointed out that the prevalence of hypogonadism, for which TRT is often prescribed, is much higher, ranging from 2.1% to 25%, depending on the parameters used.
- Income and educational status were factors in TRT use. "Seemingly, educated young men of means are more likely to either seek out, be offered, or accept TRT than other men," wrote the study authors.

They added, "As the effects of hypogonadism intensify with age, and as our understanding of hypogonadism and testosterone deficiency expands, improved access to testosterone replacement will be important for older, low socioeconomic (SES) men with prostate cancer, should further studies corroborate TRT safety."

In light of these results, the researchers concluded that TRT could be safe for men after prostate cancer diagnosis. However, they stressed the need for prospective studies to confirm their findings.

The study was published online in January in the *Journal of Sexual Medicine*.

*Bottom Line: There are times when it is necessary to challenge old ideas and assumptions. This certainly applies to testosterone replacement therapy and men with prostate cancer. If a man has a stable PSA after treatment for localized prostate cancer, has symptoms of low testosterone, and a documented decrease in the blood testosterone levels, then hormone replacement therapy may be helpful.*

Resources - The Journal of Sexual Medicine Kaplan, Alan L., MD "Testosterone Replacement Therapy Following the Diagnosis of Prostate Cancer: Outcomes and Utilization Trends" (Full-text. First published online: January 21, 2014)  
<http://onlinelibrary.wiley.com/doi/10.1111/jsm.12429/full>

## Grilled Asparagus and New Potatoes



2 tablespoons olive oil  
½ teaspoon salt  
½ teaspoon lemon-pepper seasoning  
6 small red potatoes (about 3/4 lb.),  
unpeeled,  
quartered  
1 lb. fresh asparagus spears, trimmed

1. Heat gas or charcoal grill. In large shallow bowl, mix 1 tablespoon of the oil, 1/4 teaspoon of the salt and 1/4 teaspoon of the lemon-pepper seasoning. Add potatoes; toss to coat. Place in grill basket.

2. Place grill basket on grill over medium heat. Cook 15 minutes, shaking grill basket occasionally to turn and mix potatoes.

3. Meanwhile, place asparagus spears in same shallow bowl. Add remaining tablespoon oil, remaining ¼ teaspoon salt and remaining ¼ teaspoon lemonpepper seasoning; toss to coat.

4. Add asparagus to potatoes in grill basket. Cook about 10 minutes longer or until potatoes and asparagus are tender, shaking basket occasionally to turn and mix vegetables.

**Expert Tip:** Grill baskets make it easy to hold and turn vegetables on the grill, but a sheet of foil with a few holes poked through it also works.

## What You Need To Know About Low T (Testosterone) and Heart Disease

I have received dozens of calls from men who are concerned about the recent study that reports that testosterone replacement therapy increases the risk of heart attacks and strokes. This blog is intended to clarify some of the misinformation that is attracting so much media attention.

The Androgen Study Group, a large group of physicians and researchers of which I am a member, is calling for the retraction of the paper that appeared in the Journal of American Medical Association linking testosterone and cardiovascular risks — data that its authors of the paper in the journal are standing firmly behind.

In a letter to Howard Bauchner, MD, editor-in-chief of the Journal of the American Medical Association, members of the group — formed in response to the paper and comprised of more than 125 doctors — said the study's credibility was compromised by at least two corrections and should be pulled from the journal. A close friend and colleague, Dr. Abraham Morgentaler pointed out the there's no misconduct, no one faked any data, it's just sloppy. The group called it "gross data mismanagement."

The paper, published in JAMA in November by Michael Ho, MD, PhD, of the Eastern Colorado VA, and colleagues, found that testosterone therapy was associated with a greater risk of death, heart attack, and stroke in male veterans who'd had coronary angiography. (If the men were having coronary angiography, it stands to reason that they already had some heart disease or they wouldn't have been subjected to this invasive procedure.)

But two corrections have since been published. The first, in the Jan. 15 issue, was a clarification that the results were based on "estimates" and not raw data.

The second, which Morgentaler and colleagues focus on in their letter to the editor of the journal, involved reclassification of patients who were excluded from the study. More than 1,000 excluded patients were assigned to different categories of exclusion, including 100 who were women!

The authors included almost 10% women in an all-male study, so why should we believe any of the other data? The Androgen Study Group points out that the data was so off that it's hard to believe it for the entire study are accurate.

However, Ho and colleagues said they "**stand firmly by the results of our study,**" noting that the overall number of excluded patients remains the same, as does the total number of included patients, and the main results of the study were not changed.

The study group said that these claims run contrary to 40 years' worth of research on testosterone, which suggests that the hormone has some beneficial effects in certain heart patients.

But the testosterone therapy field has garnered much media attention for its financial relationships with industry. Several articles in the New York Times, including one on the marketing of "Low T", another on the selling of testosterone gels, and an editorial, have questioned the potential overselling of the therapy.

It is true that several members of the Androgen Study Group, myself included, have relationships with testosterone drug makers, such as AbbVie, Watson, and Endo Pharmaceuticals.

It is my opinion that men who are symptomatic for low testosterone and have complaints such as lethargy, decreased libido, loss of muscle mass, and decrease in erections or potency AND who have a documented decrease in the blood level of testosterone, are good candidates for hormone replacement therapy. These men who are going to receive testosterone should have a normal digital rectal exam and a normal PSA test if they are less than 75 years of age.

*Bottom Line: Low testosterone has effects that impact a man's quality of life. If a man has symptoms of low T and a documented decrease in the blood testosterone level, he should speak to his physician about testosterone replacement therapy.*

# Inspiring Quotes and Ideas for Armed Forces Day

We've got some quotes that explain just why 1.4 million men and women are active duty military right now, serving around the world. They're the kind of quotes you can pin on a Pinterest board to remind you every single day that we're pretty darn lucky to live in a land where Old Glory flies above us in part because there are people willing to fight for her.

*"This nation will remain the land of the free, only so long as it is the home of the brave." ~Elmer Davis*

*"I'm proud to be an American, where at least I know I'm free." ~Lee Greenwood*

*"Live for something rather than die for nothing." ~George Patton*

*"Only our individual faith in freedom can keep us free." ~President Dwight Eisenhower*

*"If you are ashamed to stand by your colors, you had better seek another flag." ~Author Unknown*

*"May I never wake up from the American dream." ~Carrie Latet*



## So how can you celebrate and involve your children?

- Plan lessons for school students in the lead up to the event. Educators could write lesson plans reviewing the history of the American military. Develop a thematic approach to incorporate reading, writing, social studies and a craft that are focused on Armed Forces Day
- Print off U.S. flags and have children color them in. Find a local parade and have them take these along.
- Make patriotic crafts together. Make a pinwheel, a paper star, or a windsock in flag colors.
- Fly the flag on Armed Forces Day. There are many guidelines for displaying the American flag properly, with respect to the flag itself, as well as to any other flags that may be displayed along with it. Learn how to follow the United States Flag Code.

## Happy Mother's Day: Key Mom Stats/Fun Facts

- 72% of moms with children over 1 year old work and 55% of moms with a child under 1 year old work.
- 7,300 diaper changes by baby's 2nd birthday
- Moms take 2 minutes to change a diaper, 5 vs. 1 minute, 36 seconds for dads.
- Preschoolers require mom's attention once every 4 minutes or 210 times per day.
- Preschooler moms spend 2.7 hrs. per day on primary childcare, vs. 1.2 hours for dads.
- Women spend an average 2.2 hrs. per day on household chores vs. 1.3 hrs. per day for men
- 88% of laundry is done by moms, totaling 330 loads of laundry & 5,300 articles of clothing each year
- Most popular birth month: July
- Most popular birth day: Tuesday
- Most popular birthday: October 5
- 30 Pounds: Average weight gain during pregnancy
- Baby Gender Gap: 105 boys born for every 100 girls

