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TESTOSTERONE LEVELS IN MEN WITH TYPE 1 AND TYPE 2 DIABETES MELLITUS AFTER TRANSPLANTATION OF AUTOLOGOUS MESENCHYMAL STEM CELLS

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OBJECTIVES

To study the effect of autologous mesenchymal stem cells transplantation (AMSCT) on testosterone levels in men with Diabetes Mellitus Type 1 (T1DM) and Type 2 (T2DM).

METHODOLOGY

5 male DMT1 and DMT2 patients (39-50 years old) who received AMSCT intravenously were compared to 5 male DMT1 and DMT2 patients (32-56 years old) as the control group. Mesenchymal stem cells were obtained from the iliac crest of DMT1 and DMT2 patients, the cells were cultured for 3-4 weeks and infused ($95-97 \times 10^6$). Glycated hemoglobin (HbA1C, %) and testosterone (ng/ml) levels in both groups were analyzed before and 3 months later after the AMSCT.

RESULTS

The baseline mean testosterone and HbA1C levels in men with DMT1 and DMT2 with AMSCT were 5.31 ± 2.12 ng/ml and 9.45 ± 1.24 % respectively. Three months after the AMSCT, the mean testosterone and HbA1c became 6.33 ± 2.12 ng/ml ($p=0.82$) and 8.53 ± 1.08 % ($p=0.25$). The baseline mean testosterone and HbA1C levels in DMT1 and DMT2 men in the control group were 5.27 ± 1.8 ng/ml and 8.84 ± 2.2 % respectively. Three months after, the testosterone was 3.69 ± 1.18 ng/ml ($p=0.179$) and the HbA1c was 8.64 ± 1.41 % ($p=0.19$). After 3 months, the average testosterone level in men with DMT1 and DMT2 who underwent AMSCT significantly increased compared to the mean testosterone level in men of the control group: 6.33 ± 2.12 ng/ml versus 3.69 ± 1.18 ng/ml ($p=0.015$).

CONCLUSION

An increase in testosterone levels in men with DMT1 and DMT2 after 3 months of the AMSCT compared with the control group of men with DMT1 and DMT2 can serve as a confirmation of the effectiveness of AMSCT for the prevention of diabetic erectile dysfunction and hypogonadism in men with diabetes mellitus.