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Testosterone Patch Ups Sexual Desire in Women With Surgical Menopause

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NEW YORK (Reuters Health) Jul 25 - Treatment with a testosterone patch can improve sexual desire and activity in women with hypoactive sexual desire disorder (HSDD) following oophorectomy, according to a report in the Archives of Internal Medicine for July 25.

The findings are based on a study of 447 women who were randomized to receive testosterone patches, at one of three doses, or placebo for 24 weeks. A total of 318 women completed the trial.

Compared with placebo, the intermediate dose (300 micrograms/day) testosterone patch significantly improved sexual desire and increased the frequency of satisfying sexual activity, lead author Dr. Glenn D. Braunstein, from Cedars-Sinai Medical Center in Los Angeles, and colleagues note.

The lower testosterone dose (150 micrograms/day) offered no benefits, whereas the higher dose (450 micrograms/day) was no better than the intermediate dose. The dose-response trend fell just short of statistical significance.

The testosterone patch was well tolerated at the doses studied and no serious adverse effects were seen, the report indicates.

While the findings suggest a role for testosterone patches in the treatment of HSDD, the author of a related editorial comments that the optimal dose remains to be determined. Likening the search for the right dose to "Goldilocks and the Three Bears," Dr. Robert A. Vigersky, from the Walter Reed Army Medical Center in Washington, D.C., notes that it is still unclear if the 300-microgram patch is "just right."

Dr. Vigersky adds that the "benefits found by Braunstein and colleagues are modest and not clearly dose related."

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