

Hormone Resource Guide: Testosterone

What is Gender Affirming Hormone Therapy?

• Gender Affirming Hormone Therapy, sometimes called HRT, can increase the level of testosterone in the body. Hormones tell your body how to work and they regulate many of your body's functions, like growth, sex drive, hunger, thirst, digestion, metabolism, blood sugar, cholesterol, fat placement, hair growth, breast growth, voice changes, bone growth. The effects of Testosterone as gender affirming hormone therapy in transmasculine and non-binary people, assigned female at birth can include:

- Increased muscle mass/strength
- Increased skin oiliness or acne
- Fat redistribution
- Stopping of menstrual period
- Increased sex drive
- Facial/body hair growth
- Deepening of voice
- Clitoral enlargement
- Vaginal dryness
- Scalp hair loss

• Changes may begin to occur after 1-6 months and up to 2-5 years after beginning to take testosterone. Some of the changes are permanent and irreversible.

• The rate at which you experience changes will also depend on your dosage—people may elect to use testosterone via a “lower dose” for a slower pace of some physical changes. Doses of testosterone vary from person to person and there is no, one right dose for everyone. Your dose and method of taking testosterone may be different from another person's.

• People taking testosterone as gender affirming hormone therapy are still encouraged to continue regular screening for cervical cancer/abnormal PAP speakers if they have a cervix. Mammograms may also be recommended.

• Gender affirming hormone therapy may affect someone's ability to be pregnant or overall fertility. Someone who wishes to become pregnant who has taken or is taking testosterone should discuss fertility support with a medical provider or gender –aware fertility specialist.

• Testosterone is not a form of birth control, nor does it prevent against STIs. People taking testosterone for gender affirmation should discuss appropriate birth control and STI prevention with their medical provider.

• Some people experience changes to their mood or energy while taking gender affirming hormones, these changes vary from person to person and may impact any existing mental health concerns. Please share any changes to your mental health with your medical provider.

• You can always stop taking transition-related medications at any time. If you have had a gender affirming hysterectomy, please talk with your medical provider about any necessary considerations before stopping hormones.

Possible Effects of Testosterone in AFAB Persons

Effect	Onset	Maximum	Reversible or Permanent
Skin Oiliness/acne	1 to 6 months	1 to 2 years	Reversible
Increased Muscle Mass/Strength	1 to 6 months	2 to 5 years	Reversible
Fat Redistribution	2 to 6 months	2 to 5 years	Reversible
Stopping of Menstrual Period	Variable	***	Reversible
Vaginal Dryness	3 to 6 months	1 to 2 years	Reversible
Facial/Body Hair Growth	6 to 12 months	4 to 5 years	Permanent
Scalp Hair Loss	6 to 12 months	**	Permanent
Clitoral Enlargement/Bottom Growth	3 to 6 months	1 to 2 years	Permanent
Deepening of Voice	Unknown	1 to 2 years	Permanent

** Prevention and treatment as recommended for people Assigned Male at Birth

*** Menorrhagia requires diagnosis and treatment by a gynecologist

What are the common gender affirming hormones for transmasculine and non-binary people?

Note: The dosage appropriate for you will be determined in discussion with your provider.

- Testosterone injectable:
 - Testosterone - 50-120mg weekly, subcutaneous (in fat) or intramuscular (in muscle)
 - Testosterone undecanoate - 1000 mg every 12 week
- Testosterone patch - 2-8mg/day
- Testosterone gel - 20-100mg/day

What is a hormone level check?

Hormone checks are a quick assessment of hormone levels in your body using a blood sample. We will provide you with your current hormone levels and a recommendation for you and your provider to consider in order to meet your desired goals.

Why do people check their hormone levels?

Checking testosterone levels helps guide dosing changes in line with an individual's goals and helps ensure safety. Transmasculine and non-binary people who are taking testosterone are at risk for erythrocytosis, a condition in which your body makes too many red blood cells. If your body makes too many red blood cells, you can be at risk of developing blood clots. Testosterone levels that are too high can also cause severe liver problems, high blood pressure, and heart disease.

How often do people need to check their hormone levels?

Testosterone levels should be checked every 3 months during the first year you start taking testosterone and then every 6-12 months.

When is the best time to have testosterone levels checked?

If you are using gels or patches, you may have your testosterone level checked at any time. If you are taking injectable testosterone, like testosterone enanthate or cypionate, you may have your testosterone level checked 3-4 days after your last injections.

What are ideal testosterone levels?

Everyone's body will process testosterone a little differently, and your "ideal" level may look different than someone else's; it will vary depending on your dosing, goals, and your baseline labs. Often a medical provider might indicate that testosterone levels for transmasculine or non-binary people could range between 300-1000 ng/dL midway through your injection cycle. Your result will be under Testosterone, serum on your lab report.

Self Injection Training Videos

Courtesy of Howard Brown

Use your smartphone to scan the QR codes to launch each video.

Step 1: Drawing Up
youtu.be/ApWiQH4rzlA



Step 2A: Intramuscular Injection or IM
youtu.be/DJd02xCNNc0



Step 2B: Subcutaneous Injection of SubQ
youtu.be/FgCCO9Gqt1Q



Links to all 3 steps in English and in Spanish
bit.ly/3BdH8UI

