

ILLINOIS STATE MEDICAL SOCIETY

**Resolution 11.2022-25
(A-23)**

Introduced by: Shirley Roy, MD, ISMS Member

Subject: First Do No Harm: Medical/Surgical Gender Transition Procedures
in Minors

Referred to: Council on Medical Service

1 Whereas, there is limited peer-reviewed scientific data and lack of validated
2 standardized selection criteria supporting medical-surgical gender transition procedures
3 for minors; and

4
5 Whereas, although some patients’ lives may indeed benefit from the transgender
6 process, the data regarding potential harm to how many, for possible benefit to what
7 numbers of patients, is not available; and

8
9 Whereas, patients trust medical professionals because they are viewed as trained
10 and knowledgeable; and

11
12 Whereas, complications from the procedures can lead to months of infections,
13 doctor visits, pain, and continued cost of expensive medications which impact entire
14 families; and

15
16 Whereas, the inherent uncertainty and possibility of error underlying many
17 diagnoses and treatments, particularly those based on social/science criteria, is difficult
18 for minors to understand; and

19
20 Whereas, many minors requesting sex-change surgery may instead be facing
21 other unrecognized psych-social challenges; and

22
23 Whereas, reports of benefits are often from those at the early-stage of
24 transitioning and it’s often 5 to 6 years later that the pattern of discontent arises; and

25
26 Whereas, media support of gender transition especially impacts young females
27 and treatments resulting in beard and deepened voice development is irreversible; and

28 Whereas, a published study showed that those who transition through surgery or
29 hormones have a higher mortality rate, particularly from suicide, and transitioners have
30 an increased risk for suicide attempts and psychiatric inpatient care; and

31

32 Whereas, sex transitions in minors impact not only patients but entire families;
33 therefore, be it

34

35 RESOLVED, that the Illinois delegation to the AMA submit a resolution
36 directing the AMA, in support of evidence-based medicine, to reserve endorsing
37 medical-surgical gender transition procedures for minors until peer-reviewed studies on
38 the issue become available; and be it further

39

40 RESOLVED that until such time, the Illinois delegation to the AMA submit a
41 resolution directing the AMA, to oppose individual, personal, counselling of minors
42 regarding gender transition, in all venues, until parental consent is obtained.

Fiscal Note:

None

Existing ISMS policy related to this issue:

The Illinois State Medical Society adopts the American Medical Association (AMA) policy titled "Patient-Reported Outcomes in Gender Confirmation Surgery, H-460.893, adopted in 2018, which supports: (1) initiatives and research developed by specialty societies and other relevant stakeholders to establish standardized protocols for patient selection, surgical management, and preoperative and postoperative care for transgender patients undergoing gender confirmation surgeries; and (2) implementation of standardized tools, such as questionnaires, developed by specialty societies and other relevant stakeholders to evaluate outcomes of gender confirmation surgeries. (2021 Annual Meeting; BOT 2019-OCT; Last BOT Review 2019)

ISMS supports efforts to ensure that Illinois public schools offering sex education or sexual health instruction in grades 5-12 provide medically accurate and developmentally and age appropriate comprehensive sexual education. (HOD 2012; Last BOT Review 2014)

House of Delegates adopted Res. 76 (A-95) which directed that the Society encourage the dissemination of information by schools to parents regarding the content of school sex education and/or family planning curricula and the reasons for including the various components in the comprehensive programs. (HOD 1995)

It is the policy of ISMS to support the concept of local Boards of Education establishing school based programs or clinics, that may provide education and wellness on health-related issues, as appropriate, that may provide health and sex education, counseling and access to physical and mental health care services, as determined by the communities in which the clinics exist. Local physicians should become involved in planning and delivery of those services. (HOD 1987; Last BOT Review 2014)

Existing AMA policy related to this issue

Medical Spectrum of Gender D-295.312

Given the medical spectrum of gender identity and sex, our AMA: (1) will work with appropriate medical organizations and community based organizations to inform and educate the medical community and the public on the medical spectrum of gender identity; (2) will educate state and federal policymakers and legislators on and advocate for policies addressing the medical spectrum of gender identity to ensure access to quality health care; and (3) affirms that an individual's genotypic sex, phenotypic sex, sexual orientation, gender and gender identity are not always aligned or indicative of the other, and that gender for many individuals may differ from the sex assigned at birth.

Opposing the Censorship of Sexuality and Gender Identity Discussions in Public Schools H-60.898

Our AMA: (1) opposes censorship of LGBTQIA+ topics and opposes any policies that limit discussion or restrict mention of sexuality, sexual orientation, and gender identity in schools or educational curricula; and (2) will support policies that ensure an inclusive, well-rounded educational environment free from censorship of discussions surrounding sexual orientation, sexuality, and gender identity in public schools.

Healthcare Equity Through Informed Consent and a Collaborative Healthcare Model for the Gender Diverse Population H-140.824

Our AMA supports: (1) shared decision making between gender diverse individuals, their health care team, and, where applicable, their families and caregivers; and (2) treatment models for gender diverse people that promotes informed consent, personal autonomy, increased access for gender affirming treatments and eliminates unnecessary third party involvement outside of the physician-patient relationship in the decision making process.

Clarification of Medical Necessity for Treatment of Gender Dysphoria H-185.927

Our AMA: (1) recognizes that medical and surgical treatments for gender dysphoria, as determined by shared decision making between the patient and physician, are medically necessary as outlined by generally-accepted standards of medical and surgical practice; (2) will advocate for federal, state, and local policies to provide medically necessary

care for gender dysphoria; and (3) opposes the criminalization and otherwise undue restriction of evidence-based gender-affirming care.

Patient-Reported Outcomes in Gender Confirmation Surgery H-460.893

Our AMA supports: (1) initiatives and research developed by specialty societies and other relevant stakeholders to establish standardized protocols for patient selection, surgical management, and preoperative and postoperative care for transgender patients undergoing gender confirmation surgeries; and (2) implementation of standardized tools, such as questionnaires, developed by specialty societies and other relevant stakeholders to evaluate outcomes of gender confirmation surgeries.

Affirming the Medical Spectrum of Gender H-65.962

Our AMA opposes any efforts to deny an individual's right to determine their stated sex marker or gender identity.

Eliminating Health Disparities - Promoting Awareness and Education of Sexual Orientation and Gender Identity Health Issues in Medical Education H-295.878

Our AMA: (1) supports the right of medical students and residents to form groups and meet on-site to further their medical education or enhance patient care without regard to their gender, gender identity, sexual orientation, race, religion, disability, ethnic origin, national origin or age; (2) supports students and residents who wish to conduct on-site educational seminars and workshops on health issues related to sexual orientation and gender identity; and (3) encourages medical education accreditation bodies to both continue to encourage and periodically reassess education on health issues related to sexual orientation and gender identity in the basic science, clinical care, and cultural competency curricula in undergraduate and graduate medical education.

Promoting Inclusive Gender, Sex, and Sexual Orientation Options on Medical Documentation H-315.967

Our AMA: (1) supports the voluntary inclusion of a patient's biological sex, current gender identity, sexual orientation, preferred gender pronoun(s), preferred name, and clinically relevant, sex specific anatomy in medical documentation, and related forms, including in electronic health records, in a culturally-sensitive and voluntary manner; (2) will advocate for collection of patient data in medical documentation and in medical research studies, according to current best practices, that is inclusive of sexual orientation, gender identity, and other sexual and gender minority traits for the purposes of research into patient and population health; (3) will research the problems related to the handling of sex and gender within health information technology (HIT) products and how to best work with vendors so their HIT products treat patients equally and appropriately, regardless of sexual or gender identity; (4) will investigate the use of personal health records to reduce physician burden in maintaining accurate patient information instead of having to query each patient regarding sexual orientation and

gender identity at each encounter; and (5) will advocate for the incorporation of recommended best practices into electronic health records and other HIT products at no additional cost to physicians.

Access to Basic Human Services for Transgender Individuals H-65.964

Our AMA: (1) opposes policies preventing transgender individuals from accessing basic human services and public facilities in line with one's gender identity, including, but not limited to, the use of restrooms; and (2) will advocate for the creation of policies that promote social equality and safe access to basic human services and public facilities for transgender individuals according to one's gender identity.