

We quite often find that knowledge of male hormone treatment of female-to-male transgendered persons is an area full of myth and misconception. This pamphlet does not advocate use of hormones, but is intended to provide a fundamental basis of knowledge for those individuals who are considering hormone treatment. It is an area where there is little research data available, even to the medical profession. This pamphlet is only an introduction to touch on some of the key points and frequent questions of female-to-male hormone treatment presented in a question and answer format. We DO strongly recommend that you consult an experienced endocrinologist BEFORE attempting hormone treatment. Hormones can cause medical problems or exacerbate an existing condition.

### **1. How do I know if a Hormone Replacement Treatment is right for me?**

You have to honestly answer some very serious questions about your desired intentions - some effects of hormones will be permanent. Are you prepared to live with those effects for the rest of your life? For instance, your voice will deepen for the rest of your life in just a very short time - just think about your lifestyle and see if you are really prepared to live with a male voice.

### **2. What kinds of female hormones are there?**

Testosterone is a very powerful hormone. It is one of the causes for such drastic differences between men and women. One can see some of the powerful effects of hormones within the sporting and body building community

There are four different types of hormones that can be used. First, there are the intramuscular injections of testosterone. The two different types of testosterone used in this method are Enanthate or Cypionate, and can range in dosage and strength.

For those preferring not to use syringes, there are other options available. This includes the transdermal patch sold under Androderm or Testoderm, as well as a testosterone gel sold under Androgel or Testim.

Finally, there is a testosterone pellet with a time-release formula that can be placed under the skin.

With all of these methods there will be certain advantages and disadvantages. Some offer consistent dosages of testosterone

while others have more concentrated dosages that slowly dwindle with time until the next dosage. Patches and gels sometimes irritate the skin, but are typically safer to use since they do not involve any invasive procedures. All of these methods will still provide you with the necessary testosterone to transition.

Some other treatment considerations for FTM's include testosterone cream in aquaphor for clitoral enlargement and estrogen vaginal cream for atrophy. Use of estrogen vaginal cream will, however, not counteract the testosterone itself (testosterone is *that* powerful).

### **3. What are the effects of male hormones on females?**

The most important thing to note about testosterone is that many permanent changes take place by using it. In essence, an FTM is an adolescent male going through puberty. If you will note, many male-to-female transsexuals have a hard physical time on their journey because testosterone is a very powerful hormone that causes very permanent results. As mentioned before, your voice will change. Testosterone causes the larynx to grow and the vocal cords to get longer and thicker, which in turn causes the voice to deepen.

Body and facial hair will appear, and will over time, become coarser. It can cause hair to grow on the face, abdomen, chest, arms, legs, and the back. Your facial hair grown will depend on your body and your genetics.

Although testosterone causes hair growth on other areas of the body, it can also cause hair loss, and possibly baldness, just like genetic men. So, your transition to male may also leave you dealing with male pattern baldness.

Finally, testosterone also causes permanent enlargement of the clitoris. Some of these changes may be noticeable after a few months, while others may take years to fully develop.

Testosterone also causes some reversible changes including the cessation of menses. Typically after 2 months, females no longer menstruate when using shots. Talk to your health care provider to discuss other problems that can occur with your reproductive system.

Muscle gain is also one of the quite noticeable effects of testosterone. If you work out, testosterone makes it a lot easier to build and maintain muscle. The hormones will also cause

the redistribution of fat away from the breasts, hips, and buttocks and more toward the abdomen. It can also cause you to gain weight. Because of the muscle gain and the hormone itself, you will also find that your veins are more prominent and you may have a change in your sweating or body odor. Acne can also be side effect of the powerful hormone, so be sure to wash your face on a regular basis.

Testosterone can also cause other changes that are not physical. You may notice an increase or change in your sexual behaviors or sex drive, and changes in your emotions, possibly giving you "male aggression."

### **4. What WILL NOT happen?**

Besides the things we've already mentioned that will NOT happen, here are some others: Your breasts will not go away. They will still remain to some degree or another. You won't grow a penis and your hipbone structure will not decrease.

### **5. What are male hormones really doing to my body and what are the risks?**

In order to achieve physical masculinization, hormones must be taken to overcome the female estrogen levels and bring the testosterone up to a normal male range. Because of these dosages, there can be a lot of other side effects, the most common being damage to the liver (hepatotoxicity). You may also be more prone to developing breast uterine or breast cancer. Even people who have had top surgery can still have some breast cells that can be affected, and should continue to examine their breasts or chest regularly. You should have an endocrinologist closely monitor your body chemistry and get regular medical checkups. You may also experience hives swelling, vomiting, lowering of HDL (good cholesterol), elevated triglycerides, insulin resistance, polycythemia, increased homocysteine levels, and have an increased risk of sleep apnea. Also, taking too much testosterone can cause your body to convert some of it into estrogen, which can stop the effects of testosterone.

### **6. How do I go about starting hormone treatment?**

In the United States and most other countries, you should have a prescription for hormones. So, in addition to having an endocrinologist evaluate your body chemistry, you should obtain a prescription. Remember, dosages will vary depending on your existing chemistry. You should not take testosterone

sporadically. It's too hard on your body to have wildly fluctuating hormonal levels. You should begin slowly with gradually increasing dosages and if you decide to stop, you should taper off gradually as well.

### 7. *What medical problems preclude use of hormones?*

Basically, almost any pre-existing medical problem could be affected one way or another by use of hormones. However, you should definitely not use male hormones if you have a history of liver or kidney disorders, heart disease, high blood pressure, some types of cancer, diabetes, or are smoking, pregnant, or still exploring. This is why you should consult a physician and have regular medical evaluations.

### 8. *What about informing my family?*

If you are married, you are obligated to discuss this with your spouse. Use of hormones IS going to affect your relationship, particularly your sexual relationship. Can your spouse cope with your physical masculinization? As for informing the rest of your family, you may have to tell them something if they notice and inquire about your physical changes. Think about it and be prepared to answer a few pointed questions. If you have children, they will eventually notice and most probably ask questions.

We have only scratched the surface of use of male hormones by genetic females. Before you start using male hormones, we recommend a lot more study and thought about a possible hormone replacement therapy. Their use will have an immediate and significant effect on your life and those close to you. Using male hormones is NOT something to be done on a whim. Essentially, if you elect to use male hormones, you are making a commitment to live a mostly male lifestyle in a mostly male gender role. This decision is a time when it is very important to understand yourself, and your relationship with others and society in general. Remember - medical care and supervision during hormone treatment is recommended for your own wellbeing. Be sure it's right for you!

TGSF welcomes all transvestites, transsexuals, transgenderists, significant others, friends, neighbors, allies, and anyone interested in gender.

This flyer was prepared by Damon Helton, Education Co-Chair, and Kara Flynn, Outreach Co-Chair-2004.

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## INFORMATION ABOUT MALE HORMONES

*This pamphlet prepared  
as an introduction  
to basic effects of  
male hormone treatment  
applied to female-to-male  
transgendered persons.*

# TGSF

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