

Case

- 60 y/o AA male with HCV, HIV on ART ABC/3TC/DTG (CD4 369, VL<50)
- Complains of fatigue, erectile dysfunction, low libido
- DXA: Lumbar Spine T score -2.7, Femoral Neck T-score -2.5, Total Hip Score T-score -2.6; No history of fractures, No occult fractures on spine x-rays
 - FRAX Risk factors: Mother with hip fracture
 - FRAX 10 y risk: Osteoporotic Fracture 16%/Hip Fracture 3.2%
- No obstructive urinary symptoms; No family history of prostate cancer. PSA 2.0

Case

- History of MI 10 years ago s/p stent, no angina
 - TC 169, TG 176, HDL 66, LDL 68 mg/dL
 - (TC 4.4, TG 2.0, HDL 1.7, LDL 1.8 mmol/L)
 - On atorvastatin 20 mg/d, ASA 81 mg/d, Losartan, Atenolol
- Physical Examination
 - BMI 19 kg/m²
 - Normal digital rectal examination

Case

- Biochemical Testing
 - PSA 1.0
 - 8 AM:

Total Testosterone: 422 ng/dL (nl >300 ng/dL) (14.6 nmol/L, nl >10.4)
FT 17 pg/mL (nl 46-224 pg/mL) (58.9 pmol/L; nl 159-777)
LH 18 mIU/mL (1.7-11.2 mIU/mL), FSH 35.7 mIU/mL (1.5-12.4 mIU/mL)

Question

- Would you recommend testosterone replacement in this man?