

Re: Test replacement, ejac. volume, prostate

Source: <http://sci.tech-archive.net/Archive/sci.med.prostate.prostatitis/2004-06/0066.html>

From: George (*GeorgeW_6_at_excite.com*)

Date: 06/21/04

Date: 20 Jun 2004 22:00:36 -0700

Hi, I had testosterone replacement therapy for several years before my doctor found that I had prostate cancer. Although the doctor had prescribed the treatment and told me of the risks, she felt that it was worth the risk because of my worsening situation of always feeling like I had the flu and having something akin to hot flashes. With me it was just feeling uncomfortably hot, especially in my face.

One day I found that I had stinging when I urinated. I went to the doctor and, yes, a urinary infection was found that was cured with antibiotics. At the same time my PSA was measured at 8.5 or so. The doctor had been monitoring for years and this was the first time it jumped up. Biopsies confirmed that I did have prostate cancer. I was about 65, so that is not too unusual even though there was no history of any cancer in my family. I was immediately taken off testosterone supplements.

I had a prostatectomy and after having the prostate removed the pathologist reported that the cancer was more advanced than the biopsy showed. However, the doctors involved concluded the cancer had not metastasized. A year afterwards though the PSA went up to about 3.5 and then the next test it was back down to about 1. Apparently there may be some cancer hanging around inside my body, probably in microscopic amounts.

Tonight I got on this site to seek out more information about taking testosterone replacements. All the old symptoms have returned and furthermore I am clinically depressed and have no energy to do most things. I am told to exercise to feel better, but I cannot make myself do the work. I often will sleep for up to 16 hours and sometimes will not leave the house for days, living alone makes this possible. For this, recently, I have had anti-depressant medicine increased. The first weekend was right now and I was inside for 3 days and slept most of Saturday and then 16 hours on Sunday.

I would love to try testosterone therapy again, but am sure no good doctor will prescribe the medicine as the risk of speeding up whatever cancer may be still there and having it show up in other parts of my body are too great.

With that long story, I hope you might think about the risk you are taking. If the testosterone does really make a difference in your younger years I can see why you, like myself, would take that track. I believe that the doctor has your best interests at heart. Ask him/her to make sure to check your PSA every six months if there is a risk of prostate cancer or you are afraid there is one. You are young for a rectal exam, but I believe the usual frequency is once per year. You can also have a colonoscopy every 5 to 10 years.

One good thing is that if you do get prostate cancer for any reason, it is better to catch it early with a PSA test and at a young age when you can tolerate surgery. New laproscopic surgery is making headway in the USA (after the French used it for years) and that surgery can be much less invasive and maintain your sexual functioning with nerve sparing.

Good luck and keep healthy.

George

gothika <Vampyres@nettaxi.com> wrote in message
news:<4ps4d0trpop68b267u51691281636msbr2@4ax.com>...
> On Thu, 17 Jun 2004 02:35:48 GMT, "anon@anon.it" <anon@anon.it> wrote:
>
> >Hello, two questions. One is gonna get graphic but I don't see the answer
> >on the net.
> >1. I am taking test replacement. I am 35 and have hypogonadism due to a
> >pituitary tumor. My Dr. constantly warns me about the correlation between
> >free T and prostate cancer. One week ago, a friend was diagnosed with
> >prostate cancer so now I'm _paranoid_. I want a satisfactory life...
> >without T, I have severe concentration problems, irritability, and
> >erection problems. However, from what I know, T replacement doesn't
> >_cause_ prostate cancer, it can just accelrate it IF it's there. Right?
> >My PSA is below 1 and I have been having DRE's for as long as I have had
> >T replacement, 33. My doc would love to see me off of T, but it's hard to
> >communicate what life is like without it to him. Serious question: is it
> >foolish of me to want to continue replacement (w/o it, my bound T will go
> >to 50 and total will drop to below 200) and HOPE that I never get cancer?
> >I'd rather have a normal life now than suffer from 35 onward to prevent
> >something that might not even happen.
> >Doctors can be real pains at times, especially in regards to
> >testosterone therapy.(You can be sure any doctor that suffers from
> >ailments requiring test injections damn sure take it themselves.)
> >The real problem is the law. Test is on the class A felony controlled
> >substance list, therefore doctors have to go through lengthy paperwork
> >and scrutiny if they prescribe it. Most refuse to treat patients that
> >require testosterone supplementation just to avoid dealing with the
> >DEA.
> >Pathetic to say the least.
> >sounds like your Dr. doesn't care if you have normal sexual function
> >or not.(a prevelant attitude I've found. The medical opinion is that

- > Sex is the only biological function that's purely voluntary, therefore
- > you shouldn't bitch if your doctor decides that you don't need to have
- > it anymore.
- > The issue of Test causing cancer is debateable at best. Virtually all
- > clinical studies have yet to conclusively prove that test alone causes
- > cancer.
- > Most who contract cancers are genetically predisposed in the first
- > place.
- > Testosterone does accelerate many bodily functions, i.e makes the
- > bodily endocrine functions function much as they did earlier in life.
- > This depends much on the dose rate and cycles though.
- > It'd take very high doses to put a strain on critical bodily
- > functions.
- > Certainly more than it takes to achieve the desired benefits from
- > test.(used to be that athletes that self-dosed used the "more is
- > better" philosophy. Clinical studies showed that "stacking" and
- > mega-dosing only curtailed natural test production with virtually no
- > muscle gains past the 1-2 cc dose rates.)
- > If you've made the decision to risk any possible cancer risks in order
- > to have test than your Dr. should be sympathetic. After all most men
- > would rather have some sexual function etc... than a long life with
- > none.
- > Your PSA's are quite low, mine are typically around 3 and my doctors
- > don't panic over it.(Trus showed a smaller than normal prostate for my
- > age range, just a lot of calcifications.)
- > There are other, more conclusive tests that'll rule out any possible
- > cancer. Have your doctor run them if he's wanting to stop your test
- > injections out of his fears of cancer.
- > As I've said in an earlier post, virtually all the pro athletes I've
- > known over the years are healthy as horses and much stronger than many
- > half their age.(My father was a power lifter and played football for
- > army way back in the 30's. when he died in his late 60's he was
- > married to a woman barely past 30. He exercised strenuously most of his
- > life and was stronger than most men half his age. He didn't use test,
- > but was lucky to have a very high output of natural testosterone,
- > something I inherited to a lesser degree.)
- > I know they took test on a regular basis, some way too much.
- > Yet I don't know of one who contracted cancer or suffered any bad side
- > effects.(Many are like my dad, married to women much younger, some are
- > still fathering children. Even into their 60's etc...)
- > Consider the fact that in the 60's/70's these guys were taking the
- > harsh stuff too. DES and Hormone II, the rawest of Dianabol or even
- > class B anabolics.
- > You'd most likely be on Anathate or Ciprionate. A very close synthetic
- > match to regular male test.
- >
- >
- > >2. The embarrassing question. Ever since I can recall, I have had VERY
- > >large orgasms. My ejaculatory volume is typically in the two to three
- > >tablespoon (not teaspoon) range, and there have been occasions where it's
- > >been far, far more (though not often). Simple question: if I see a drop

> >in quantity significantly and *_suddenly_*, is this an indicator that I may
> >have prostate problems that I can't feel? I can't find any answers about
> >this—net searches only turn up info on porn stars (oh, great). Also, is
> >having such volume a sign of a larger than normal prostate? This has been
> >my condition since the onset of puberty.
> >
> >Large ejaculate volume is nothing unusual, I had enormous output most
> >of my active sex life.(I was precocious, hitting functional puberty at
> >11 and becoming sexually active with partners at 12. Had 3 marriages
> >and was very active sexually up until my late 40's when my problems
> >started.)
> >Seeing a drop in volume is one of the signs of either health problems
> >or advancing age. The size of the prostate has little to do with
> >volume, in fact it seems to follow an inverse rule.(The prostate is
> >smaller in youth, yet puts out greater volumes. As it never stops
> >growing over one's lifetime is larger in later years, yet typically
> >secretes less volume.)
> >If it's a symptom of medical problems only a doctor and the right
> >tests will confirm.
> >
> >I know I'm being overly panicked considering my friend's recent
> >diagnosis, but if anyone can give some consideration to these, that would
> >be appreciated...
> >
> >Please post here, thx