

Update on late-onset hypogonadism (LOH) or ADAM: diagnosis

ATUALIZAÇÃO EM HIPOGONADISMO MASCULINO TARDIO (HMT) OU DAEM: DIAGNÓSTICO

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<http://dx.doi.org/10.1590/1806-9282.60.05.003>

1. **The main signs and symptoms involved in late-onset male hypogonadism include the following, except:**
 - a. Erectile dysfunction and decreased libido.
 - b. Anxiety.
 - c. Depression.
 - d. Decreased testicular volume.

2. **On the main instruments used in the definition and diagnostic assessment of male aging, we cannot affirm that:**
 - a. When analyzing the responses to the ADAM questionnaire, clinically suspected cases of LOH are those in which the symptoms of sexual dysfunction are present.
 - b. The Smith questionnaire is considered a questionnaire to assess the risk of LOH.
 - c. It is recommendable for the AMS scale and ADAM questionnaire to be used as screening instruments.
 - d. The use of the three instruments makes the diagnosis of HMT through functional and biochemical criteria unnecessary.

3. **What is the role of the serum and free testosterone (BAT) levels in the diagnosis of late-onset hypogonadism?**
 - a. Free testosterone is a less precise marker of hypogonadism.
 - b. The result of the total testosterone level does not affect the determination of free testosterone.
 - c. TT (total testosterone) would not be the ideal measure to assess late-onset hypogonadism.
 - d. There is a fall in testosterone and BAT levels at 2.3%/year and 1.1%/year.

4. **Tests to be requested before the start of hormone replacement therapy (ART) include the following, except:**
 - a. Baseline testosterone measurement.
 - b. Lipid evaluation.
 - c. Baseline PSA levels.
 - d. Evaluation of renal function.

5. **How should prostate cancer be monitored?**
 - a. Ultrasound-guided prostate biopsy.
 - b. PSA higher than 4 ng/mL or 3 ng/mL in men with a high risk of prostate cancer.
 - c. An increase in PSA levels higher than 1.4 ng/mL in any 12 month period during treatment.
 - d. Detection of prostatic abnormality during rectal examination.