

Patient information and Guidance

Testosterone gel for women experiencing menopausal symptoms

What is testosterone?

You may think of testosterone as a male hormone, but women make this hormone too. It is just one of the sex hormones that women produce, together with the female sex hormones, oestrogen and progesterone.

In women, levels of testosterone in your body gradually reduce as you become older, with many women not even noticing. Others are more sensitive to the changes and sometimes benefit from extra testosterone. Young women who have surgical menopause (removal of ovaries) may notice the change in testosterone more, perhaps because they are younger and because the drop is sudden.

Why use testosterone?

A low dose of testosterone can sometimes be beneficial in improving your energy, mood, concentration and also sex drive (or libido). However, it does not help everyone.

What symptoms can testosterone help with?

The National Institute for Health and Care Excellence (NICE) suggests that, if women are experiencing low sexual desire related to the menopause, then testosterone may be helpful. Testosterone will be combined with standard hormone replacement therapy (HRT) as it works best when there is oestrogen as well.

How is testosterone treatment given?

- Testosterone is usually given as a gel, which you rub into your skin
- The desired female testosterone replacement dose is approximately 5mg a day

How should testosterone gel be used?

The gel should be rubbed onto your abdomen or your thighs and allowed to dry before you get dressed. You should not have contact with any other person while it is drying (approximately 10 minutes), and you should wash your hands immediately after the gel has been applied. The area that it is on should not be washed for three hours after application to allow the gel to be absorbed.

Taking an unlicensed medicine

- In the UK testosterone is not currently licensed for use by women, so it is said to be prescribed 'off label'. It means the manufacturer cannot advertise or make any recommendations about using the gel for women.
- When using a medicine off label, it does not mean that it is unsafe or that you are part of a clinical trial. Testosterone gel for women has been shown to be effective, and use is supported by expert groups

Are there possible side effects?

If you use the recommended, side effects should be very few. This is because testosterone gel is given to restore the testosterone to its level before the menopause. However, some side effects are dependent on the dose taken and can include:

- Increased facial hair or body hair, known as hirsutism (common)
- Male pattern hair loss, known as alopecia (less common)
- Acne and greasy skin (less common)
- Deepening of voice (rare)
- Enlarged clitoris (rare)

Very occasionally, women notice some increased hair growth or skin changes in the area in which they rubbed the gel. This may be avoided by varying the area of skin on which you rub the gel. Whilst we have much information about the long-term side effects of oestrogen and progesterone replacement therapy in the menopause, there is less information on any long-term effects of testosterone replacement therapy. Randomised studies have not shown an increased risk of cardiovascular (heart) disease or breast cancer with testosterone replacement although longer term follow up studies are lacking. We only have safety data for 2 years use of testosterone replacement in women.

How long does it take to work?

The medicine can take several months to work, and it is not effective for every woman. We will monitor you closely for the first 3-6 months to ensure the treatment is working safely. We will continue to check that you are responding well and not experiencing any unwanted side effects. You may also be advised to use vaginal oestrogen if it is needed to treat vaginal dryness.

Do I need a blood test?

Blood tests cannot diagnose whether you need testosterone, but are used as a safety check to ensure you are not getting too much on top of your own natural levels. You will have a blood test before starting, repeated after 3 months then 6 monthly thereafter whilst on testosterone. Some women are able to move to yearly blood tests if very stable on treatment and we will let you know if this applies to you. Please keep a record of when your tests are due so that blood tests are done at the right time.

Who should not take testosterone for menopause?

There are some women who should not take testosterone. If you have had a hormone sensitive breast cancer or if you have active liver disease, you should not take it.

Further reading

- British Menopause Society toolkit for clinicians: Testosterone replacement in menopause
- [08-BMS-TfC-Testosterone-replacement-in-menopause-DEC2022-A.pdf \(thebms.org.uk\)](#)
- Women's Health Concern leaflet: Testosterone for women
- [22-WHC-FACTSHEET-Testosterone-for-women-NOV2022-B.pdf \(womens-health-concern.org\)](#)