
Subject: können 5-a-R Hemmer, bzw kann Dutasterid HNO-Infekte verursachen?
Posted by [tino](#) on Sat, 16 Sep 2006 21:55:53 GMT

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Die Autoren der unteren Studie sagen ja. Ich kenne den gesamten Text noch nicht, habe ihn aber bestellt. Ich selbst habe mittlerweile die dritte HNO-Infektion innerhalb weniger Monate, und bin gezwungener Stammgast beim HNO Arzt:-(Unabhängig von dieser Studie, habe ich vor einigen Monaten selbst die Theorie erstellt, dass DHT die auch mit dem Immunsystem gekoppelte Stressresistenz speziell beim evolutionär auf mehr Leistung getrimmten Mann, positiv moduliert, und eine DHT Wegnahme, Stressresistenz und Immunfunktion absenkt. Ich selbst bekomme auch nur HNO Probleme wenn ich unter starkem Stress stehe. Desweiteren deckt sich dies mit den Kastratenstudien, in denen Kastraten im Vergleich zur Kontrollgruppe schlechtere Wundheilung, und erhöhte Infektanfälligkeit aufwiesen. Dann ist es tatsächlich so dass Rachen und Mundschleimhäute Androgen-Rezeptoren aufweisen, bzw dass dort DHT aufgenommen wird (siehe 2).

Mal abwarten bis ich die komplette Arbeit habe...

1.
Dutasteride: a dual 5-alpha reductase inhibitor for the treatment of symptomatic benign prostatic hyperplasia.

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OBJECTIVE: To review the pharmacology, pharmacokinetics, efficacy, safety, drug interactions, and dosing recommendations of dutasteride, a 5-alpha reductase inhibitor for benign prostatic hyperplasia (BPH). **DATA SOURCES:** A MEDLINE search (1966-February 2006) was conducted to extract human research data in the English language on dutasteride. Search terms included benign prostatic hyperplasia, dutasteride, and finasteride. The reference lists of articles identified through this search process, the manufacturer's Web site, and dutasteride prescribing information were also examined. **STUDY SELECTION AND DATA EXTRACTION:** All published studies and clinical data from the manufacturer were included, with emphasis placed on randomized, controlled trials. **DATA SYNTHESIS:** Dutasteride is approved for the treatment of symptomatic BPH in men with an enlarged prostate to improve urinary symptoms, reduce the risk of acute urinary retention, and reduce the need for BPH-related surgical interventions. Compared with placebo, dutasteride has been shown to significantly improve BPH symptoms, reduce the incidence of acute urinary retention and BPH-related surgery, and improve BPH-related quality of life. Few published data exist comparing dutasteride with finasteride. The most common adverse effects of dutasteride include ear, nose, and throat infection; malaise; headache; dizziness; and musculoskeletal pain. **CONCLUSIONS:** Clinical trials, sponsored primarily by the manufacturer, have shown dutasteride to be an effective treatment of BPH compared with placebo and to likely possess efficacy similar to that of finasteride. Further studies are needed to gain a more clear understanding of any clinically significant differences between dutasteride and finasteride.

http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?db=pubmed&cmd=Retrieve&dopt=AbstractPlus&list_uids=16569804&am p;query_hl=15&itool=pubmed_docsum

2.Androgen receptors in the cytosol of normal mucosa and of pharyngo-laryngeal epitheliomas in humans]

[Article in French]

Saez S,

Sakai F.

Specific binding for 5 alpha dihydrotestosterone has been characterized in cytosol fraction from human pharyngeal and laryngeal mucosae. The high binding affinity of the protein receptor (K_d 2×10^{-10} M) and its low capacity are similar in both sexes, and similar in both normal mucosa and epithelioma.

http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?db=pubmed&cmd=Retrieve&dopt=AbstractPlus&list_uids=170013& query_hl=19&itool=pubmed_docsum
