

# PRESCRIPTION MONOGRAPH

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**Compounded Active Ingredients:** DHEA (Prasterone)

**Form:** Topical Cream

## Drug Class:

- Endogenous steroid hormone precursor
  - Prohormone converted into estrogens and androgens
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## Mechanism of Action<sup>1,2</sup>:

DHEA is intended to:

- Convert into androstenedione, testosterone, and estrogen.
  - Enhance libido, energy, and immune function.
  - Reduce age-associated decline linked to fatigue and cognitive issues.
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## Indications Commonly Prescribed for:

- Functional hypogonadism
  - Adjunctive therapy in post-cycle recovery following anabolic steroid use
  - Estrogen-androgen balance correction in cases of estrogen dominance
  - Sleep, libido, and energy restoration
  - Skin aging improvements
  - Erectile dysfunction
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**Before Use:** Let your healthcare provider know if you have any medication allergies before you take this compounded preparation. Let your healthcare provider know if you have any liver or kidney problems. Let your healthcare provider know of all supplements you are currently taking.

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## Contraindications:

- Known hypersensitivity to DHEA or related compounds
  - Active or history of hormone-sensitive cancer (e.g., breast, prostate)
  - Pregnancy and breastfeeding (safety not established)
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**Cautions:** Let your Healthcare provider know if you experience any adverse side effects.

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**How to Use:** This compounded preparation is in the form of a topical cream. The cream is a special container that will administer 0.25ml dose. Clean desired area prior to use. To administer remove the protective covering on the top of the dispenser. Turn the dosing knob in the direction marked for the number of prescribed clicks. Confirm the cream has exited the holes at the top of the dispenser. Apply the cream by rubbing the dispenser (where cream exited the holes) onto the desired area. Continue to rub the area until the cream is evenly dispersed over the desired area. Replace the protective cover with a light push and store the device until next dose. If you miss a dose apply as soon as you remember, but not at the time for the next dose. The desired results may take up to several weeks.

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Compounded medications are not FDA-approved and may differ in risks, benefits, and side effects from FDA-approved products. These statements have not been evaluated by the FDA and are not intended to diagnose, treat or cure any disease or condition and do not indicate any claims of safety or efficacy. Individual results may vary.

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## Warnings and Precautions:

- Hormone-sensitive conditions: Use cautiously or avoid in patients with breast, uterine, ovarian, or prostate cancer – DHEA may stimulate hormone-dependent tumors.
  - Psychiatric effects: Monitor for mood disturbance, mania, anxiety, or depression in susceptible individuals.
  - Lipid effects: DHEA may lower HDL cholesterol; assess in cardiovascular risk patients.
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## Adverse Reactions:

- Acne, irritability, oily skin, hair changes
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## Interactions:

- DHEA may affect CYP3A4 metabolism, increasing levels of numerous drugs (e.g., corticosteroids, statins, immunosuppressants).
  - Monitor closely when co-administered with topical or systemic estrogens/testosterone due to additive effects.
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## Use in Specific Populations:

- Elderly: Possible support for skin and mood, though evidence is limited.
  - Pediatric & Pregnancy: Use is not recommended.
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## Storage:

- Store in original container at room temperature (up to 30°C or 86°F)
  - Store in a cool dry place away from heat, sunlight, and moisture
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## Monitoring Parameters:

- Periodic assessment of hormone-sensitive organ status (e.g., breast, prostate).
  - Evaluate lipid profile, liver function, hematocrit, and monitor for mood or skin changes.
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## Citations:

1. Sigel A, Michalkova D, Capdevila A. Pharmacological activities of dehydroepiandrosterone: a review. *Clin Endocrinol (Oxf)*. 2019;90(4):633–642. doi:10.1530/EC-19-0155
2. Zhu Y, Qiu L, Jiang F, Găman MA, Abudoraehem OS, Okunade KS, Zhang M. The effect of dehydroepiandrosterone (DHEA) supplementation on estradiol levels in women: A dose-response and meta-analysis of randomized clinical trials. *Steroids*. 2021;173:108889. doi:10.1016/j.steroids.2021.108889