

Gender Affirmation: Transition Process for Patients

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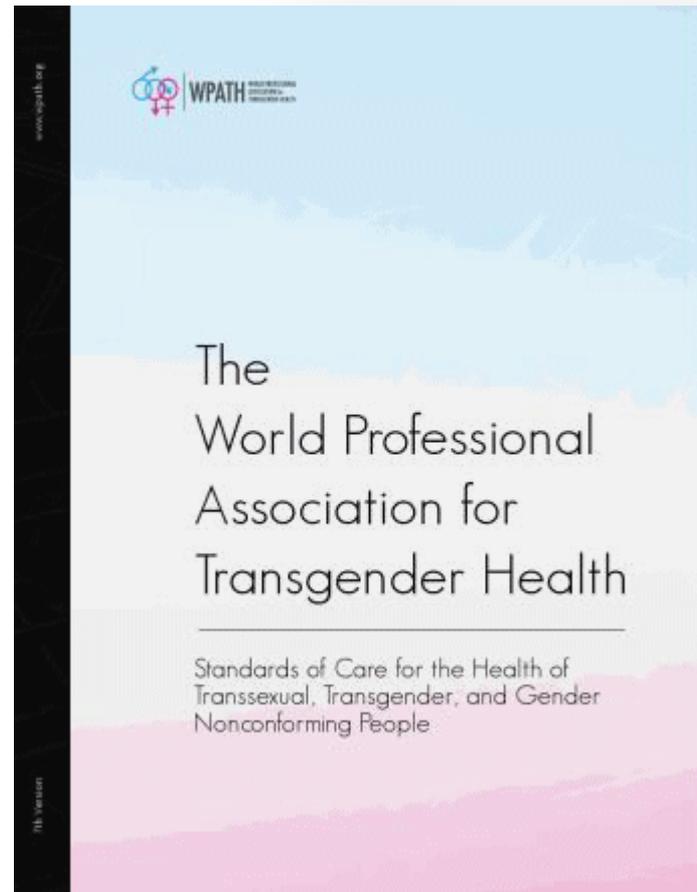
DISCLOSURES

- **I have no conflicts of interest to disclose**

Objectives

- 1. Learn about the steps to transitioning that transgender patients must undertake**
- 2. Become familiar with the World Professional Association for Transgender Health guidelines for transition**
- 3. Learn the basics of cross-sex hormone therapy for transgender patients seeking transition**
- 4. Get an overview of the surgical transition process that some transgender patients choose to take**

World Professional Association of Transgender Health



TRANSITION PROCESS

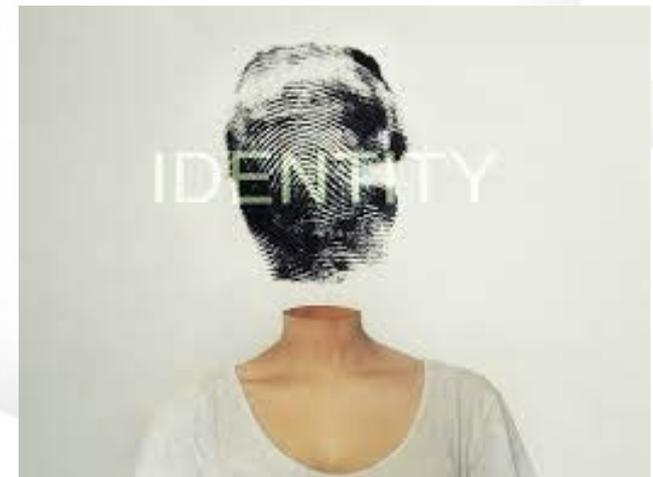
- **Mental Health support**
 - Formal diagnosis – *gender dysphoria* (F64.1)
 - Evaluation & management of other comorbid conditions (depression, anxiety, PTSD, OCD)
 - Referral for other services
- **Gender marker changes, living full-time as self-affirmed gender**
- **Cross-sex hormones (and suppression)**
- **Surgical transition (exists on a spectrum)**

TRANSITION PROCESS

- **Identification materials**
- **Clothing, accessories**
- **Binding**
- **Tucking**
- **Prostheses**
- **Hair removal**

AMA Says
Transgender Patients
Don't Need Surgery
To Change Birth
Certificate

JUN 9, 2014 @ 03:19 PM 11,015 VIEWS



HORMONE THERAPY

- **WPATH Guidelines**
 - **Persistent well-documented gender dysphoria**
 - **One referral from a mental health professional**
 - **Capacity to make an informed decision**
 - **Age of majority**
 - **Good control of any other significant medical or mental health conditions**

Hormone Regimens Available in the United States

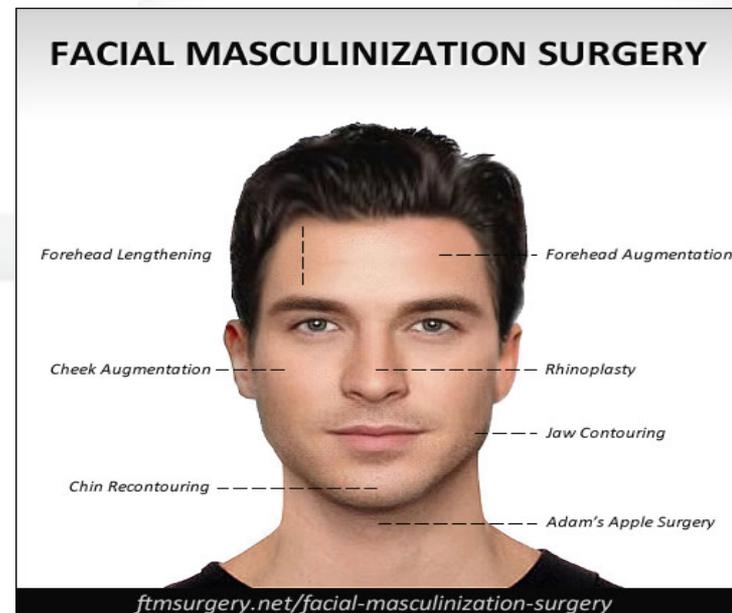
Male-to-female individuals	
Estrogens	
Estradiol (oral)	2 to 6 mg daily
Estradiol (transdermal)	0.1 to 0.4 mg twice weekly
Estradiol valerate or cypionate (parenteral)	5 to 20 mg every 2 weeks OR 2 to 10 mg intramuscular every week
Antiandrogens	
Spiro lactone	100 to 200 mg daily
GnRH agonist	3.75 mg subcutaneous monthly
Finasteride	1 to 5 mg daily
Dutasteride	0.5 mg daily

Hormone Regimens Available in the United States

Female-to-male individuals	
Testosterones	
Testosterone cypionate or enanthate (parenteral)	100 to 200 mg every 2 weeks OR 50 to 100 mg every week
Gel 1% (transdermal)	2.5 to 10 mg daily
Patch (transdermal)	2.5 to 7.5 mg daily

SURGERY – TRANSMALE

- Chest surgery
- Facial virilization
- Genital surgery

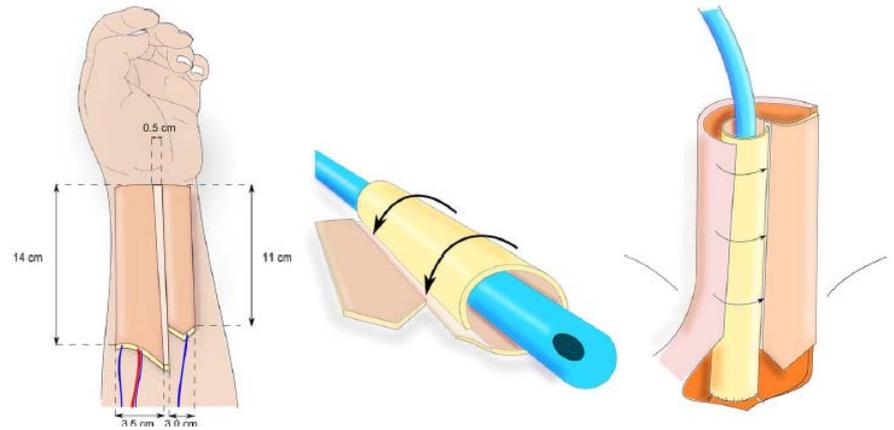
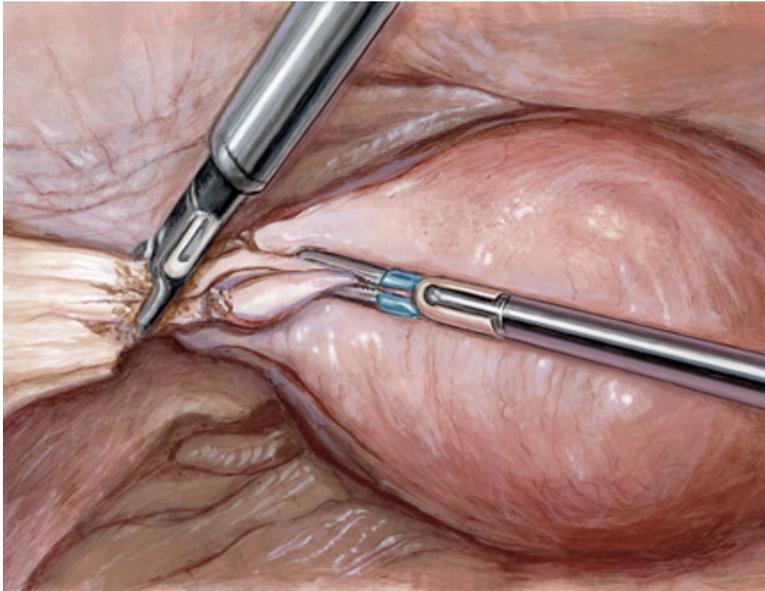


Chest (“top”) Surgery - mastectomy

- **WPATH Guidelines**
 - **Persistent well-documented gender dysphoria**
 - **One referral from mental health professionals**
 - **Capacity to make an informed decision**
 - **Age of majority**
 - **Good control of any other significant medical or mental health conditions**

GENITAL SURGERY - TRANSMALE

- Removal of pelvic organs
- Creation of male external genitalia



HYSTERECTOMY

- **WPATH Guidelines**
 - **Persistent well-documented gender dysphoria**
 - **Two referrals from mental health professionals**
 - **Capacity to make an informed decision**
 - **Age of majority**
 - **Good control of any other significant medical or mental health conditions**
 - **12 continuous months of hormone therapy**

GENITAL SURGERY

- **WPATH Guidelines**

- **Persistent well-documented gender dysphoria**
- **Two referrals from mental health professionals**
- **Capacity to make an informed decision**
- **Age of majority**
- **Good control of any other significant medical or mental health conditions**
- **12 continuous months of hormone therapy**
- **12 continuous months of living in a gender role that is congruent with their gender identity**

SURGERY – TRANSFEMALE

- **Breast augmentation**
- **Thyroid chondroplasty**
- **Facial feminization**
- **Genital surgery**

Chest (“top”) Surgery - augmentation

- **WPATH Guidelines**

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- **One referral from mental health professionals**
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GENITAL SURGERY

- **WPATH Guidelines**

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Every life deserves world class care.

**Contact Tina Reed:
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