

Not surprisingly, 25 and 50 mg of Testosterone per week didn't "replace" what the GnRH had shut down. 125 mg/week seemed to keep total and free Testosterone at an even keel, while 300 mg and 600 mg/week doses led to roughly a doubling and quadrupling of Testosterone levels. LH was suppressed at all doses while SHBG increased only with the .

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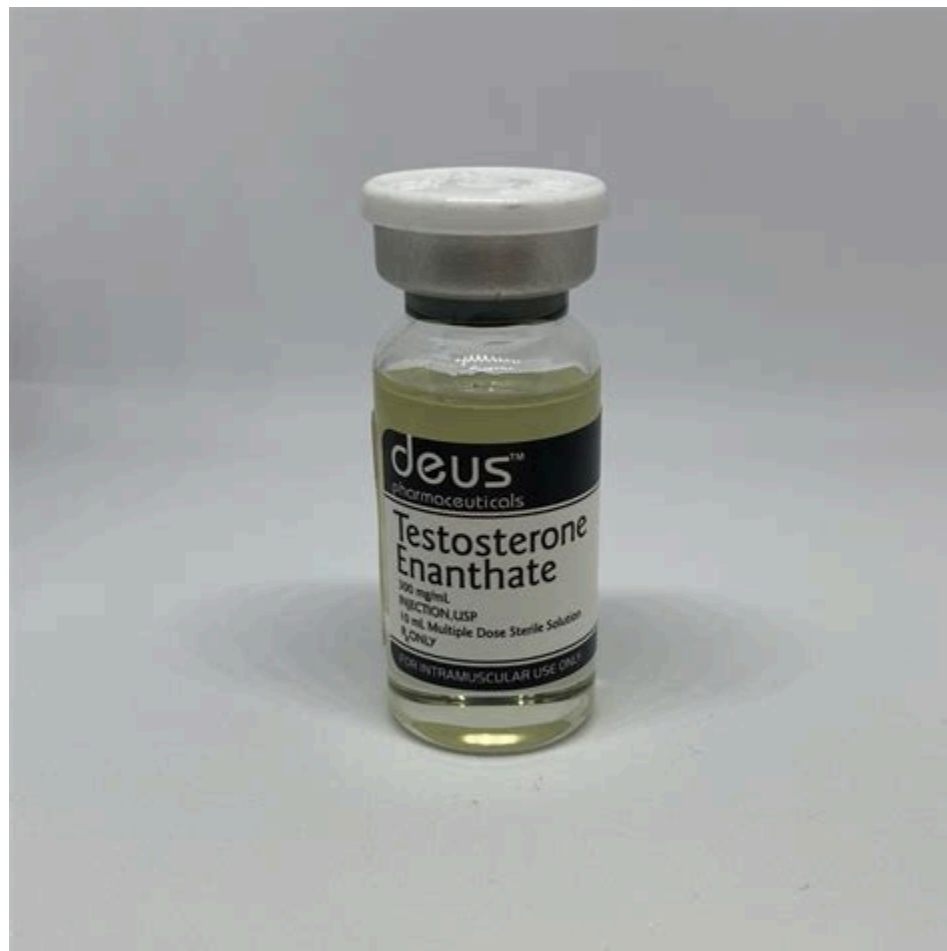
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**300mg a week for the first 4-5 months and increased to 500mg a week .**



While there is no consensus as to what serum testosterone level to initiate TRT (<200 versus <300 ng/dL, for example), it is agreed that low levels be verified with repeat testing with early morning samples ( 3 ). In practice, initiation of TRT is usually driven by patient symptoms in addition to low serum level.

## 300 mg Of Testosterone Per Week | Results, Side Effects



Different rules than the U. S. 300mg. a week isn't a replacement long-term dose. You could run it full-time, probably with no bad sides, but from the standpoint of taking testosterone to replace youthful levels, 300 mg. is way beyond that. Nickto idowhatican September 20, 2009, 9:19am 5

## 300mg of Test/Week. What Can I Expect? - T NATION



Usual Adult Dose for: Hypogonadism - Male Breast Cancer-Palliative Usual Pediatric Dose for: Delayed Puberty - Male Additional dosage information: Renal Dose Adjustments Liver Dose Adjustments Dose Adjustments Precautions Dialysis Other Comments Usual Adult Dose for Hypogonadism - Male IM INJECTION:

# Comparative assessment of outcomes and adverse effects using . - Nature

UR: Your Sexual Medicine Journal (2022) 34:558–563  
https://doi.org/10.1038/s41443-021-00449-0

ARTICLE



## Comparative assessment of outcomes and adverse effects using two different intramuscular testosterone therapy regimens: 100 mg IM weekly or 200 mg IM biweekly

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Received: 14 September 2020 / Revised: 23 April 2021 / Accepted: 10 May 2021 / Published online: 13 July 2021  
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### Abstract

This study aimed to compare the change in levels of several laboratory values and the development of adverse events using two commonly used intramuscular testosterone therapy regimens. Men were included if they were 18 years or older and received one of the following testosterone therapy regimens: 100 mg intramuscular once weekly or 200 mg intramuscular once every other week. Primary outcomes were relative changes in total testosterone, free testosterone, estradiol, prostate-specific antigen, and hematocrit at 6 months after initiation of testosterone therapy. Secondary outcomes were any significant rises in estradiol, hematocrit, prostate-specific antigen, and any other treatment-related adverse events requiring cessation of testosterone therapy. A total of 263 men were enrolled. In a subanalysis of men who had a baseline hematocrit below 54% before intramuscular testosterone therapy initiation, we found the following: men who received 100 mg weekly injections were significantly less likely to have hematocrit levels rising above 54% (1/102 (1%) vs. 4/51 (8%);  $p = 0.023$ ). No significant differences were recorded in the increase in total testosterone, free testosterone, prostate-specific antigen, and estradiol levels between both groups. A higher average serum testosterone over the dosing interval seen with the 200 mg regimen appears to be associated with a higher risk of erythrocytosis.

### Introduction

Throughout the male lifespan, testosterone plays a critical role in sexual function. An increasing body of evidence suggests that testosterone also regulates multiple physiological processes, such as body development, bone metabolism, and hematopoiesis [1, 2]. The prevalence of hypogonadism varies amongst study populations and by geographical location, and has a reported range of about 12–38%, depending on the study groups chosen and on the

methodology for measuring testosterone and cutoffs for testosterone level [3].

Testosterone therapy (TTh) aims to restore testosterone levels and reverse the signs and symptoms of hypogonadism. Testosterone can be delivered via injectables, topical, sub-dermal, intranasal, or oral routes [4]. Currently, intramuscular (IM) injectable testosterone esters (enanthate and cypionate) are amongst the most used formulations [5]. Testosterone cypionate are slow-acting esters with a release time between 8 and 10 days and are typically injected on a weekly or biweekly basis [6]. While the impact of testosterone administration on prostate-specific antigen (PSA) and prostate cancer (PCa) is debatable, multiple studies have shown that TTh does not increase PSA levels in men being treated for hypogonadism, except when it is given IM (very minimal increase), and based on evidence in the literature, TTh does not appear to increase the risk of PCa incidence among these men [7]. Another concern with TTh is secondary erythrocytosis and its potential impact on blood viscosity, which is most notable with injectables [8].

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EXAMPLE Dose: If I want to take 300 mg per week divided into two shots, and the oil is 250mg per mil, how much would I need to take for each shot?  $300 \text{ mg} / 250 = 1.2 \text{ mil per week}$  Answer: I would want to inject 0.6 milliliters per shot, twice per week to reach the desired TRT dose.

## Pharmacology of testosterone replacement therapy preparations

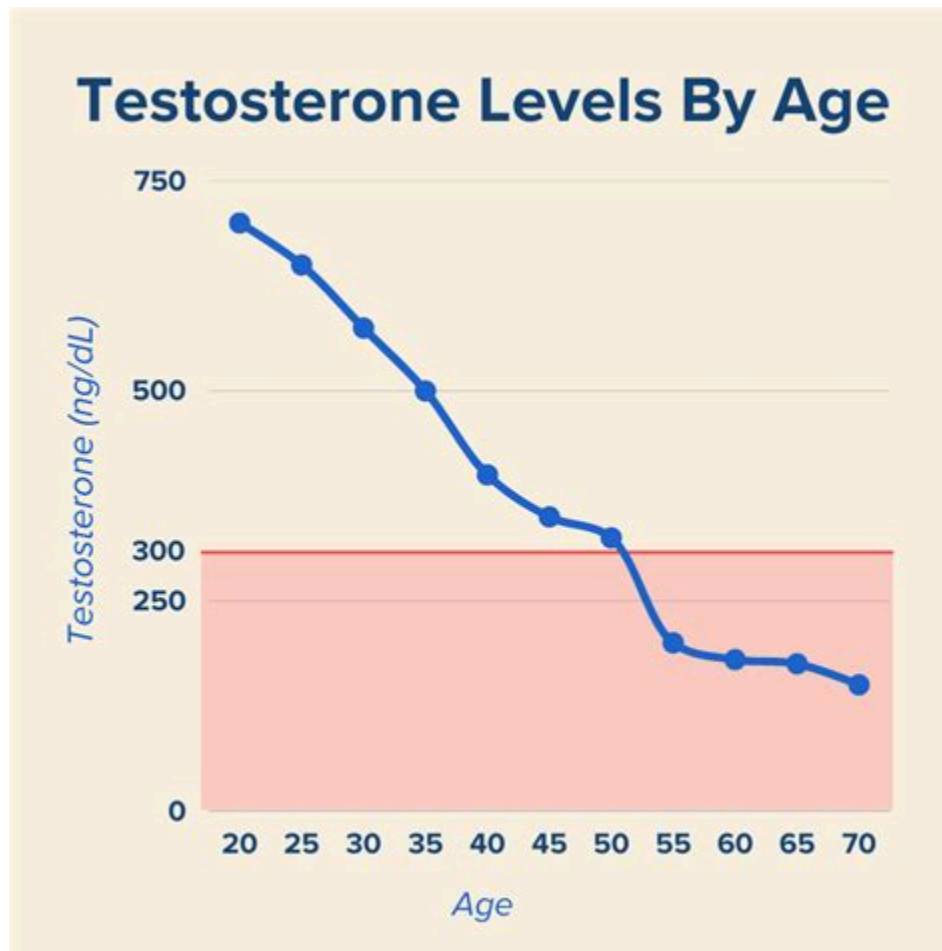
**TABLE 2**  
**FDA-approved testosterone formulations<sup>2</sup>**

Formulation	Trade names	Dosing, route, and administration	Benefits	Potential adverse effects or drawbacks
Testosterone cypionate, testosterone enanthate		75-100 mg IM every week or 150-200 mg IM every 2 weeks	Short-acting preparation that allows for drug withdrawal in the event of adverse effects	Fluctuation of testosterone levels
Testosterone undecanoate	Aveed	750 mg IM followed in 4 weeks by another 750 mg IM, then 750 mg every 10 weeks thereafter	Steady-state testosterone levels without fluctuation	Long-acting formulation; does not allow for rapid discontinuation of therapy if adverse effects develop
Transdermal and transmucosal testosterone	Androderm (patch)	A single, 2-6-mg patch daily	Most closely mirrors physiologic testosterone levels	May cause skin irritation; risk of transfer to partner or children
	Axiron (axillary)	30-120 mg daily		
	AndroGel, Testim, Vogelxo (gel)	50-100 mg daily applied to shoulders, arms, or abdomen		
	Fortesta (gel)	10-70 mg daily applied to thighs		
	Natesto (intranasal)	11 mg 3 times daily		
	Striant (buccal)	30 mg every 12 hours		
Oral testosterone	Androxy (fluoxymesterone)	5-20 mg daily in a single or divided doses	Daily oral dosing	Difficult to obtain normal physiologic levels; risk of hepatotoxicity
	Android, Methitest, Testred (methyltestosterone)	10-50 mg daily		
Subdermal testosterone pellets	Testopel	150-450 mg implanted subcutaneously every 3-6 months	Long duration of action	Infection at implantation site; explantation

IM, intramuscular.

Generally, a starting dosage of 50 to 100 milligrams of testosterone per week is recommended, with adjustments made as necessary based on lab tests and symptoms. Typical TRT Frequency The frequency of TRT injections also varies, but most patients receive injections once or twice a week.

## Testosterone Levels: Normal Levels by Age, Gender, and More



300 mg test e ( 300mg testosterone) a week too much or not? Is that still high dose TRT (Testosterone Replacement Therapy)? How much is too much (dosage)? Are there any side effects from.

## Testosterone Dosage Guide + Max Dose, Adjustments - Drugs

Generic name	Trade name	Dosage
<b>Injectables</b>		
Testosterone cypionate	Depo-testosterone	200-400 mg every 2 weeks
Testosterone enanthate	Delatestryl	100-400 mg every 1-4 weeks
<b>Oral Medication</b>		
Testosterone undecanoate	Andriol pms-Testosterone	Initial dose of 120-160 mg per day in 2 divided doses
<b>Transdermals</b>		
Testosterone patch	Androderm	2.5 or 5 mg per day
Testosterone gels	AndroGel Testim	5-10 g of gel per day

Safe to run 300mg test cyp for life as trt? Getting labs done at end of this month. Checking hematocrit, making sure E2 is in line. I have pharmaceutical HCG that I haven't started yet, because fertility is a must. Checking SHBG and will re-evaluate dosage if current dose of test expends too much.

### Is 300 Mg Test a Week Too Much? - YouTube



50 to 400 mg every one to four weeks: 100 mg weekly or 200 mg every two weeks: 200 mg per mL: \$115 (\$130) for one 10-mL vial — Testosterone enanthate (Delatestryl) 50 to 400 mg every one to four .



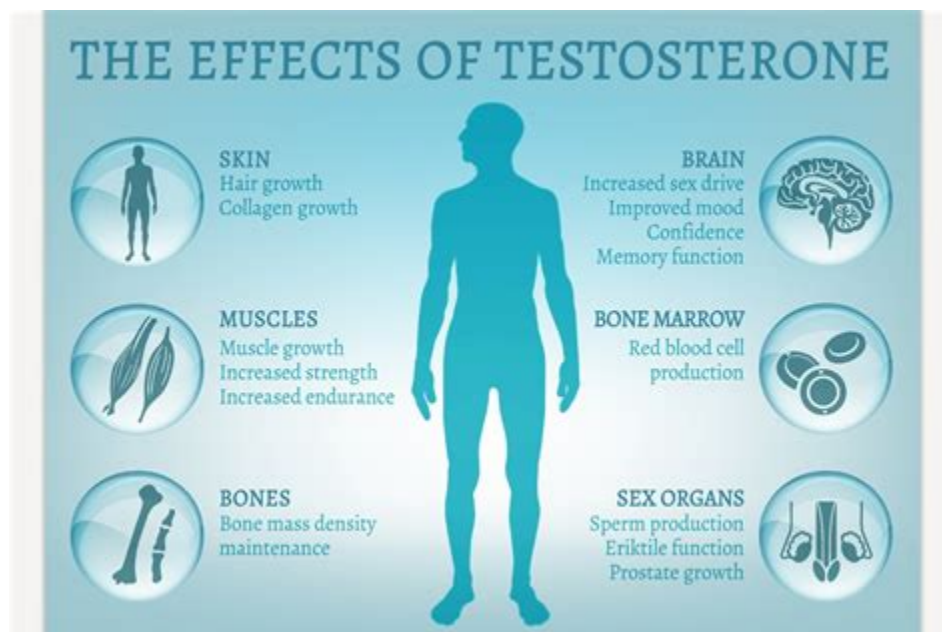
## Testosterone Therapy: Review of Clinical Applications | AAFP

BEST PRACTICES IN ENDOCRINOLOGY: RECOMMENDATIONS FROM THE CHOOSING WISELY CAMPAIGN	
<i>Recommendation</i>	<i>Sponsoring organization</i>
Do not prescribe testosterone or testosterone products to men contemplating or attempting to initiate pregnancy.	American Society for Reproductive Medicine
Do not prescribe testosterone to men with erectile dysfunction who have normal testosterone levels.	American Urological Association
Do not prescribe testosterone therapy unless there is laboratory evidence of testosterone deficiency.	American Society for Clinical Pathology
Do not prescribe testosterone therapy unless there is biochemical evidence of testosterone deficiency.	The Endocrine Society/ American Association of Clinical Endocrinologists

*Source: For more information on the Choosing Wisely Campaign, see <http://www.choosingwisely.org>. For supporting citations and to search Choosing Wisely recommendations relevant to primary care, see <http://www.aafp.org/afp/recommendations/search.htm>.*

A simple blood test can help you determine if your levels are in the normal range, which are 300-1,000 ng/dL for men and 15-70 ng/dL for women. Treatments are available if your testosterone levels are abnormal. Testosterone Blockers for Transgender Women and Transfeminine People. Testosterone for Transgender Men and Transmasculine People.

### Testosterone Therapy Effects: What to Expect With TRT - Men's Health



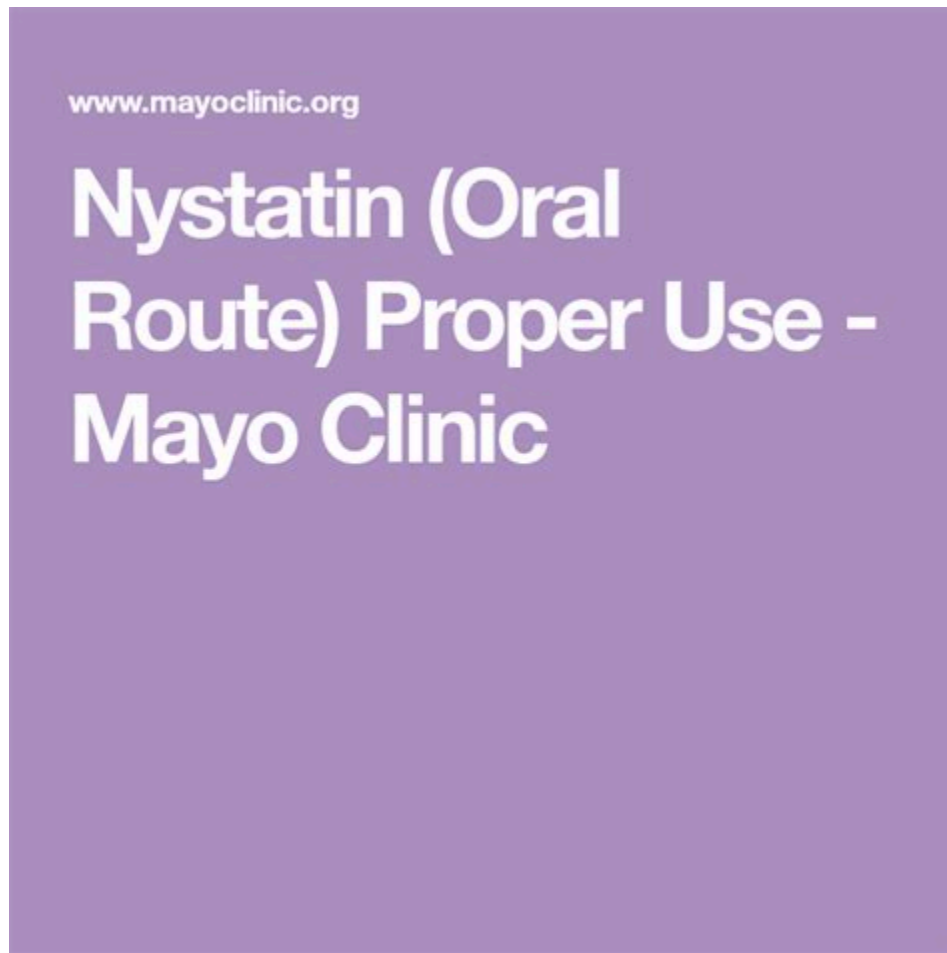
33 References Dr. Mike Jansen Last Updated February 28, 2023 100% Testosterone Curious about 300 mg of testosterone per week results? Do you wonder if 300 mg testosterone cycles are appropriate for beginners, and more experienced testosterone users? Then you've come to the right place.

**r/Testosterone on Reddit: 220lbs in both pics, 12 weeks apart (300mg .**



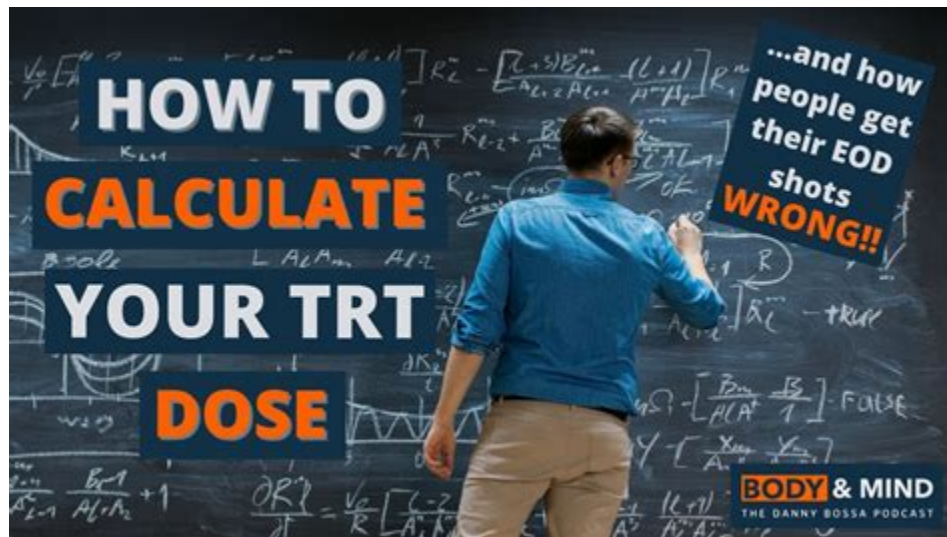
A true beginner, on the other hand, can make plenty of gains with natural levels of testosterone. From the medical standpoint, 600 mg/week has been shown to be quite safe. Furthermore, in double blind studies and so forth, doses of less than 300 mg/week generally have resulted in nothing. These studies have usually been with athletes training .

## Testosterone (Oral Route) Proper Use - Mayo Clinic



For oral dosage form (Jatenzo® capsules): Adults—Dose is based on the testosterone concentration level in your blood and must be determined by your doctor. At first, the dose is 237 milligrams (mg) taken 2 times a day, in the morning and in the evening. Your doctor may adjust your dose as needed. However, the dose is not more than 396 mg per .

## Testosterone Dosage Calculator - Figure Out Your TRT Dose



What dosage should I use? What's the best testosterone cypionate cycle for a beginner, intermediate, or advanced user? Our team has organized the best studies on this anabolic compound to give you science-based answers to all of your most important questions.

# The Effects of Supraphysiologic Doses of Testosterone on Muscle Size .

## The New England Journal of Medicine

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VOLUME 335

JULY 4, 1996

NUMBER 1



### THE EFFECTS OF SUPRAPHYSIOLOGIC DOSES OF TESTOSTERONE ON MUSCLE SIZE AND STRENGTH IN NORMAL MEN

SHALENDER BHASIN, M.D., THOMAS W. STORER, Ph.D., NANCY BERMAN, Ph.D., CARLOS CALLEGARI, M.D.,  
BRENDA CLEVINGER, B.A., JEFFREY PHILLIPS, M.D., THOMAS J. BUNNELL, B.A., RAY TRICKER, Ph.D., AIDA SHRAD, R.Ph.,  
AND RICHARD CASABURI, Ph.D., M.D.

#### ABSTRACT

**Background** Athletes often take androgenic steroids in an attempt to increase their strength. The efficacy of these substances for this purpose is unsubstantiated, however.

**Methods** We randomly assigned 43 normal men to one of four groups: placebo with no exercise, testosterone with no exercise, placebo plus exercise, and testosterone plus exercise. The men received injections of 600 mg of testosterone enanthate or placebo weekly for 10 weeks. The men in the exercise groups performed standardized weight-lifting exercises three times weekly. Before and after the treatment period, fat-free mass was determined by underwater weighing, muscle size was measured by magnetic resonance imaging, and the strength of the arms and legs was assessed by bench-press and squatting exercises, respectively.

**Results** Among the men in the no-exercise groups, those given testosterone had greater increases than those given placebo in muscle size in their arms (mean  $\pm$  SE) change in triceps area,  $424 \pm 104$  vs.  $-81 \pm 109$  mm<sup>2</sup>;  $P < 0.05$ ) and legs (change in quadriceps area,  $607 \pm 123$  vs.  $-131 \pm 111$  mm<sup>2</sup>;  $P < 0.05$ ) and greater increases in strength in the bench-press ( $9 \pm 4$  vs.  $-1 \pm 1$  kg,  $P < 0.05$ ) and squatting exercises ( $16 \pm 4$  vs.  $3 \pm 1$  kg,  $P < 0.05$ ). The men assigned to testosterone and exercise had greater increases in fat-free mass ( $6.1 \pm 0.6$  kg) and muscle size (triceps area,  $501 \pm 104$  mm<sup>2</sup>; quadriceps area,  $1174 \pm 91$  mm<sup>2</sup>) than those assigned to either no-exercise group, and greater increases in muscle strength (bench-press strength,  $22 \pm 2$  kg; squatting-exercise capacity,  $38 \pm 4$  kg) than either no-exercise group. Neither mood nor behavior was altered in any group.

**Conclusions** Supraphysiologic doses of testosterone, especially when combined with strength training, increase fat-free mass and muscle size and strength in normal men. (N Engl J Med 1996;335:1-7.)

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**A**NABOLIC-ANDROGENIC steroids are widely abused by athletes and recreational bodybuilders because of the perception that these substances increase muscle mass and strength,<sup>1,2</sup> but this premise is unsubstantiated. Testosterone replacement increases nitrogen retention and fat-free mass in castrated animals and hypogonadal men,<sup>10,11</sup> but whether supraphysiologic doses of testosterone or other anabolic-androgenic steroids augment muscle mass and strength in normal men is unknown.<sup>3,9</sup> Studies of the effects of such steroids on muscle strength have been inconclusive,<sup>12-15</sup> and several reviews have emphasized the shortcomings of the studies.<sup>3,8,16</sup> Some of the studies were not randomized; most did not control for intake of energy and protein; the exercise stimulus was often not standardized; and some studies included competitive athletes whose motivation to win may have kept them from complying with a standardized regimen of diet and exercise.

We sought to determine whether supraphysiologic doses of testosterone, administered alone or in conjunction with a standardized program of strength-training exercise, increase fat-free mass and muscle size and strength in normal men. To overcome the pitfalls of previous studies, the intake of energy and protein and the exercise stimulus were standardized. Because some previous studies had demonstrated significant increases in muscle strength and hyper-

From the Department of Medicine, Charles E. DREW University of Medicine and Science, Los Angeles (S.B., C.C., R.C.); the Exercise Science Laboratory, El Camino College, Torrance, Calif. (T.W.S., T.J.B.); the Department of Medicine, Harbor-UCLA Medical Center, Torrance, Calif. (N.B., J.P., R.C.); and the Department of Public Health, Oregon State University, Corvallis (R.T., A.S.). Address reprint requests to Dr. Bhasin at the Division of Endocrinology, Metabolism and Molecular Medicine, Charles E. DREW University of Medicine and Science, 1821 E. 120th St., MP #2, Los Angeles, CA 90069.

Volume 335 Number 1 • 1

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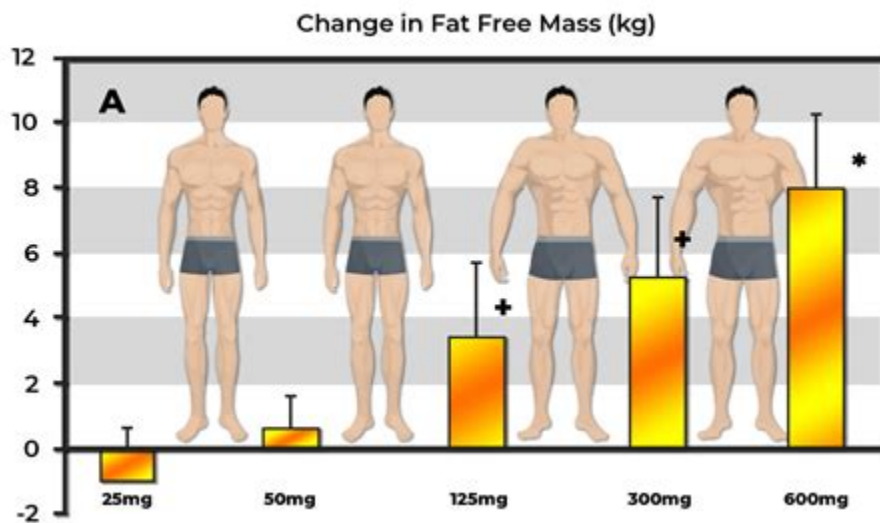
The men received either 600 mg of testosterone enanthate in sesame oil or placebo intramuscularly each week for 10 weeks in the Clinical Research Center. . Doses as high as 300 mg per week have .

## Testosterone Cypionate Cycle - Testosterone



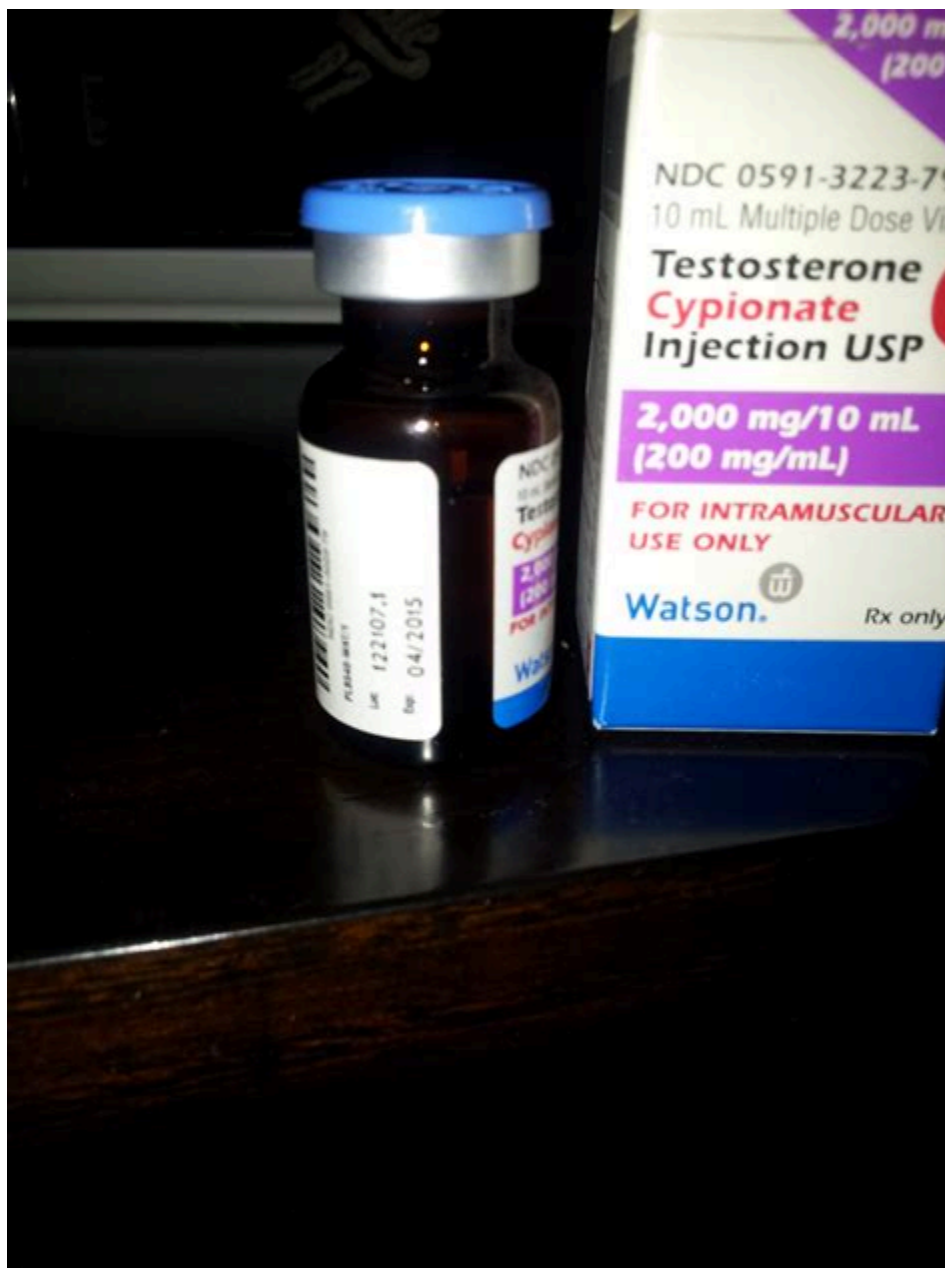
Exactly How Much Muscle Does 25mg, 50mg, 125mg, 300mg & 600mg Of Testosterone Build? Watch on Testosterone Dose-Response In A Clinical Setting This study evaluated the results of weekly administrations of Testosterone at dosages of 25 mg, 50 mg, 125 mg, 300 mg, and 600 mg for 20 weeks.

### High Dose Testosterone Vs Low Dose Testosterone - More Plates More Dates



Testosterone Dosage. I would use a base of 300 mg Testosterone per week split into everyday administrations. My Testosterone dosage would titrate up to as high as my body can tolerate without needing an AI or substantial detriment to my health markers during the subsequent cycle.

## Safe to run 300mg test cyp for life as trt? : r/Testosterone - Reddit



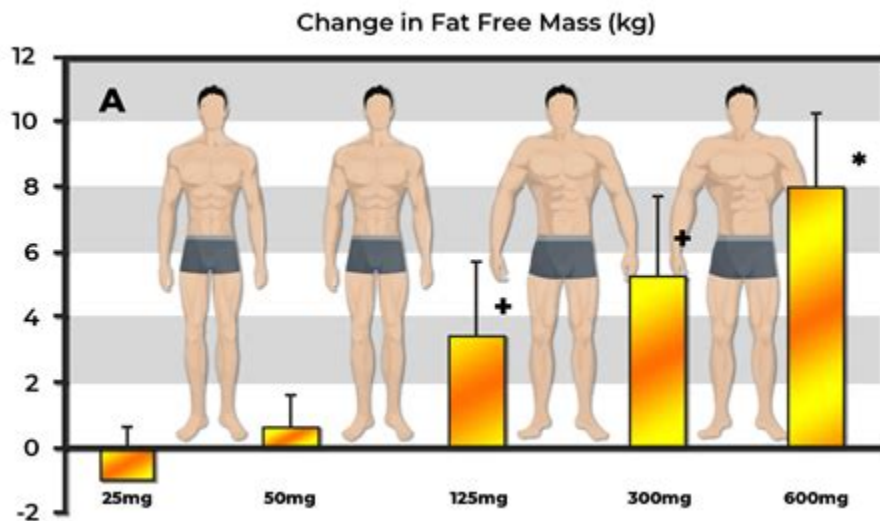
In a small sample ( $n = 15$ ) retrospective study, Krauss et al. examined hypogonadal men receiving short-acting IM testosterone 300 mg every 3 weeks . Using a cutoff of 48%, they .

## Testosterone: Real-World Data - T NATION



300mg a week for the first 4-5 months and increased to 500mg a week. Dialing down to 250-200 now and try to maintain these gains. Sorry, this post was deleted by the person who originally posted it. 138 117 117 comments Best Add a Comment fakenattybrasileiro • 1 yr. ago how much weight have you put on? 15 Randomuser8500 • • 1 yr. ago

## TRT and Testosterone Dosage Calculator - Muscle and Brawn



T enanthate at a dose of 300 mg/week was no more effective than 100 mg/week. The dose-dependent suppression curves were parallel for the hormones, sperm counts, and sperm concentrations. Men who received 100 mg and 300 mg T enanthate per week had higher T levels than the men treated with sesame oil.



## Testosterone Dosage For Bodybuilding | The Highest Dosage I Would Use



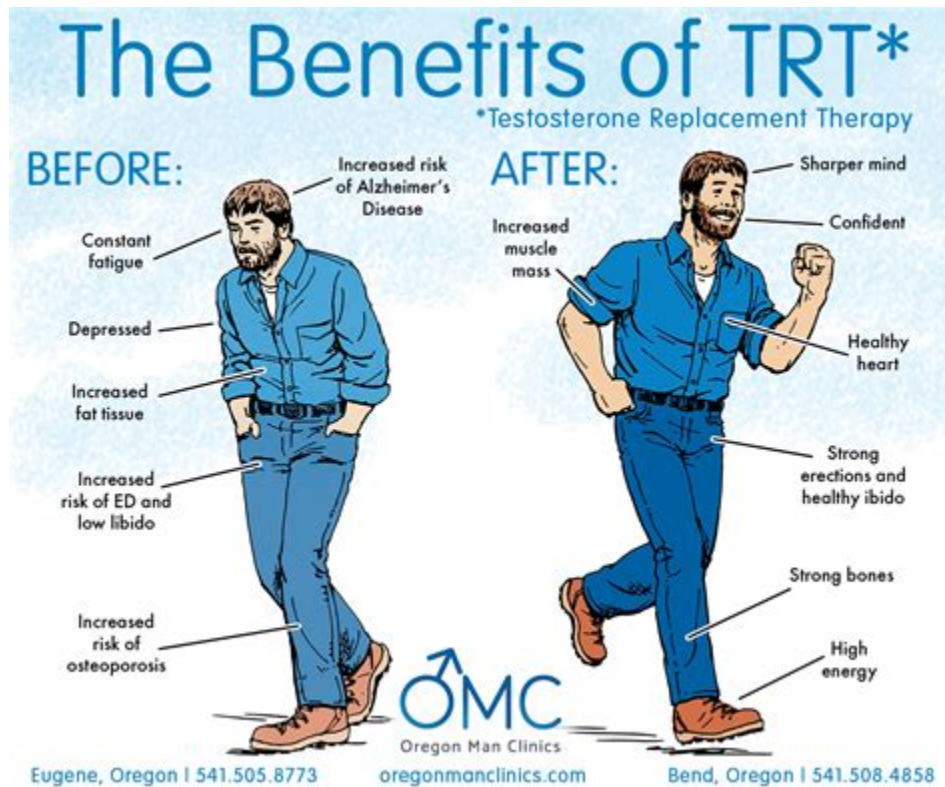
Testosterone therapy side effects. It can take a few weeks to a month or two to see your symptoms improve after starting testosterone replacement therapy, Dr. Smith says. Here are some of the side .

## Safety and Effectiveness of Testosterone at 1000 Milligrams per Week



Brand name: Depo-testosterone. Testosterone cypionate comes only in the form of an injectable solution given into your muscle. You can give this medication to yourself at home after your doctor.

### Effects of chronic testosterone administration in normal men: safety .



220lbs in both pics, 12 weeks apart (300mg test per week and some hard training/reduction in sugary food without starving myself) 174 144 Share Sort by: Open comment sort options Add a Comment Calcomania4 • 2 yr. ago Its fucking black magic, fuck it im so done being natty xd 34 SometimesImFunnyMan OP • 2 yr. ago

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- <https://gamma.app/public/Ciclo-Winstrol-Testosterona-Y-Trembolona---Trembolona-Efectos-Sec-xasz443pfoa9uq1>
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