

Single hospital study finds transgender teenagers rarely choose to discontinue hormone therapy

June 18 2023



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A three-year-long retrospective cohort study of a single Atlanta hospital's patient population found transgender and gender-diverse teenagers rarely



chose to discontinue gender-affirming hormone therapy, according to a study being presented Sunday at ENDO 2023, the Endocrine Society's annual meeting in Chicago, Ill.

Among 82 transgender and gender-diverse adolescents treated at an academic pediatric endocrinology center from beginning of 2016 to end of 2018, only three chose to halt gender-affirming hormone therapy. None of them resumed identifying as their assigned sex at birth. One participant stopped hormonal therapy due to insurance issues, one participant stopped treatment temporarily to conceive a baby, and one stopped testosterone to transition to a nonbinary gender.

"In the infrequent cases in which a person discontinues their gender-affirming hormone therapy, it is often due to external factors as opposed to true retransitioning to the sex assigned at birth," said lead researcher Pranav Gupta, M.D., a fellow at Emory University in Atlanta, Ga. "This research may help address questions by the families as to what factors could lead to discontinuation of gender-affirming hormones in the future till more robust data is available."

Feminizing or masculinizing hormone therapy can help transgender and gender-diverse adolescents to affirm their gender identity and avoid the distress of experiencing puberty in a way that does not match their gender identity. While gender-affirming hormone therapy has been associated with improved quality of life and well-being, the incidence of discontinuation of the therapy and the reasons for discontinuation are not well known, Gupta said.

The researchers reviewed 263 adolescents diagnosed with gender dysphoria (strong, persistent feelings of identification with another gender and discomfort with one's own assigned gender and sex) who were seen at the pediatric endocrinology clinic between 2016 and 2019. Out of these teens, only 82 (31.2%) were prescribed hormones (estradiol



or testosterone). The group prescribed hormone therapy included 36 (43.9%) transgender girls, 45 (54.9%) transgender boys, and 1 (1.2%) nonbinary adolescent.

In addition to <u>retrospective review</u>, those who were lost to follow up or referred to adult endocrinologists were contacted. Out of 21 <u>eligible</u> <u>participants</u>, 14 were able to be contacted and only three participants had discontinued therapy. No participant re-transitioned to the gender of sex assigned at birth. Seven patients were unable to be contacted.

"Only a small proportion of gender-diverse adolescents decide to pursue gender affirming hormone therapy. If they do, qualified pediatric providers should prescribe therapy in accordance with the established Endocrine Society guidelines, given the adolescent needing therapy meets the diagnosis of gender dysphoria, provides assent, has parental consent and has gone through puberty," Gupta said.

A related study was published in the Society's <u>Journal of Clinical</u> <u>Endocrinology & Metabolism</u>.

More information: Pranav Gupta et al, Adherence to Gender Affirming Hormone Therapy in Transgender Adolescents and Adults: A Retrospective Cohort Study, *The Journal of Clinical Endocrinology & Metabolism* (2023). DOI: 10.1210/clinem/dgad306

Provided by The Endocrine Society

Citation: Single hospital study finds transgender teenagers rarely choose to discontinue hormone therapy (2023, June 18) retrieved 28 April 2024 from https://medicalxpress.com/news/2023-06-hospital-transgender-teenagers-rarely-discontinue.html



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