

An inside perspective on anabolic steroid abuse

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Abstract: Steroid abuse is common across gyms across the world. This unique article features an inside perspective/opinion in a question and answer format from a former steroid user/high level body builder.

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Introduction

In a seemingly usual Andrology clinic day, I first met Chad. Chad was not unlike many patients I had seen before, who's physique my medical students described as "his muscles have muscles." With past similar patients, I had performed the comical dance of asking if they had abused steroids only to be denied several times before lab work would unequivocally show otherwise. But Chad was different, bluntly honest and very intelligent, he started our appointment by stating, "I feel horrible, I quit using steroids several months ago and need your help". And so a unique doctor patient relationship was born. I did my best to be non-judgmental and just listen. And every subsequent appointment I did mostly that, as Chad's knowledge of steroid use (both practically and scientifically speaking) far exceeded my own. After several appointments with Chad that had consistently exceeded the allotted 15 minutes answering questions to increase my understanding of steroid abuse (certainly not his), I asked if he would be willing to speak publicly on the issue. Thereafter, Chad shared his experience and information with audience members of the American Society of Andrology, The Sexual Medicine Society of North America and finally a plenary session at the American Urologic Association. After the AUA session, several audience members recommended I write up the same information shared in our interview style presentation. Thus I will do my best to summarize some of the things Chad has taught me and many others. This article is primarily my interpretation of Chad's opinions

and experience, thus it will not contain scientific references or many of the elements or tone expected from a scientific article. However, if you are at all like me, I think you will still find this article very informative.

Q1. Chad, could you please tell us why many consider you an expert in anabolic steroid use?

A1. I personally abused steroids for about ten years of my life. I have been in the gym with steroid users around me for 20 years. I have successfully competed both regionally and internationally in bodybuilding and powerlifting competitions. Some of my steroid "mentors" are considered among the most knowledgeable. I currently help train and develop programs for several high-level body builders.

Q2. How did you personally get started with steroids?

A2. My dad was a professional baseball player and my brother a gifted athlete. Growing up, I didn't carry books in my backpack, I had muscle magazines and tried to learn everything I could about getting stronger. Schwarzenegger was an idol of mine. I went out for my Junior year football season and was told by the coach I needed to gain weight before having a chance to make the team. I gained about 15 pounds of muscle in about six months through excellent nutrition, massive caloric intake and a lot of hours in the gym. I made the football team. Then I had a knee injury playing and had to rehab. I hung around the gym so much they offered me a job as a trainer. The guy that showed me

how to take care of the gym ultimately offered me dianabol, an oral steroid. I remember sitting on my bed with a bag of pills staring at me. I was really conflicted about taking them, I finally decided to take them after looking at some of the muscle magazines I had. It was funny, the guy who gave me the pills also had never tried them before and had similar doubts, but we both ended up taking them.

Q3. *What happened after you took them?*

A3. I gained about ten pounds of muscle in a month or so. Similar training, similar massive caloric intake (with only healthy foods), but the muscle just developed incredibly quickly. Where most people fail to gain muscle is caloric intake, you need at least a gram of protein per pound per day. This is hard to do and involves meal planning, avoidance of junk food, and a lot of self-discipline. Otherwise you will gain ten pounds of fat in a month instead. Most of us believe that after you are done with puberty that only through perfect training and nutrition can you gain ten pounds of muscle in a year—clearly the steroids speed up the process. Then I developed horrible back spasms from dehydration. It scared me quite a bit, I quit taking steroids for several years after this first trial.

Q4. *What are the most common reasons people start steroids?*

A4. Most commonly it's guys who want to look good holding a beer bottle in a bar to pick up women. Athletic performance is also very common, especially in high school and college. Police officers, prison guards, firemen and military want to be bigger and stronger to accomplish their objectives. Rarely, for bodybuilding competitions.

Q5. *What is your opinion of these different reasons to start steroids?*

A5. For men wanting to look good holding a beer bottle, they could accomplish the same goals with training, and most importantly good nutrition. Steroids will allow men to achieve these goals faster but bring with them the potential problems discussed below.

Taking steroids for improved sports performance in high school and college doesn't work especially if it's in hopes of turning professional. If an athlete needs to take steroids to

compete or succeed at a high school level they simply aren't talented to make it to the next level. Similarly, if a college athlete needs to take steroids to compete, they don't have enough baseline natural ability to compete professionally. Finally, if a player uses steroids is caught and thus prevented from using again, unenhanced performance will return, revealing inherent mediocre baseline talent.

Q6. *How does one obtain steroids?*

A6. Previously, you would ask "that guy" at the gym. Dealers previously abounded in the weight room and were eager to sell you their wares. Of course the mark up in cost was significant and quality control was very poor. Further, dealers often would give bad advice (intentionally or unintentionally) based on anecdotal experience or what they heard. It was/is not uncommon for dealers to take a more is better attitude and sell you the same compound in different forms which not only is ineffective but increases side effects and risk.

Today, it is very easy to order steroids over the internet. A credit card is all you really need. Interestingly, quality control for these products is typically better than dealers because bad online reviews from steroid sources can devastate future sales.

Q7. *Can you talk about steroid side effects you and your friends have experienced?*

A7. My first side effect was horrible back spasms from dehydration. This is why you often see steroid users drinking strange colored concoctions out of gallon milk containers. Certain steroids like Deca consistently cause erectile dysfunction (when not taken in combination with IM testosterone), which prompts anabolic steroid users to use phosphodiesterase inhibitors like Viagra. Testicular atrophy is very common, especially in users who don't use post cycle therapy (PCT) like clomiphene citrate or human chorionic gonadotropin (HCG). I never had problems with fertility because I was smart about when I used it in relation to timing of when I wanted kids. "Roid rage" I think gets overblown, remember that people using steroids are often on restrictive diets as well which adds to overall irritability. People tend to remember a 250 pound man going crazy at the gym throwing 50 pound barbells more than an obese man getting angry at the office. But, I did have some instances

Table 1 General overview of common substances abused to gain muscle

Agent	Route	Cost	Dose	Purpose	Beg	Adv	Other
Dianabol	PO	1–2\$/pill	2–3 pills/day	Mass builder and strength	X	2X	Originally formulated for POWS
Nandrolone Decionate	IM	10\$ dose	2/week	Muscle Building without water retention (no estradiol conversion)	X	3X	
Testosterone Enanthate	IM	10\$ dose	1/week	Raise T to recover faster and absorb more protein	X	3–4X	This & cypionate interchangeable
Testosterone Cypionate	IM	10\$ dose	1/week	Raise T to recover faster and absorb more protein	X	3–4X	This or Enanthate picked for less H ₂ O retention
Winstrol	PO/IM	10\$/dose	QOD inj	Strength Builder—hardened look without water retention		X	Used by Olympic athletes and sprinters
Masteron	IM	10\$/dose	QOD inj	Leaning and hardening agent		X	Favored by competitive bodybuilders
T3 (Cytomel)	PO	1–2\$/pill	20 mcg +	Weight loss		X	
Clenbuterol	Liquid or pills	1–2\$/pill	20 mcg +	B3 inhibitor to optimize muscle contraction		X	Enhances breathing in race horses
Arimidex	PO	1–2\$/pill	0.5–1 mg qod/qd	Used for gynecomastia or water retention		X	Women bodybuilders take it in very low doses
IGF-1	IM	5\$ dose	4–10 IU/day			X	Very expensive
Lasix/Thiazides	PO		Few pills x2 days	Used primarily for competitions		X	Hard to get without prescription
Clomiphene Citrate	PO	0.5–1\$/pill	25–50 mg/qod-qd	Take for 2–4 weeks immediately after cycle		X	Post cycle therapy to prevent testis atrophy
HCG	SubQ	100\$ for PCT dose	2,500 IU 2/week x2 weeks	Take for 2–4 weeks immediately after cycle		X	Also PCT—restores natural T production

Beg, Beginner Regimen; Adv, Advanced Regimen, Professional regimen not listed but much higher doses, costs obtained from black market websites.

while on steroids were I certainly lost control and got very angry. Also, Roid rage may be more a reflection of the personality type who uses steroids and their baseline personality problems. Balding and acne are also common.

Q8. Can you talk about regimens of steroids a physician can expect to encounter?

A8. This question is of course highly variable and *Table 1* will attempt to summarize some steroid basics and costs. Like with other things in life, different individuals have different sensitivities to chemicals, in this case steroids. I have worked with athletes who respond to a wisp of steroids

incredibly (in other words a better genetic predisposition to muscle development and steroid response) and others who do not respond at all. Non or poor responders most often have poor nutrition.

Q9. How and what testing do steroid users obtain?

A9. The majority of men casually using steroids to look good holding a beer bottle never get tested. I personally had my liver function, metabolic panel, CBC and T levels monitored routinely. Some will ask their primary MDs for this screening and others get it from an MD associated with the company sending the medications. I

never worried about heart problems or prostate cancer or urination issues.

Q10. Could you tell us a little bit about why you stopped steroids and why others might as well?

A10. I stopped cold turkey after my Dad died suddenly and unexpectedly. I asked myself what I was doing and why and realized the next body building competition and getting bigger wasn't that important to me. Many men who use steroids casually will stop because they become married or don't have the financial wherewithal to obtain the drugs. If one takes steroids and stops training it very easy to get fat because of the increased appetite and high calorie eating style. People in athletics who abuse steroids often get caught and are forced to quit.

Q11. Modern day media talks about how a quarter of the cast of *Wrestlemania 7* is dead—do you attribute this to steroid use?

A11. Although a bunch of these guys and gals used steroids, I personally believe the lifestyle affiliated with this profession is also to blame. People willing to illegally inject themselves to gain muscle don't have any qualms about taking narcotics for pain from working out or using other more dangerous drugs. Just like Rock and Roll bands who become famous, the lifestyle can be quite stressful and involve a lot of high risk behavior. There do seem to be boundaries for steroid abuse that I can see—no one that has gotten to 400 pounds because of steroids has lived very long. However, many bodybuilders who use steroids are forced to eat extremely clean and obviously exercise. Many of these individuals who are now older and have been mentors to me are extremely fit and healthy and are doing just fine.

Q12. Along those lines, what do you believe are the true risks Anabolic steroid abuse to consider?

A12. One of the main problems I see is establishing a new set-point of normalcy. When your testosterone is 3,000 consistently you get used to your erections being 13/10, energy level through the roof, and a general sense of well being and energy that is hard to match. When I stopped steroids suddenly after my Dad died I felt horrible and got really depressed—now part of this was

from my Dad's death, but some of it was having my T level decrease 10 fold. The gains with bodybuilding and steroid use are addictive not only physically but socially as your friends, partners and peers have expectations of how you should look. Another big problem with steroid abuse is that it can get to be a really expensive habit. Making money body-building is extremely difficult so often users will resort to shady ways of making money to support their habit.

Q13. How does one get funds to support a steroid regimen?

A13. If you are lucky and have the genetic predisposition to become a professional bodybuilder you can get endorsements for nutraceuticals or getting modeling jobs. The vast majority of users however will have to take 2nd jobs working in security or as bouncers or become personal trainers. Some will start dealing themselves. Others will turn to crime to support their habit. Prostitution is surprisingly common for both female and male steroid users. It turns out there is a big demand to touch, get used clothing from or just look at bodybuilders from sub-sections of the community.

Q14. Can you give us a rough breakdown of who is using?

A14. The majority of people using are people at the gym trying to look good holding a beer bottle. About 20% of the steroid users are women (particularly with the advent of Cross-fit). Power-lifters and competitive bodybuilders make up a big portion as well. Finally, it is not uncommon for prison guards, military personnel, fire fighters and police officers to inquire about steroid use as well.

Q15. Do you have a message for people out there considering starting steroids?

A15. For most people it is just not worth it. If you focus on proper training and nutrition you can achieve excellent gains and the benefits you are looking for. Our society has a quick fix, instant gratification mentality so I understand the appeal of using steroids—if a person trains and eats perfectly he can gain 5–10 pounds of muscle per year on average, someone on steroids can do the same in a couple of months. But these gains will be lost without continued long term training so why not just do it without steroids in the first place? High school and college athletes are brimming

with Testosterone levels and thus their bodies are primed to make quick gains just like I did. Remember that if you need steroids to do well in high school or college you will not make it—you simply aren't gifted enough an athlete (don't forget you have to be lucky enough to avoid injury as well). For people interested in becoming body builders, I recommend training hard for at least a year to see how well your body responds and to truly determine if this very hard lifestyle is for you.

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Footnote

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