

Transgender Female to Male Testosterone Hormone Therapy Information

Trans Care BC: <http://www.phsa.ca/transcarebc/>

- Care & Support → Peer Support Directory
- Hormone Readiness Assessment: <http://www.phsa.ca/transcarebc/hormones/readiness>

Testosterone is commonly prescribed for the female-to-male spectrum who wish to become more masculine to reduce gender dysphoria and facilitate a more masculine gender presentation. While there are risks associated with taking testosterone, when appropriately prescribed it can greatly improve mental health and quality of life. Informed consent is used to make sure you know what to expect from hormone therapy, including physical and emotional changes, side effects, and potential risks. Each person responds differently to hormone therapy and the amount of change varies from person to person.

Masculinizing effects of hormone therapy:

Possible Effect	Onset	Maximum effect
Skin oiliness / acne	1-6 months	1-2 yrs
*Facial/body hair growth	6-12 months	4-5 yrs
*Scalp hair loss	6-12 months	
Increased muscle mass/strength	6-12 months	2-5 yrs
Fat redistribution	1-6 months	2-5 yrs
Cessation of menses	2-6 months	
Decreased fertility	Variable	Variable
*Clitoral enlargement	3-6 months	1-2 yrs
Vaginal atrophy	3-6 months	1-2 yrs
*Deepening of voice	6-12 months	1-2 yrs
Increase in libido	1-6 months	
Mood changes	Variable	Variable

*Change is permanent and will remain even if hormone therapy is stopped.

Medical conditions that can be exacerbated / worsened by hormone therapy:

- High risk of: breast or uterine cancer, polycythemia (increased red blood cells), scalp hair loss, sleep apnea.
- Moderate to high risk of: liver dysfunction, increased cholesterol (which may increase heart disease/stroke risk).
- Long-term medical effects and safety of masculinizing hormone therapy are not fully understood, and there may be long-term risks that are not yet known.
- As long as breast and uterine tissue are present, there remains the risk for breast, cervical, and uterine cancer. Screening provided by the primary care provider, including Pap smears and breast imaging, is required as per usual guidelines.