

## American College of Pediatricians® The Best for Children

PO Box 357190 Gainesville, FL 32635-7190 www.Best4Children.org

## 5 Physician Groups urge vote 'NO' on HB 1190

Dr. Michelle Cretella, President of the American College of Pediatricians, states:

"HB 1190 requires therapists affirm young children with gender dysphoria as transgender which guarantees <u>minors will be permanently sterilized</u> under the guise of treating a condition that would otherwise resolve in up to 95% of them with therapy that either affirms biological sex or promotes watchful waiting. This is criminal."

- \*Children with gender dysphoria (GD) believe they are not their biological sex.
- \*Gender identity is not inborn and can change over time due to many factors. ii
- \*75%-95% of children outgrow GD by late adolescence w/ watchful waiting or therapy that affirms biological sex.<sup>iii</sup> HB 1190 outlaws both approaches!
- \*GD Children affirmed as the opposite sex (as HB 1190 mandates) lose the chance to identify with biological reality<sup>iv</sup>
- \*100% of young children affirmed as the opposite sex go on hormones that leave them permanently sterile. v
- \*These hormones also carry a lifetime risk of potential side-effects: severe bone damage<sup>vi</sup>, cardiac disease, stroke, diabetes, hypertension, cancers.<sup>vii</sup>
- \*HB 1190 violates children's right to ethical psychotherapy and legislates them onto a path of sterilization and toxic hormones.
- \*HB 1190 criminalizes compassionate and competent mental health professionals committed to "First do no harm."

Testimony endorsed by: the American College of Pediatricians, the Association of American Physicians and Surgeons, the Christian Medical Association, the Catholic Medical Association and Youth Trans Critical Professionals (YTCP is pro-LGB adult T rights). Together we represent over 20 thousand physicians and healthcare professionals.

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## REFERENCES

<sup>&</sup>lt;sup>1</sup> American Psychiatric Association. *Diagnostic and Statistical Manual of Mental Disorders*. 5th ed; 2013:451-459.

<sup>&</sup>lt;sup>ii</sup> Zucker KJ, Bradley SJ. Gender Identity and Psychosexual Disorders. FOCUS 2005;3(4):598-617.

iii Diamond LM and Tolman, DL (eds.) APA handbook of sexuality and psychology. Washington, DC: American Psychological Association, 2014. See also: Cohen-Kettenis PT, Delemarre-van de Waal HA, Gooren LJ. The treatment of adolescent transsexuals: changing insights. *J Sexual Med* 2008;5:1892–1897.

<sup>&</sup>lt;sup>iv</sup> De Vries ALC, Steensma TD, Doreleijers TAH, Cohen-Kettenis, PT. Puberty suppression in adolescents with gender identity disorder: a prospective follow-up study. J Sex Med 2011;8:2276-2283.

<sup>&</sup>lt;sup>v</sup> Sadjadi S. The endocrinologist's office—puberty suppression: saving children from a natural disaster? *Med Humanit* 2013;34:255-260.

vi http://khn.org/news/women-fear-drug-they-used-to-halt-puberty-led-to-health-problems/

vii Feldman J, Brown GR, Deutsch MB, et al. Priorities for transgender medical and healthcare research. Curr Opin *Endocrinol Diabetes Obes* 2016;23:180-187.