## **Unit IV – Problem 12 – Physiology: Male Sex Hormones**



### - Synthesis of testosterone:

- Testosterone is synthesized and secreted by Leydig cells. Notice that these cells do not contain 21β-hydroxylase or 11β-hydroxylase.
- LH-hormone increases testosterone synthesis by stimulating cholesterol desmolase (the first step in the pathway).
- The enzyme 5α-reductase converts testosterone to its active form →dihydrotestosterone. Notice that 5α-reductase inhibitors (e.g. Finasteride) are used to treat benign prostatic hyperplasia.

### - Regulation of testes:

• **Hypothalamic control**: GnRH stimulates the anterior pituitary gland (adenohypophysis) to secrete FSH and LH.

# • Anterior pituitary gland:

- ✓ FSH acts on the sertoli cells to maintain spermatogenesis.
- ✓ LH acts on the leydig cells to promote testosterone synthesis which is reinforcing the spermatogenic effects of FSH in sertoli cells.

# • Negative feedback control:

- ✓ Testosterone inhibits the secretion of LH:
  - ❖ *Directly*: by inhibiting the release of LH from the anterior pituitary.
  - ❖ *Indirectly*: by inhibiting the release of GnRH from the hypothalamus.
- ✓ Inhibin (produced by the sertoli cells) inhibits the secretion of FSH.

# - Actions of testosterone and dihydrotestosterone:

#### • Testosterone:

- ✓ Differentiation of male internal genitalia (epididymis, vas deferens and seminal vesicles).
- ✓ Pubertal growth spurt and epiphyseal closure.
- ✓ Libido
- ✓ Spermatogenesis in sertoli cells.
- ✓ Deepening of voice.
- ✓ Increased muscle mass (because testosterone is an anabolic hormone).

#### • Dihydrotestosterone:

- ✓ Differentiation of male external genitalia (penis, scrotum and prostate).
- ✓ Male hair pattern.
- ✓ Male-pattern baldness.
- ✓ Sebaceous gland activity.
- ✓ Growth of prostate.

### - Androgen insensitivity disorder (also known as: testicular feminization syndrome):

- Caused by: deficiency of androgen receptors.
- Characterized by: female external genitalia with no internal genital tract.
- Notice that testosterone levels are elevated due to the lack of testosterone receptors in the anterior pituitary (lack of feedback inhibition).

### - Puberty (male and female):

• **Stimulated by**: pulsatile GnRH release → FSH and LH are, in turn, secreted in pulsatile fashion.

# - Variation in FSH and LH levels over the life span (male and female):

Childhood	Hormone levels are lowest (FSH > LH)
Puberty	Hormone levels increase (LH > FSH)
Senescence	Hormone levels are highest (FSH > LH)