Learning the lessons of the HRT fiasco

As women and their physicians "jump off the hormone bandwagon," the next phase of our desire to stay young and defeat the normal course of aging has shifted to male hormone replacement therapy (HRT). As with ovarian HRT, much of the drive for the use of male hormones comes from crafty campaigns delivered with the backing of the pharmaceutical industry. We have been convinced that there is no reason for men to "slow down" as they age; all we have to do to counteract aging is prescribe HRT for "androgen-deficient" males. Yes, there will always be patients who desire that eternal ability to perform as they did in their youth (mentally and physically) and who seek our help for this "problem."

But the medical profession has the responsibility to learn the lessons of ovarian HRT use. We need to put these requests for help in the context of normal aging and to demonstrate a responsible reluctance to prescribe androgen replacement therapy until there is evidence to support its safe and efficacious long-term use. There are many lessons to be learned from the Women’s Health Initiative; the current trend to prescribe androgen replacement lacks credible evidence of its safety.

—Alan Katz, MD, CCFP, FCFP
Winnipeg, Man
by e-mail

Reference

Correction
The e-mail address given in the ordering section of the book review of Comfort Care. Palliative Care Symptom Management of Cancer Patients. A Guide for Physicians, 2nd ed (Can Fam Physician 2003;49:791) has changed. The new e-mail address is wgcphill@chebucto.ns.ca.

Influencing public policy

In “Diabetes care in Canadian family practice,” Dr Agarwal wrote: “From patients’ perspective, behavioural change depends on social and economic priorities.”

In the past 10 years, the prevalence of obesity and overweight has increased among industrialized countries, with adverse effects on type 2 diabetes, hypertension, and serum lipids. Our success at convincing people to eat less sugar and fat, to eat less and to exercise more, is low. A reason for this limited success might be the uneven exposure that people have to doctors and other influences.

Multinational companies spend hundreds of millions of dollars on advertising each year. Incessant campaigns in the electronic and print media exhort people to drive cars and to eat fatty and sugary foods. Given the fact that people are exposed to these advertising messages far more often than they are to their doctors, it is unsurprising that the prevalence of overweight and obesity has been increasing.

I agree with Dr Agarwal that family doctors have a role in influencing public policy to improve health.

—Robert Shepherd, MD
Gatineau, Que
by e-mail

Reference