

[REDACTED]

---

**From:** Informationservices  
**Sent:** 15 March 2016 14:46  
**To:** [REDACTED]  
**Subject:** FW: [ProQuest Alert] "finasteride syndrome"  
**Attachments:** ProQuestDocuments-2016-03-15 (4).pdf; ProQuestDocuments-2016-03-15 (3).pdf

**Follow Up Flag:** Follow up  
**Flag Status:** Completed

**Categories:** Data

Dear [REDACTED] I have run your search using the terms you have given and after 2011.  
Please find attached the results.  
Please let me know if this is useful or if you require further searching or full text articles.

Best wishes

[REDACTED]  
Information Services

---

**From:** [REDACTED]  
**Sent:** 11 March 2016 14:31  
**To:** Informationservices  
**Subject:** RE: [ProQuest Alert] "finasteride syndrome"

Dear [REDACTED]  
Please can you obtain the full text articles from the search below. It would be much appreciated.  
Also I have been asked to conduct a review of various adverse events associated with finasteride (particularly the brand Propecia/ 1 mg dose for male pattern baldness)  
Please can I ask for your help with this. Although I have been to a couple of study drop ins for Proquest I don't have confidence that I will pick up all articles.  
Would you possibly be able to do a search on my behalf?  
The topic is suicide, suicidal ideation, [severe depression]  
I guess safety, adverse events and finasteride will also form part of the search.  
Articles from the last 5 years, especially any reviews would be welcome.  
Many thanks in advance for your help  
The deadline for my review is, unfortunately quite soon [29<sup>th</sup> March]

BW  
[REDACTED]

---

**From:** Informationservices  
**Sent:** 07 March 2016 08:11  
**To:** [REDACTED]  
**Subject:** FW: [ProQuest Alert] "finasteride syndrome"

---

**From:** [REDACTED]  
**Sent:** 07 March 2016 00:02  
**To:** Informationservices  
**Subject:** [ProQuest Alert] "finasteride syndrome"



#### ProQuest Search alert

ProQuest Dialog will send alerts **Monthly** to:

**Email address:** [library@mhra.gsi.gov.uk](mailto:library@mhra.gsi.gov.uk)  
**Alert name:** Finasteride [REDACTED]  
**Alert ID:** 315183  
**Dates of coverage:** February 6 2016 through March 6 2016  
**Created by My Research account:** RELYAE (MHRA Information Services)  
**Subject:** "finasteride syndrome"

[View all search results](#) - in ProQuest Dialog

[Do more with documents in this alert](#) at ProQuest Dialog. See documents in available formats (e.g., Citation/Abstract, Full text, etc.). Export documents to PDF, RTF, XML, etc.

2 new documents found for "**finasteride syndrome**"

## References

Document 1 of 2

### **An observational retrospective evaluation of 79 young men with long-term adverse effects after use of finasteride against androgenetic alopecia**

**Author:** Chiriaco, G 1 ; Cauci, S 2 ; Mazzon, G 1 ; Trombetta, C 1 1 Urological Hospital Department, Department of Medical, Surgical and Health Sciences, University of Trieste, Trieste, Italy, Italy 2 Department of Medical and Biological Sciences, School of Medicine, University of Udine, Udine, Italy, Italy

**Publication info:** Andrology 4.2 (Mar 2016): 245-50.

[ProQuest document link](#)

**Abstract:** Concern regarding adverse effects of finasteride is increasing. We aimed to determine the type and frequency of symptoms in men having long-term sexual and non-sexual side effects after finasteride treatment (a condition recently called post-finasteride syndrome, PFS) against androgenetic alopecia (AGA). Subjects were recruited at the Urology Unit of the Trieste University-Hospital, and from a dedicated website. Out of 79 participants, 34% were white Italians, mean age was  $33.4 \pm 7.60$  years, mean duration of finasteride use was  $27.3 \pm 33.21$  months; mean time from finasteride discontinuation was  $44.1 \pm 34.20$  months. Symptoms were investigated by an ad hoc 100 questions' questionnaire, and by validated Arizona Sexual Experience Scale (ASEX) and Aging Male Symptom Scale (AMS) questionnaires. By ASEX questionnaire, 40.5% of participants declared getting and keeping erection very difficult, and 3.8% never achieved; reaching orgasm was declared very difficult by 16.5%, and never achieved by 2.5%. By the ad hoc questionnaire, the most frequent sexual symptoms referred were loss of penis sensitivity (87.3%), decreased ejaculatory force (82.3%), and low penile temperature (78.5%). The most frequent non-sexual symptoms were reduced feeling of life pleasure or emotions (anhedonia) (75.9%); lack of mental concentration (72.2%), and loss of muscle tone/mass (51.9%). We contributed to inform about symptoms of PFS patients; unexpectedly loss of penis sensitivity was more frequent than severe erectile dysfunction and loss of muscle tone/mass was affecting half of the subjects. Further studies are necessary to

investigate the pathophysiological and biochemical pathways leading to the post-finasteride syndrome.

**Links:** [360 Link to Full Text](#)

**Language:** English

**Language of abstract:** English

**Publication title:** Andrology

**Volume:** 4

**Issue:** 2

**Pages:** 245-50

**Publication type:** Journal

**ISSN:** 2047-2919 (ISSNLinking)

**eISSN:** 2047-2927

**Journal code:** 101585129

**Publisher location:** ENGLAND

**DOI:**

<http://dx.doi.org/10.1111/andr.12147>

**Date created:** 2016-03-04

**Document type:** Journal Article

**Accession number:** 26763726

**Copyright:** © 2016 American Society of Andrology and European Academy of Andrology.

**First available:** 2016-03-05

**Updates:** 2016-03-05

**Database:** MEDLINE®; 1946 to date (1946 - current)

---

Document 2 of 2

## **Emotional Consequences of Finasteride: Fool's Gold**

**Author:** Ganzer, Christine Anne 1 ; Jacobs, Alan Roy 1 1 Hunter-Bellevue School of Nursing, New York, NY, USA, USA [cganzer@hunter.cuny.edu](mailto:cganzer@hunter.cuny.edu)

**Publication info:** American journal of men's health (Feb 11, 2016).

[ProQuest document link](#)

**Abstract:** Androgenetic alopecia, the gradual, progressive loss of hair frequently results in psychological despair, in part related to changes in self-image. Current androgenetic alopecia treatments are limited to hair transplantation and medications that inhibit dihydrotestosterone, a potent androgen associated with follicular micronization. Users of finasteride, which prevents dihydrotestosterone production, report serious physical and emotional adverse effects,

collectively known as post-finasteride syndrome. Psychiatric illnesses and personality traits, specifically neuroticism influence emotional well-being. Limited research exists exploring the psychological corollaries of post-finasteride syndrome and preexisting Axis I and Axis II mental health conditions. The aim of this study was to explore how having a preexisting personal and/or familial history of a psychiatric diagnosis and certain personality traits may influence anxiety and depression among finasteride users. Participants in this online survey completed the Beck Depression Inventory, the Beck Anxiety Inventory, and Ten-Item Personality Inventory. An important finding in this study was that almost 57% (n = 97) of men reported a psychiatric diagnosis and 28% (n = 27) had a first-degree relative with a mental health disorder, of this group 17 only had a family history. Nearly 50% of the men surveyed reported clinically significant depression as evidenced by Beck Depression Inventory score and 34% experienced anxiety on the Beck Anxiety Inventory. There were no statistically significant trends in personality traits reported. Results provide evidence on the need to screen for psychiatric history and counseling patients about the potential psychological consequences of finasteride. Prescribing clinicians should carefully weigh the risk/benefit ratio with these patients.

**Links:** [360 Link to Full Text](#)

**Language:** English

**Language of abstract:** English

**Publication title:** American journal of men's health

**Publication type:** Journal

**ISSN:** 1557-9883 (ISSNLinking)

**eISSN:** 1557-9891

**Journal code:** 101287723

**Date created:** 2016-02-12

**Date revised:** 2016-02-13

**Document status:** Revised

**Document type:** JOURNAL ARTICLE

**Accession number:** 26868914

**Copyright:** © The Author(s) 2016.

**First available:** 2016-02-14

**Updates:** 2016-02-14

**Database:** MEDLINE®; 1946 to date (1946 - current)

---

**All ProQuest Dialog alert emails are sent from:** [REDACTED]. Tip: use this email address to set up a filter and direct ProQuest Dialog alert mail to a folder other than your inbox.

You will receive a reminder email when this alert is about to expire, allowing you to extend the alert.

[Delete this alert](#)

---

[Contact ProQuest](#)

Copyright &copy; 2016 ProQuest LLC. All rights reserved. [Terms and Conditions](#)

This email was scanned by the Government Secure Intranet anti-virus service supplied by Vodafone in partnership with Symantec. (CCTM Certificate Number 2009/09/0052.) In case of problems, please call your organisations IT Helpdesk.

Communications via the GSI may be automatically logged, monitored and/or recorded for legal purposes.