[redacted]

From: Informationservices
Sent: 10 January 2017 10:35
To: [redacted]
Subject: RE: [ProQuest Alert] "finasteride syndrome"
Attachments: sexual medicine.pdf

Dear [redacted]
Please find attached your article.
Best wishes
[redacted]
Information Services

From: [redacted]
Sent: 10 January 2017 09:20
To: Informationservices
Subject: RE: [ProQuest Alert] "finasteride syndrome"

Dear Team
Please can I have access to the full article if it is available?
Kind regards
[redacted]

From: Informationservices
Sent: 10 January 2017 09:16
To: [redacted]
Subject: FW: [ProQuest Alert] "finasteride syndrome"

From: [redacted]
Sent: 07 January 2017 00:01
To: Informationservices
Subject: [ProQuest Alert] "finasteride syndrome"

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

Email address:	library@mhra.gsi.gov.uk
Alert name:	Finasteride [redacted]
Alert ID:	315183
Dates of coverage:	December 6 2016 through January 6 2017
Created by My Research account:	RELYAE (MHRA Information Services)
Subject:	"finasteride syndrome"

References

Androgen Receptor (AR) Gene (CAG)n and (GGN)n Length Polymorphisms and Symptoms in Young Males With Long-Lasting Adverse Effects After Finasteride Use Against Androgenic Alopecia

Author: Cauci, Sabina 1 ; Chiriacò, Giovanni 2 ; Cecchin, Erika 3 ; Toffoli, Giuseppe 3 ; Xodo, Serena 4 ; Stinco, Giuseppe 5 ; Trombetta, Carlo 2 1 Department of Medical and Biological Sciences, School of Medicine, University of Udine, Udine, Italy, Italy sabina.cauci@uniud.it 2 Urological Hospital Department, Department of Medical, Surgical and Health Sciences, University of Trieste, Trieste, Italy, Italy 3 Experimental and Clinical Pharmacology Unit, CRO Aviano National Cancer Institute, Italy, Italy 4 Hospital Department of Gynecology and Obstetrics, University Hospital Santa Maria della Misericordia, Udine, Italy, Italy 5 Department of Experimental and Clinical Medicine, University of Udine, Dermatology Clinic, University Hospital Santa Maria della Misericordia, Udine, Italy, Italy

Publication info: Sexual medicine (Dec 23, 2016).

Abstract:

INTRODUCTION

Long-term adverse symptoms of men who used oral finasteride against androgenic alopecia have been recently described as post-finasteride syndrome (PFS).

AIM

To determine whether (CAG)n-rs4045402 and (GGN)n-rs3138869 polymorphisms in the androgen receptor (AR) gene are implicated in PFS.

METHODS

AR polymorphisms were studied according to PFS symptoms in 66 white participants (31.8% Italian, 28.8% American, and 39.4% other).

MAIN OUTCOME MEASURES

Symptoms were investigated by an ad hoc 100-item questionnaire and the Arizona Sexual Experience Scale and Aging Male Symptom Scale (AMS). (CAG)n and (GGN)n repeats were categorized as short ([CAG]9-19, [GGN]<23), medium ([CAG]20-24, [GGN]23), or long ([CAG]25-37, [GGN]>23).

RESULTS

Median age was 32 years, duration of finasteride use was 360 days, and time from finasteride discontinuation was 1,053 days. We observed several frequency differences in symptoms according to (CAG)n and (GGN)n repeat numbers. Three AMS items were worse for medium (GGN)23 than for long (GGN)>23 carriers and one item was worse for short (GGN)<23 carriers. The AMS item for decrease in sexual desire or libido was worse for short (CAG)9-19 carriers than for medium (CAG)20-24 carriers. Through the ad hoc questionnaire, significant findings in (CAG)n and/or (GGN)n repeats were obtained for penile discomfort, loss of scrotal sensitivity, scrotal discomfort, less pubic hair, loss of perceived perineal fullness, increased sperm density, involuntary muscle spasms, loss of muscle tone, increased weight (>2 kg), increased skin dryness, and onset of symptoms after finasteride use.

CONCLUSION

This study showed that short and/or long (CAG)n and (GGN)n repeats had different frequencies according to symptoms reported by patients with PFS, likely reflecting the vast array of genes modulated by the AR. This study showed a U-curvilinear profile of (CAG)n repeats for skin dryness symptoms, where the two extremes exhibited a worse condition than medium repeats. Further studies are necessary to investigate the PFS pathophysiology using a precision medicine approach.

Links: Link to full text

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