REDUCED PLASMA TESTOSTERONE FOLLOWING SPIROLACTONE IN MAN

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In the male intravenous administration of spirolactone (canrenolate-potassium) causes a rapid and marked decrease of the plasma testosterone concentration without any simultaneous change of plasmastosterone (Dymling, Nilsson & Hökfelt, Acta endocr. 70 /1972/
104). In principle, this effect of spirolactone could be brought
about via an effect on the pituitary, the testicles, testosterone
about via an effect on the metabolism of testosterone. So far, the underprotein binding or the metabolism of testosterone. So far, the underlying mechanism has not been clarified. The following experiments
the performed to obtain further information in this respect.

Plasma FSH and LH concentrations were studied before and after intravenous injection of spirolactone in 3 menopausal and 1 fertile woman, 1 normal male, 1 male with Addison's disease and one with hypogonadism. There was no change in LH in any of the patients. FSH remained unaltered in the females but tended to increase in the males.

Two males, one suffering from primary hypogonadism and one from tanhypopituitarism, under chronic treatment with testosterone were studied 2-4 days after their monthly intramuscular injection of 20 mg of a depot-preparation of testosterone-propionate. In both patients the plasma concentration of testosterone decreased rapidly following the intravenous injection of spirolactone, without any timultaneous change in plasma androstenedione.

The reported experiments are interpreted to demonstrate, that spirolactone causes a rapid change in the metabolic clearance of testesterone without simultaneous conversion to androstenedione.