```
1 Original article:
```

2	
3	Clinical relevance of low androgen to gastroesophageal reflux
4	symptoms
5	
6	Ko Harada ¹ , Yoshihisa Hanayama ¹ , Miho Yasuda ¹ , Kou Hasegawa ¹ , Mikako Obika ¹ ,
7	Hitomi Kataoka ¹ , Koichi Itoshima ² Ken Okada ² and Fumio Otsuka ^{1,2}
8	
9	
10	¹ Department of General Medicine, Okayama University Graduate School of Medicine,
11	Dentistry and Pharmaceutical Sciences, Okayama, Japan; and ² Department of
12	Laboratory Medicine, Okayama University Hospital, Okayama, Japan.
13	
14	
15	Running title: Testosterone level and FSSG score
16	
17	
18	Key words: Free testosterone, Frequency scale for the symptoms of gastroesophageal
19	reflux disease (FSSG), Gastroesophageal reflux disease (GERD), and Late onset
20	hypogonadism (LOH).
21 22	
22 23	
23 24	
24 25	
26	
27	Corresponding author:
28	Name: Fumio Otsuka, M.D., Ph.D.
29	Affiliation: Department of General Medicine, Okayama University Graduate School of
30	Medicine, Dentistry and Pharmaceutical Sciences, Okayama, Japan.
31	Mailing address: 2-5-1 Shikata-cho, Kita-ku, Okayama 700-8558, Japan
32	
33	E-mail address: fumiotsu@md.okayama-u.ac.jp
34	

35

Abstract

36

The aim of this study was to determine the relationships between free 37 testosterone (FT) level and parameters including laboratory data and data from 38 questionnaires and to determine symptoms leading to the detection of late onset 39 hypogonadism (LOH). We retrospectively reviewed medical records of patients in 40 41 whom serum FT was measured in our hospital. Aging Male Symptoms (AMS) score, 42 self-rating depression scale (SDS) and frequency scale for the symptoms of 43 gastroesophageal reflux disease (FSSG) score were used for questionnaires. A total of 44 205 patients were included in the analysis (55.2 \pm 15.6 years of age, mean \pm SD). Among them, 119 patients (58.0%) had an FT level of less than 8.5 pg/mL, which 45 fulfills the diagnostic criterion of LOH syndrome according to the clinical practice 46 manual for LOH in Japan. It was revealed that FSSG score was inversely correlated to 47 serum FT levels (R=-0.3395, p<0.001), although SDS and AMS scales did not show 48 49 significant correlations to FT levels. Our study revealed a high prevalence of LOH syndrome among patients in whom the majority complained of general symptoms. 50 Although GERD symptoms are generally not considered to be typical symptoms of 51 52 LOH, our study indicates that those symptoms might be clues for the detection of LOH.