

Controversies surrounding Puberty Suppression in Adolescents with Gender Dysphoria

Moving Forward the Ethical Debate

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Background In 2009, The Endocrine Society published clinical practice guidelines for the treatment of children and adolescents with gender dysphoria (GD). The guidelines^a recommend the use of GnRH agonists to suppress puberty in adolescence, and the use of cross-sex hormones starting around age 16 for eligible patients.

Problem definition There is no consensus on the use of these early medical interventions. In some countries they are part of the treatment protocol. Elsewhere it is not standard of care due to various ethical concerns, including fear for harms of the treatment and doubts about children's competence to make these far-reaching decisions.

Methods To gain more insight in the contexts of treatment disagreements and underlying considerations: (1) Systematic review of the literature on these treatment discussions; (2) Semi-structured interviews to identify considerations of key-informants (pediatric endocrinologist, psychologist, psychiatrist, ethicist) of treatment teams from 12 countries^b.

Conclusion Judgment on GD treatment is affected by fundamental ideas on the nature of gender and GD. As long as discussion remains on the above-mentioned topics, and as long as there are only limited long-term treatment data, there will be no agreement on treatment options.

Consensus needed There is an urgent need for systematic interdisciplinary and (worldwide) multicenter research and debate, not only on long-term outcomes, but also specifically on the nature of gender (dysphoria). The guidelines will only have a sound foundation once consensus is reached on these fundamental issues.

Six fundamental topics

Results The literature and the interviews show *six fundamental topics* that give rise to different, and even opposing, views on treatment of adolescents.

Opposing ideas Interestingly, The Endocrine Society guidelines are debated both for being *too liberal* and for being *too limiting*. Many teams using the guidelines are exploring the possibility of expanding the current age limits.

^a Endocrine Treatment of Transsexual Persons: An Endocrine Society Clinical Practice Guideline. JCEM 2009;94(9):3132–54 ^b Belgium, Canada, Denmark, Finland, France, Germany, Italy, the Netherlands, Norway, Spain, UK, USA.

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[†] Our colleague Professor Henriëtte Delemarre-van de Waal passed away on February 13, 2014. With this poster we would like to commemorate her.

