Letter to the Editor: Comment on Gaspar AP, Brandão CM, Lazaretti-Castro M. Bone mass and hormone analysis in spinal cord injury patients: evidences for a gonadal axis disruption ••

Felice Francavilla, Arcangelo Barbonetti

The Journal of Clinical Endocrinology & Metabolism, Volume 100, Issue 2, 1 February 2015, Page L20, https://doi.org/10.1210/jc.2014-4164

Published: 01 February 2015 Article history ▼

Issue Section: Correspondence

In the article by Gaspar et al (1), 29 subjects with spinal cord injury were compared with 17 age-matched, able-bodied controls. francavi@cc.univaq.it

The authors reported a significant correlation between free testosterone (T) and 25-hydroxyvitamin D in the 17 controls but not in men with spinal cord injury.

The main concern that arises from this study is represented by the reported levels of free T. Free T was calculated by total T, SHBG, and albumin. Using this determination, the Endocrine Society indicates as the lower limit of normal range approximately 50–90 pg/mL (170–310 pmol/L) (2). In the European Male Aging Study, late-onset hypogonadism was defined by the presence of at least three sexual symptoms associated with a free T level of less than 64 pg/mL (220 pmol/L) (3).

Inexplicably, Gaspar et al (1) indicated reference values for free T ranging from 13 to 35 pg/mL. Therefore, all subjects, including controls, exhibited free T levels in the range of overt androgen deficiency, according to the criteria of the Endocrine Society and the European Male Aging Study. Furthermore, the reported values of free T are conflicting with those of total T, from which they derived. A mistake in the measure unit does not seem to be the case.

A plausible explanation would be appreciated.

Disclosure Summary: Authors have nothing to disclose.

References

 Gaspar AP, Brandão CM, Lazaretti-Castro M. Bone mass and hormone analysis in spinal cord injury patients: evidences for a gonadal axis disruption. J Clin Endocrinol Metab. 2014;99(12):4649–4655.

Google Scholar Crossref PubMed

 Bhasin S, Cunningham GR, Hayes FJ, et al. . Testosterone therapy in men with androgen deficiency syndromes: an Endocrine Society clinical practice guideline. J Clin Endocrinol Metab . 2010;95(6):2536–2559.

Google Scholar Crossref PubMed

 Wu FC, Tajar A, Beynon JM, et al. . Identification of late-onset hypogonadism in middle-aged and elderly men. N Engl J Med . 2010;363(2):123–135.

Google Scholar Crossref PubMed

Copyright © 2015 by the Endocrine Society