



SILVER RAINBOW

COTA SA'S SILVER RAINBOW COMMUNITY OF PRACTICE

QUESTIONS OF CARE: THE IMPORTANCE OF MANAGING HORMONES LONG TERM

In conversation with Dr Ana McCarthy

On 1 November 2022 COTA SA's Silver Rainbow Community of Practice was delighted to have Endocrinologist Dr. Ana McCarthy as our guest. Dr. McCarthy gave an inspiring and comprehensive presentation focusing on Trans Health Care Across the Life Span and The Importance of Managing Hormones Long Term. This event was facilitated by Cris Davis, Rainbow Hub Chair and Silver Rainbow Trainer. Below are some of the salient points made by Dr. McCarthy, noting that information in this area changes often.

What is Gender Dysphoria?

Gender dysphoria is marked by the discrepancy between physical and mental self-image and identity. It causes clinically significant distress. Not pathological, it occurs in all cultures at a rate of approximately 1 - 2% in any given population. Recent studies in US high school populations showed rates of 2.5%. Dysphoria can be treated with hormone therapy and surgery, though the end goal is not necessarily surgery - not all trans people want surgery.

While sex is assigned at birth, in the case of babies with ambiguous genitalia, it's difficult to make assumptions about which gender identity the child may actually have – it's not a linear spectrum. Sex expression, gender identity, gender expression, biological sex and sexual orientation are all factors as the person grows and develops.

Transgender Health Care

Health care systems should provide medically appropriate health care and not pathologize differences in gender identity. Treatment should be all about Respect, Harm Reduction and improving access to health services and resources.

With trans health care in particular, everything is done within strict guidelines, everything is documented and if any uncertainty exists, clarification and help is always sought. Some of the issues explored in Dr. McCarthy's clinics include how a person would like to be addressed, what their preferred pronouns are, if they have told significant people in their lives about their trans status and whether they have support in their lives. Clients receive help in assessing their goals with regard to therapy.

Risk Factor Assessments

Extensive medical risk factor assessments are always done – beginning with blood tests and sex chromosome analysis. Risk factor assessments also include a client's smoking history, the presence of severe migraines, blood clotting, cardiovascular issues, liver issues, bone density status and any history of stroke. If there are pre-existing conditions such as breast or uterine cancer, these would of course be treated first.

Once the diagnosis of Gender Dysphoria is confirmed, extensive mental health assessments also become part of the process. Clients are helped to understand the details of what any gender affirming hormone therapy might look like for them, including any possible fertility needs/ preservation of fertility needs. Capacity for consent is also assessed, as is readiness for treatment. If treatment is embarked upon, the client's progress is monitored closely, most especially any medical conditions that could be impacted by hormone therapy.

General Notes on Medical Assessment for Non-institutionalised Clients

Assessment is complex and would include the following - risk versus benefit, Informed Consent, regular monitoring, both clinical and laboratory, mental health/ emotional support assessment, support with gender expression i.e. clothes, hairstyle and grooming as well as consideration for gender specific-housing in terms of gender expression. Privacy is important wherever possible i.e. private rooms and private toilets. Personal safety is paramount. Each residential organisation needs to address issues such as these through their own policies There should also be respect for the person's right to make decisions, for their right to their preferred pronouns and for their sense of self. There also needs to be an understanding of the person's anxiety. Lastly, service providers should resist the temptation to make assumptions.

Considerations for Older People Taking Gender Affirming Hormones

Dr. McCarthy outlined some of the considerations for older people taking gender affirming hormones. These included mood changes, changing health needs, the continued capacity for informed consent, the presence of any Advanced Care Directives and the importance of clients' understanding that generally, their hormone therapy/ management would have to continue for the rest of their lives. Specifically, things like cardiovascular risk factors, need to be monitored closely since 'one size does not fit all', meaning that on-going individual management is essential.

Gender Affirming Care in Aged Care Residents

Another important factor to consider in Gender Affirming Care in aged care residents is that stopping hormones abruptly or denying transgender patients access to hormones may lead to depressed mood, worsening dysphoria, self-harm, attempted self-surgery and suicidality.

CASE STUDY - LAURA

Legal name - Joe, prefers to be known as Laura. 73 years old, assumed male at birth, long term dysphoria, which she could not disclose to the nursing staff. The residential aged care GP stopped Laura's medications when she moved in. As a result, she began to grow facial hair, get depressed and had thoughts of self-harm. Laura had significant past medical history, was obese, had deep vein thrombosis and limited mobility. In addition, she suffered from hypertension and PTSD. She had been on hormone therapy for some years. Like many other trans people in this situation, Laura became distressed. So, the question is - if patients don't feel safe to disclose their status and if residential aged care organisations don't ask the question about identity, how can residents get the medical/ social/ mental help they need?

Dr. McCarthy explained how it was critical that staff understand that Gender Dysphoria is the distress experienced if gender identity and sex identity are not completely congruent. Furthermore, that Gender Dysphoria may be alleviated by supporting changes in secondary sex characteristics through hormone therapy and possibly through surgery, along with changes in gender role. Peer support networks such as the Rainbow Hub are very important. Lastly, Dr. McCarthy reiterated that a caring, compassionate attitude - along with occasional compromise - is required for treating patients in transgender endocrinology.

RESOURCES

www.transhealthsa.com

www.shinesa.org.au

<https://auspath.org.au/2021/06/13/e-learning-module-trans-incl-gender-diverse-and-non-binary-primary-care/> (Module GPs can access)

<https://cotasa.org.au/silver-rainbow>

NB - Modbury Hospital's Trans Clinic is the only adult clinic in SA and is planning to offer mental health care support from early 2023.



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