TESTOSTERONE MYTHS

- I will become a different person once I start taking testosterone.

 Testosterone will change some things about you, but we can be sure that you won't wake up one day and be unrecognizable to yourself or other people in your life. Many people report feeling differently about themselves, their relationships, or they may have a different outlook on life, but testosterone will make not turn you into a different person; it's just not that powerful.
- Taking testosterone will give me cancer.

 There is no medical evidence to suggest that testosterone increases risk of ovarian cancer. It is no longer recommended that all trans/non-binary people on testosterone get their uterus and ovaries removed within 5 years. If you choose not to have your uterus or ovaries removed, you will need to get the recommended cancer screenings for those parts of your body.
- I will become uncontrollably angry and mean if I take testosterone. Testosterone will cause "roid rage."

Lots of people who are thinking about taking testosterone are worried about this, however taking testosterone for transition or gender affirming purposes is not the same as bodybuilders taking steroids. Some people have said they feel more irritable or short tempered for a period of time after starting testosterone. Other people have said that they feel more calm once they start testosterone. When you first start testosterone you might experience some changes in your mood, and this is normal. Talk to your health care provider if you are having difficulty dealing with these mood changes.

Changes will happen faster if I take twice my dose.

Taking twice the dose you are prescribed or taking testosterone more often than prescribed could actually slow your changes. If you take too much testosterone your body could turn the extra testosterone into estrogen which would slow your changes. It can be dangerous to take more testosterone than you are prescribed and you should follow the dose prescribed by your health care provider. If you are having an issue with the dose you are on, please talk to your provider about changing your dose, but do not make these changes on your own.

I'll grow taller on testosterone.

If you have already gone through put

If you have already gone through puberty and you are not still growing, you won't grow taller on testosterone, but you might stand up straighter if you're feeling better about yourself, which will make you seem taller. If you are still growing, you may have a growth spurt once you start testosterone.

L can't get pregnant if I'm taking testosterone.

This depends on what equipment/bits/parts you have. If you still have your ovaries and uterus, it is possible to get pregnant while taking testosterone even if your period has stopped. The only way to prevent pregnancy if you are having sex with people who produce sperm is with birth control, such as condoms.

I can't take HIV meds or PrEP and hormones at the same time.

You can take HIV meds or PrEP and hormones at the same time! There are no medical reasons why someone cannot take HIV meds and PrEP at the same time they are on hormones. There are a few HIV meds that you shouldn't take at the same time as hormones, so make sure that your HIV doctor knows you are on hormones.

Testosterone will keep me from getting STDs.

Testosterone does not prevent you from getting HIV or other STDs. You will still need to use condoms, dental dams, PrEP, gloves, and/or lube if you want to protect yourself when you're having sex. If you have questions about safe sex practices, including PrEP, ask your health care provider. Here are some additional online resources you can check out too! **HRC:** Safer Sex for Trans Bodies

http://www.hrc.org/resources/safer-sex-for-trans-bodies

Primed 2: A Sex Guide for Trans Men Into Men

http://www.catie.ca/en/resources/primed-sex-guide-trans-men-men

PrEP: Is Taking PrEP the Right Choice for You?

http://www.projectinform.org/pdf/prep_msm.pdf

Testosterone will make my breasts disappear completely.

Testosterone causes fat redistribution so it's possible that testosterone could decrease fatty tissue in the breast area, but testosterone alone cannot give you the same results as surgical interventions. For people with very small breasts however, fat redistribution could be enough that they feel they don't need surgery, but this is not the case for most people.

SOURCE: Center of Excellence for Transgender Health, Department of Family and Community Medicine, University of California San Francisco. Guidelines for the Primary and Gender-Affirming Care of Transgender and Gender Nonbinary People; 2nd edition. Deutsch MB, ed. June 2016. Available at www.transhealth.ucsf.edu/quidelines.



