SUMMARY AND CONCLUSION

Androgen therapy has been widely used in the treatment of male infertility and impotence.

This study was done to evaluate the safety of oral mesterolone and intramuscular injection of testosterone enanthate when given either empirically or to hypogonadal men on the mean values of blood indices.

This work comprised 52 patients who suffered from impotence (25 patients) and male infertility (27 patients) and selected from the outpatient clinics of Benha University Hospital and Mansoura University Hospital.

They were divided into two groups: - Mesterolone group (comprised patients randomized to receive 75 mg daily of oral mesterolone) and testosterone enanthate group (included patients randomized to receive 250 mg monthly of intramuscular testosterone enanthate).

The Mesterolone group: - comprised 30 patients with ages varying from 24 to 44 years. Sixteen patients suffered from erectile dysfunction and the other fourteen patients complaining male infertility.

The Testosterone enanthate group: - include 22 patients with ages varying from 22 to 65 years, eleven patients suffered from erectile dysfunction and the same number of patients complaining male infertility

All members of the study were subjected to thorough history talking, general and local examination, measurment of different blood indices such as venous haematocrite, haemoglobin concentration, mean corpuscular volume, mean corpuscular haemoglobin and mean corpuscular haemoglobin concentration before 3 months after administeration of androgen therapy. Red blood cells count, white blood cells count are also measured before and 3 months after treatment with androgen therapy. Also serum testosterone was measured before and at the end of the treatment period.

There were statistically significant increase in the mean values of venous haematocrite, haemoglobin concentration and mean corpuscular volume among the two groups. Also there were significant increase in red blood cell count, whit blood cell count, platelets count after the treatment period among both groups.

There were no statistically significant changes in mean corpuscular haemoglobin, mean corpuscular haemoglobin concentration and serum testosterone levels among both groups 3 months after treatment.

According to these results we can speculate that mean values of blood indices were significantly increased after administration of oral and injectable androgens to impotent and infertile patients hence, the danger of haemoconcentration may develop.

So, we recommend a careful administeration of impirical androgen therapy for impotent and infertile patients to avoid the complications of haemoconcentration