บทความ

Progession of Hormonal Male Contraception

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The evolution of family-planning organizations had traditionally concentrated on female contraception. Condoms and vasectomy were the only male contraception being used in the past decades. Lately, progression of hormonal male contraception has been developed and will be a new option of male contraception. Various forms of testosterone and progestrone have been studied as male contraceptives, i.e. testosterone enanthate, testosterone undecanoate, depot medroxyprogesterone acetate, non–ethisterone enanthate, desogestrel or etonogestrel, either alone or in combination. Several clinical trials found that these hormonal contraceptives displayed promising efficacy. Recent studies focused on androgen either in implant or injection forms and long–acting testosterone esters in order to produce azoospermia. These developments contribute to a major progression in hormonal male contraception.

Key words: hormonal male contraception, androgen, testosterone, progestrone
5. **Acute care**

Acute care is a type of medical treatment that is provided for conditions that require immediate attention due to their severity or potential for rapid deterioration. It is typically offered in emergency departments, urgent care centers, and other settings where rapid intervention is necessary. Acute care is crucial in managing conditions such as heart attacks, injuries, and life-threatening emergencies. It is designed to provide rapid assessment, diagnosis, and treatment to stabilize the patient and prevent further harm. Acute care often involves the coordination of various specialties to ensure that patients receive the appropriate level of care. This may include surgical interventions, critical care, and other specialized treatments. The goal of acute care is to promptly address the immediate health needs of patients and prevent complications from developing.
1. Desogestrel (DSO) ชนิดเริ่มใช้ยาในคนดังกล่าว คือวิธีการใช้ยา DSO ที่ได้รับความยากที่จะเกิดขึ้นในการจ่ายยา ยา DSO ได้รับความยากที่จะเกิดขึ้นในการจ่ายยา ยา DSO ได้รับความยากที่จะเกิดขึ้นในการจ่ายยา

2. Levonorgestrel (LNG) ชนิดเริ่มใช้ยาในคนดังกล่าว

3. Noristerate acetate (NETE) ชนิดเริ่มใช้ยาในคนดังกล่าว

4. Noristerette gel (GET) ชนิดเริ่มใช้ยาในคนดังกล่าว

5. Caster oil ชนิดเริ่มใช้ยาในคนดังกล่า
1. Detop medroxyprogesterone acetate (DMPA) is a
contraceptive widely used in developing countries. DMPA
is administered intramuscularly at a dose of 150 mg
3-monthly. It acts by inhibiting ovulation and thickening
the cervical mucus. In addition, it inhibits implantation
by altering the endometrium. However, the risk of side
effects and complications is not negligible.

2. Subcutaneous progesterone implants (SCPI)
are a new contraceptive method. They are inserted
subcutaneously in the arm and released for up to 3 years.
The mechanism of action is similar to DMPA, but the
duration of contraceptive effect is longer. SCPI is
considered a safe and effective contraceptive method.

3. Desogestrel and DMPA have been shown to
reduce the risk of pregnancy. However, the
contraceptive effect is reduced in women with
a history of hormone use. Therefore, these
methods are not recommended for women
with a history of hormone use. Additionally,
the risk of side effects and complications
is not negligible. Therefore, these methods
should be used with caution.

4. Exogenous androgen therapy is a
potential contraceptive method. However,
the risk of side effects and complications
is not negligible. Therefore, this method
should be used with caution.

5. Oral contraceptive pills (OCPs) are
commonly used contraceptive methods. They
contain estrogen and progesterone. The
mechanism of action is similar to DMPA,
but the duration of contraceptive effect is
shorter. OCPs are not recommended for
women with a history of hormone use.

6. Female sterilization is a
permanent contraceptive method.
It involves the removal of one or both
Fallopian tubes. However, the risk of
complications is not negligible. Therefore,
this method should be used with caution.


