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Title:

Hypogonadism in males with Type 2 Diabetes Mellitus

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BACKGROUND AND OBJECTIVE: There have been reported increase prevalence of Hypogonadism in diabetic men compared to age matched non-diabetic men. The objective of this study was to assess the level of androgens in T2DM patients and non-diabetics and correlate it with erectile function and visceral adiposity.

METHODS: This was a cross-sectional comparative study of 160 male patients with T2DM (study subjects) and 80 age matched non-diabetics (control subjects). Level of free testosterone and LH was assayed, erectile dysfunction was assessed with IIEF-5 questionnaire and clinical data of both the study and control subjects were analysed.

RESULTS: The study and control subjects were well matched for age, with mean±SD of study subjects being 58.2±10.1 years and control subjects was 56.6±11.3 years. The study subjects had a significantly lower mean±SD free testosterone level than the control subjects (16.9± 6.7pg/ml compared with 21.6±8.9pg/ml, p=0.00). The mean±SD LH level of the study subjects was significant lower, compared to that of the control subjects (5.3± 3.1mIU/L compared to 7.8±5.5mIU/L, p<0.05). Among the study subjects, ED was present in 118(73.8%) persons compared to 32(40.0%) persons in the control subjects. The difference in the prevalence of ED in the two groups was statistically significant. ($\chi^2= 25.9$, df=1 ,p=0.00). The mean±SD BMI, WC and WHR was also statistically significantly higher in the study subjects compared to control subjects. BMI (26.2±4.0 kg/m² compared to 24.5±3.0kg/m²; p<0.001). WC (98.7±13.1cm compared to 90.5±10.5cm; p<0.001). WHR (1.0±0.0 compared to 0.9±0.1; p=0.02).

CONCLUSION: Our study showed that patients with T2DM had Hypogonadotrophic hypogonadism compared to the non-diabetics. Erectile dysfunction and visceral adiposity was more prevalent in men with T2DM compared to age-matched non-diabetics.