Testosterone Estradiol

*Aromatase (enzyme)*

Increase aromatase Excess estrogen

Genetics Fluid retention

Obesity, belly fat Weight gain

Insulin resistance Belly fat

Processed foods/carbs Breast pain, ‘fibrocystic’

Aging Uterine bleeding, fibroids,

Medications\*\* endometriosis

Alcohol Anxiety, irritability, PMS Erectile dysfunction

Decrease aromatase Low estrogen

Exercise Hot flashes, night sweats

Whole foods Insomnia

Aromatase inhibitor\* Vaginal dryness

‘Anastrozole’Hair thinning

Erectile dysfunction

Estrogen stimulates the breast tissue and long-term estrogen **excess** can increase the risk of breast cancer. In addition, research is now showing that prostate cancer may be associated with low testosterone and high estrogen.

Increased estrogen can also interfere with the beneficial effects of testosterone.

\* Anastrozole, an aromatase inhibitor, may be combined in the pellet implant to block the ‘aromatization’ of testosterone to estradiol. Testosterone is FDA approved in men. Anastrozole is FDA approved in women. The combination, delivered in a pellet implant, is considered ‘off label’ use. Please see consent for definition of off label. Similar to other medications, long term use of anastrozole can cause hair loss in some patients.

\*\*Many medications can cause erectile dysfunction and breast enlargement (gynecomastia) either directly, by inhibiting testosterone production, or indirectly, by increasing aromatization of testosterone to estradiol. Some of the most common medications that cause problems with erections include statins, blood pressure medications, cardiovascular drugs, antiulcer drugs, antidepressants, anti-anxiety drugs, pseudoephedrine, anti-histamines, alcohol and marijuana.

Do not stop any prescription medications without consulting your physician.

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