

QUESTIONS ABOUT

Growing Pains

Problems with Puberty Suppression in Treating Gender Dysphoria

Article: www.thenewatlantis.com/growingpains

Twitter: <u>@TNAjournal</u>

1. What are the main points of "Growing Pains"?

- The number of children receiving medical and psychotherapeutic care for gender identity issues is *on the rise*, and treatment is increasingly being recommended at *younger ages*.
- The arguments in favor of puberty suppression are based more on *subjective judgments and speculation* than on rigorous empirical evidence.
- The guidelines published by medical associations and advocacy groups give the *false impression* that there is a well-established scientific consensus about gender identity and puberty suppression.
- The claim that puberty-blocking treatments are "fully reversible" is **not supported by scientific evidence**, and possible side effects include abnormal bone and muscle development, neurological problems, and infertility.
- These treatments may make it more likely that patients whose cross-gender identification *would not persist past childhood* will continue to identify as the opposite sex into adulthood.
- There have been *no controlled clinical trials* comparing the outcomes of puberty suppression to the outcomes of alternative therapeutic approaches. The *FDA has not approved* the most common puberty-blocking agents for use in treating gender dysphoria. As the authors write: "Regardless of the good intentions of the physicians and parents, to expose young people to such treatments is to endanger them."
- *More research is needed* to resolve unanswered questions and to develop new ways to help people cope with gender dysphoria with less permanent and drastic treatments.



2. Isn't it a problem that the authors of "Growing Pains" dissent from the positions of important professional associations?

That depends on whose position is better grounded in scientific evidence. The sheer number of people who hold a certain opinion demonstrates nothing about its correctness.

The Endocrine Society, one of the professional associations the authors disagree with, acknowledges in its <u>2017 clinical practice guideline</u> for the treatment of gender-dysphoric/gender-incongruent persons that fully 19 of its <u>22</u> graded recommendations are **based on "very low quality" or "low quality" evidence**. None of its recommendations, according to its own standards, are based on "high quality" evidence. Surely this is an indication that further research and debate are required.

[Note: These numbers have been updated to reflect the new version of the Endocrine Society's recommendations. The previous text of this answer, based on the 2009 version, is available via the Internet Archive.]

3. Why should anyone read a science article in a publication that isn't peer-reviewed?

The Human Rights Campaign (HRC), among other critics, has tried to discredit *The New Atlantis* by pointing out that it is not peer-reviewed. Yet HRC promoted a special "gender revolution" issue of *National Geographic* — also not a peer-reviewed publication — which dealt with "how science is helping us understand gender." We will let readers decide for themselves whether HRC and its allies are truly concerned with scientific integrity, or simply looking for an excuse, no matter how feeble, to ignore medical experts who disagree with them.

The New Atlantis is editorially reviewed, like many other publications for informed but non-specialist readers, such as The New Yorker, The Atlantic, and, yes, National Geographic. When publishing essays on technical subjects, the editors of The New Atlantis consult a range of experts and fact-check rigorously. Unless the magazines mentioned here — and many other magazines, and all newspapers — should stop publishing on science because they are not peer-reviewed, this is not a serious reason for dismissing The New Atlantis.

4. Do contending articles get us anywhere?

It is sometimes jokingly said that for every study there is an equal and opposite study. Nevertheless, the presence of disagreement does not imply the absence of truth, only that debate between scholars is a necessary part of discovering the truth, even in the empirical sciences. In the special issue mentioned above, *National Geographic* acknowledges, with respect to puberty suppression, that "[puberty] blockers' long-term impact on psychological development, brain growth, and bone mineral density are unknown—leading to some lively disagreement about using them on physically healthy teens."



5. Is it true that Paul Hruz and Lawrence Mayer were paid expert witnesses for North Carolina in its "transgender bathroom" lawsuit?

Yes. Dr. Hruz and Dr. Mayer were hired as expert witnesses by lawyers for the State of North Carolina in its litigation with the federal government; they were compensated at rates of \$350 per hour and \$400 per hour, respectively. The average rate of the federal government's medical and psychiatric experts in this case was \$500 per hour. These fees are typical, and no more call into question the integrity and impartiality of Dr. Hruz and Dr. Mayer than they do the integrity and impartiality of the federal government's witnesses.

6. Doesn't Paul McHugh have a record of anti-LGBT work? Hasn't he been associated with hate groups?

Dr. McHugh has on many occasions been attacked personally by activists who are unable to discredit his work but see it as a threat to their own agendas. Nevertheless, his record as a scientist, clinician, and leader in the field of psychiatry is unimpeachable, as is demonstrated by his position at the Johns Hopkins University School of Medicine and his membership in the National Academy of Medicine.

The American College of Pediatricians (ACP), a professional organization whose 2016 statement on gender dysphoria in children Dr. McHugh signed, has been designated a "hate group" by the Southern Poverty Law Center (SPLC). This designation is an extremist expression of SPLC's policy disagreements with ACP, not an impartial assessment of ACP's activities.

7. Whatever the article may say, couldn't it be used to harm transgender people?

No research on controversial issues could ever be published — or any public debate take place — if the possibility of misuse were taken as a sufficient argument against publication. The possibility of misuse is all the more reason to read the article carefully firsthand, rather than taking someone else's word for what it says. Moreover, silence is no less potentially harmful than the misuse of scientific findings.