## BI-POLAR? BE CAREFUL WITH TESTOSTERONE! Contributed by the caregiver of a PC patient with both having been unaware that the patient was living with a bi-polar issue

Disclaimer: Please recognize that I am not a Medical Doctor. I have been an avid student researching and studying prostate cancer as a survivor and continuing patient since 1992. I have dedicated my retirement years to continued research and study in order to serve as an advocate for prostate cancer awareness, and, from a activist patient's viewpoint, to help patients, caregivers, and others interested develop an understanding of prostate cancer, its treatment options, and the treatment of the side effects that often accompany treatment. Readers of this paper must understand that the comments or recommendations I make are not intended to be the procedure to blindly follow; rather, they are to be reviewed as my opinion, then used for further personal research, study, and subsequent discussion with the medical professional/physician providing prostate cancer care.

Any sort of steroid can exacerbate symptoms of bi-polar disorder. This includes any type of cortisone including hydrocortisone, which is generally prescribed along with ketoconazole. Prednisone and dexamethasone usually accompany chemotherapy, for example Taxotere and Jevtana.

Oxcarbazepine (which is a bi-polar med) cannot be taken in conjunction with Jevtana while it is OK with taxotere. Oxcarbazepine is listed in a grouping of medications that need to be avoided while on Jevtana. In its place for this patient, the psychiatrist substituted Lithium which, on a good note, also has a tendency to increase white blood cells. Depletion of white blood cells is one of many possible serious side effects to chemo.

This caregiver as well as her patient husband had no idea that he was bi-polar. He comes from a wonderful family with two very caring parents. He is the oldest of five siblings. His mother died a few years ago and his dad is 90 and going strong. The caregiver has always had a very close and loving relationship with both his parents and his siblings. This patient has always been family first and a very caring dad. Not knowing anything about mental illness, this caregiver assumed it was just the patient's personality when he had anger flare-ups and she tried to side-step issues that might cause anger.

There were flare-ups over the years (they will be married 40 years fall 2011). Not having any prior experience with mental illness, the caregiver was clueless about

the patient's mental condition until he began taking monthly shots of testosterone replacement therapy in '04. His temper increased and his behavior got worse. He was diagnosed with PCa in Jan. '06. The caregiver started going to counseling in the fall of '06 and got the patient to see a psychiatrist in Feb' '07. To her surprise and relief, the patient was immediately put on medication. (A psychologist is a Ph. D., while a psychiatrist is an M.D. As a medical doctor, the psychiatrist is able to evaluate and prescribe psychiatric medications). It turns out his behavior over the years was not just his nature. He had lived in what is called a "hypo-manic" state, with a few highly manic episodes. The testosterone put him over the edge. His psychiatrist told them that he was a billboard for why no one should ever get testosterone replacement.

The caregiver's alarm over the use of testosterone for PCa includes the fact that oncologists, urologists, etc., are not psychiatrists and they may not understand the psychiatric consequences. This patient was transferred from oxcarbazepine to Lithium prior to beginning the Jevtana regimen. Any transference of psychiatric medicine is a very carefully choreographed substitution which should only be done under the guidance and monitoring of an established psychiatrist who is familiar with the patient.

One must also be on the lookout for <u>drug interactions</u> between PCa drugs and those taken for other medical conditions such as diabetes, high blood pressure, heart medications, etc.

Please take time to review the following if considering Testosterone Replacement Therapy: <u>http://tinyurl.com/nsu63p</u>