Russ's History

When I was diagnosed with aggressive prostate cancer in 2018, the standard treatment was Lupron (ADT), but I already had osteopenia and I was concerned about the rapid bone loss it can cause. While researching alternatives, I learned that oral estrogen had historically been used to suppress testosterone, but was largely abandoned because of cardiovascular risks. I've used tE2 for 4 months in 2019, followed by a month on Casodex, then high testosterone for 2 years. For the most recent 5 years I've been doing an adaptive Bipolar Androgen Therapy (BAT) program.