

Education intervention with residents improves understanding of transgender issues

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The term "transgender" has made its way into mainstream media thanks to Caitlyn Jenner, previously known as Bruce Jenner, who came out as a transgender woman earlier this year. But for many physicians, or physicians-in-training, who do not typically treat transgender patients for issues specific to their gender identity, it's still a mystery.

Joshua Safer, MD, FACP, endocrinologist at Boston Medical Center and associate professor of medicine and molecular medicine at Boston University School of Medicine (BUSM), and his colleague Dylan Thomas, MD, conducted an intervention with physician resident trainees and found that by providing education about transgender identity, the residents' knowledge and willingness to assist with hormonal therapy increased from 5 percent to as much as 76 percent. The findings are published online in advance of print in the journal *Endocrine Practice*.

"Many transgender patients face barriers to receiving appropriate and effective medical care due to physicians' lack of knowledge about hormonal issues, or even due to some physicians' belief that transgender persons have a reversible psychological problem," Safer said. "By providing medical trainees with education early in their training, we are able to set the stage to provide effective, appropriate and compassionate care for transgender patients."

Transgender patients often have a high incidence of risky behavior

including smoking and using hormones without a prescription, face a unique type of stress making them likely to suffer from anxiety and depression, and have a higher rate of suicidality. Without appropriate primary care, these behaviors can manifest into larger medical issues.

Although statistics are rudimentary, some reports suggest that 0.3% to 0.5% of the population is transgender or up to 1 person in 200.

A lecture and brief interactive session were presented to both internal medicine and family medicine residents in 2014 and participants were surveyed both before and after the lecture about their willingness to assist transgender patients with hormone therapy, their knowledge about the permanent nature of gender identity, and their knowledge of the routine healthcare maintenance for these patients. Thirty-eight internal medicine and family medicine residents participated in the lecture and the surveys. Residents who felt sufficiently knowledgeable to assist with hormonal therapy for a female-to-male patient increased from 5 percent to 76 percent after the lecture; and from 5 percent to 71 percent for male-to-female patients.

Safer has also been piloting innovative transgender [medicine](#) content for medical students at strategic points in the curriculum the Boston University School of Medicine.

The current study was meant to determine if the same approach would work for physicians during their residency training.

"Providing physicians and medical students with the tools and training necessary to appropriately administer transgender hormone therapy and to understand the unique sensitivities and health issues of transgender individuals is vital to this growing patient population," Safer said.

Provided by Boston University Medical Center

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