

Benign prostatic hyperplasia is defined as a disorder with different treatment methods depending on the symptomatology, the response to medicament therapy, and the occurrence of complications. Pharmacological treatment of benign prostatic hyperplasia involves the use of mainly two groups of drugs: alpha-1 blockers and 5 a-reductase inhibitors (5ARI). Side effects commonly occur during treatment with 5ARIs such as erectile dysfunction, decreased libido, and deterioration of psychological well-being. 5a-reductases play an important role in the biotransformation of steroids into neurosteroids as a very important biological process in establishing good mental status and psychological well-being. By inhibiting 5a-reductase, 5ARIs not only inhibit the conversion of testosterone to dihydrotestosterone but also affect the reduced synthesis of neurosteroids that results in varying degrees of mood disorders. One of the reasons for 5ARI side effects seems to be decreased levels of the prohormone dehydroepiandrosterone whose reference values are adjusted to the age. This book stresses its importance in the occurrence of side effects of 5ARIs therapy in patients with BPH.



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ASSOCIATION OF HEALTH WELL-BEING AND 5ARI THERAPY IN PATIENTS WITH BPH



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