



The Kelsey Coalition

Working to change the systems that failed our kids

PETITION for CALL TO ACTION

Urgent Request to the US Surgeon General: Protect Young People from Irreversible Medical Harm

Dear Dr. Adams,

We are alerting you to the [harmful hormonal](#) and irreversible surgical interventions that are being performed on gender-nonconforming children without one single long-term study to support their safety or efficacy. We request your examination of this urgent matter and consideration of a Call to Action. Clinicians are now administering powerful puberty-blocking drugs and cross-sex hormones to a growing number of gender non-conforming pre-adolescents. “Gender-confirming” surgeries — including mastectomies, radical hysterectomies, vaginoplasties, and orchiectomies — are now being performed on teenagers.

Parents who consent to these treatments are often [misled to believe](#) that their child will be at greater risk of suicide if they do not. There is [no evidence](#) to support this claim. In Oregon, parental consent is irrelevant: the law allows 15-year olds to receive [state-subsidized](#) hormonal treatments and surgeries [without parental knowledge or permission](#).

Young adults are also at risk of hasty medicalization. An increasing number of “informed consent” clinics provide cross-sex hormones to young people after only one or two visits. These clinics do not require mental or physical health assessments. Surgeries may be obtained within months.

In the past, hormones and surgeries were offered only to adults with a lifelong history of severe and unremitting distress, and only after extensive medical and psychological screening. Yet these same [life-altering medical procedures](#) are now offered to young people based on feelings that are likely to change with time, brain maturity, and non-invasive therapy.

The medical literature on the health effects of hormonal interventions [“in the pediatric/adolescent population is completely lacking.”](#) A recent [large cohort study](#), which tracked nearly 4,000 transgender-identifying adults receiving hormone therapy for an average of eight years, found that women's risk of heart attack tripled while men's risk of developing venous thromboembolism became five

times greater. The full extent of the medical harms of hormonal treatments -- prescribed for lifetime usage -- will not be realized for many years.

The only [long-term follow-up study](#) among adults who surgically transitioned found substantially higher rates of overall mortality, suicide, suicide attempts, and psychiatric hospitalizations. These risks did not become apparent until ten years after transition.

An increasing number of young people are beginning to [express their painful regret](#) of surgeries and hormonal interventions that have irreversibly impacted their health, appearance, fertility, and sexual function. Many report that they did not receive proper counseling and were not encouraged to consider non-invasive options.

We respectfully and urgently request your consideration of a Call to Action to increase public awareness and alert healthcare professionals to this critical public health matter. As the Nation's Doctor who has pledged to lead with science, a Call to Action will encourage an evidence-based treatment approach to the exponentially growing number of gender-questioning young people who are currently subjected to serious medical harms and irreversible fertility risks.

Young people should not be offered life-altering hormonal and surgical interventions that are not supported by rigorous studies establishing long-term efficacy and safety. The risks of irreparable harm and regret are too great.

Sincerely,
Members of the Kelsey Coalition

We are a non-partisan organization whose sole mission is to promote laws and policies that protect young people from medical and psychological harm. Please visit our website at www.KelseyCoalition.org for more information.

The online petition received 1,474 signatures. They may be viewed online: <https://www.ipetitions.com/petition/urgent-request-to-the-us-surgeon-general#comments>

Below are some of the comments received (460 comments in total).

Medical Victims

Anonymous

Jul 04, 2019

I am a detransitioned woman, meaning I identified as transgender and transitioned, later realizing my gender dysphoria stemmed from a complex series of emotional issues that could not be resolved by changing my outward appearance. I identified as a trans man from the ages of 15-19, and was on testosterone for nearly 2 years. While I was desiring to transition, I spoke with multiple therapists and other adults at my school, and community members who affirmed my identity in a way that did not encourage critical thought and self examination. While I was transitioning, I began to see a new therapist and had life experiences, such as moving away from my family and living on my own, that helped me to emotionally mature and examine my emotional distress in a new light, and I slowly began to realize that my dysphoria, discomfort with my female sex, was caused by a destructive family dynamic in my upbringing, feelings of depression, low self worth, hopelessness, and my eating disorder. By this time, however, I had already been on testosterone for 17 months when I realized with horror that I had been led down the wrong path, away from healthy self exploration and growth and towards a very surface level, highly invasive medicalized reality that has left me with a changed body and health complications I am yet to fully understand due to the dearth of research on cross sex hormone usage. As the petition describes, we are currently looking at a global upsurge of adolescent females looking to transition and the current model of care focuses on "affirmation" and medical transition. My own experience of starting testosterone was through "informed consent" where I was given my prescription after only a <1hr appointment at a clinic. There needs to be an emergency investigation into the exponential growth of youth seeking to medically transition, as well as the striking demographic change of those wishing to do so. Nothing can be lost from taking the time to work with a competent therapist to explore emotional issues and taking the time to emotionally mature before making a life changing decision such as medical cross sex transition, but so much can be lost when vulnerable, confused people such as myself are given hormones and surgery more or less on demand. The consequences of this phenomenon going unchecked will be catastrophic.

Judeṭ-Safi

Jul 04, 2019

I was severely gender dysphoric as a child to the point where sometimes suicide seemed like the only option. But I was fortunate that I had a great source of emotional and psychological support, and he helped me to discover the root of my dysphoria and to accept myself. I'm so grateful that I had someone willing to actually help me find the causes of my dysphoria so that we could cure it, instead of rushing into making modifications to my body when it was my mind, not my body, that was the problem

Anonymous

Jul 05, 2019

I'm a detransitioned woman. I got a double mastectomy and was on hormones for 9 months. I regret it every day of my life. It was the worst thing that ever happened to me.

Jordan Adams

Jul 14, 2019

I was diagnosed with gender identity disorder at age 18. I was given hormones and surgeries that I regret just a few years later, because not one of the providers I saw told me I had other options. If a 20 year old isn't capable of understanding a complex mental illness like gender dysphoria then why do we expect children to?

Anonymous

Jul 05, 2019

Dear Dr. Adams,

I am writing as a detransitioning woman. I was 6 years and 9 months on testosterone. I was not given the adequate psychological and medical help as I was also suffering from mental health issues unrelated to transitioning. I was also never informed of the side effects and changes on T.

I suffered a lot of side effects on T, without knowing that my health went backwards due to T even though I was completely healthy pre-T.

I suffered from:

severe hair loss, cutis verticis gyrata, seboherric dermatitis, acne (face, chest, tummy), red spots on my arms and chest, itching especially where sweat stays, looking way older for my age, diarrhoea, urge to vomit but almost always failing to do so, excessive sweat, weight gain (around 30 kgs), shortness of breath, chest pains, having to drink more and as a result having to pee more but a lot of times I went to pee often, having to "push" to pee even when having a full bladder, fatigue, changes in liver test results (still waiting for ultrasound results to confirm if I have any damage, and no, I don't drink or smoke), anxiety, depression, some memory loss and inability to concentrate.

Now I am stuck in a body I hate for ever. My hair was very dear to me as it was very thick. I was not warned about the changes, even this one. Had somebody told me that hair loss is a side effect of T, I wouldn't have taken it, besides the other side effects.

I would like to add that since weight gain seems to be a side effect of both artificial oestrogen and testosterone, nobody should even be given these hormones for this one reason as obesity leads to a vast range of serious health problems.

Furthermore, I believe that people with mental health problems should be helped in other ways. Hormonal therapy is never the answer, as in my case and those of other people, taking hormones resulted in a destroyed body, which we will have to live in for the rest of our lives. Secondly I want you to think about the large possibility of media influence on people who claim that they are transgender and want to medically transition. It happened to me and other people. Being trans seems to be a fad at the moment, and it will eventually die down. I expect detransitioners to be plenty in around 10 years time and all those who sought medical transitions will end up living in a permanently altered body, regretting what happened for the rest of their lives. I was personally just 20 when I was prescribed testosterone and to think that I heard and saw myself last at that age grieves me, especially when considering that I might live for more than 40 years more.

Kindly please note that I also tried to commit suicide after just 4 months on T. Clearly, taking testosterone made things much worse for me even at an early stage but I wasn't suggested to stop. Had someone from the medical field suggested that. I would have led a better life, although I was definitely misdiagnosed with GID after saying that I like wearing trousers and I hated my heavy periods. The diagnosis was done after only two sessions of one hour each, which are certainly too few for something so life changing.

Although I am going through a rough time myself and I am actively seeking to cope, I am trying my best to prevent that something so barbaric happens to other people, especially young ones.

Best regards,

A.

Andy D

Jul 16, 2019

When I came out as a trans man at 17, I knew that I wanted to take testosterone and have top surgery (double mastectomy). Every day I wished to be a man, but mental health issues prevented me from transitioning until I was 25 years old. I changed my name legally and after 8 months on testosterone, I had top surgery.

I'm now 28 years old and have been detransitioned for a little over a year. After more than a decade of dysphoria so crippling I could hardly leave my house, something very strange happened to me: I realized that I would never become male and I had learned to be okay with that. This happened to coincide with starting treatment for depression, something which was not attempted with me prior to transition. There was little attempt to explore any sort of trauma or underlying issues I may have had, and the nature of my issues meant that I did not recognize them for what they were.

It's scary to me that children are being allowed to transition. We don't know the full impact transition has on adult bodies, much less bodies that are still growing. Puberty blockers, hormones, and surgical interventions are not neutral acts that are "easily reversed" as some would suggest. As a woman who now has a flat chest, my options for reconstruction are limited and the risks associated with more surgery are not appealing to me. Furthermore, I will never be able to breastfeed, as the actual breast tissue cannot ever be replaced.

My own gender dysphoria has become so manageable, something that I was told was impossible. I am afraid that many people of all ages will be given unnecessary medical interventions instead of receiving social support, proper education, and mental health care. I believe that transition should be limited to rational-minded adults who have been through rigorous therapy, and that is simply not happening at this time.

Thank you,

Andy

Christina Norwood

Jul 22, 2019

I have raised my now 22 year old who took Lupron for 10 months. Before her one year treatment ended in 10 months, due to the devastating side effects, that we were NOT made aware of, had treatment for medical issues she has NEVER had before, and now at the age of 22, just had to make the devastating decision to have a Hysterectomy, SOMEONE BETTER STAND UP AND TAKE NOTICE NOW!! IT IS PAST TIME AND NEEDS TO STOP BEING PUSHED UNDER THE RUG! She is now living with Osteoporosis as well!!! If someone who has authority to hold the pharmaceutical company and doctors accountable now, then those people should be held accountable as well!!! SHAME ON ALL OF YOU FOR DESTROYING LIVES FOR YOUR OWN PERSONAL GAIN AND KICKBACKS!!!!

Jillian Clare

Jul 22, 2019

My young sister declared she is a transgender. Never in our life did she show ANY signs of being/wanting to be male. A therapist affirmed her in being so, the school allowed her to socially transition. The gender clinic would of prescribed Testosterone for a 13y/o female. I know my sister, tho being away at College, then coming home and seeing her in a complete disassociative state is completely beyond me. How can a whole society let down "my sister ". Why are ADULTS, & the Medical profession be allowed to do HARMFUL therapeutic & medicalizing of children & and young adults. This is beyond reality- I now must focus on my sister and do all I can to save her from herself.... Dr. Adams - STOP this incredibly insane practice of harming our young.
STOP THIS FOR MY SISTERS SAKE.

I was diagnosed with gender identity disorder as a 15-year-old boy in 2001, and underwent SRS three years later at age 18. When I began visiting a gender therapist I felt deeply convinced that I was inwardly female in some way, in my identity, my soul, or my brain. This female gender identity arose suddenly, but I was absolutely persistent in maintaining that I was truly female. My diagnosis was confirmed by two therapists, one of whom had seen me for many years starting from childhood, the second of whom oversaw the period of my transition, and who had many transgender clients and ran group sessions for them. My diagnosis was supported also by the opinion of my endocrinologist, whose practice also served many transgender patients.

I had often wished to be a girl through my childhood, but any dysphoria I might have felt as a child was not too pronounced because gender roles were not pushed too harshly on me. I began to experience severe gender dysphoria beginning at age 14, and began to make gender-nonconforming fashion choices, though these were limited to makeup and grooming, rather than wearing girls' clothing. My choices disturbed my mother, who demanded explanations for my behavior until she teased out the part of me that wished to become a girl, and then told me she had always known, had seen me as a girl when I was an infant, and began buying clothing and accessories to affirm my new identity, despite having made me feel ashamed of much milder forms of gender-nonconforming behavior. Before she chose to affirm cross-gender identity, I was capable of understanding myself as someone who was not a girl, but who wanted to be a girl, and I was attempting to deal with my gender dysphoria on my own terms, as best I could. After she affirmed my cross-gender identity and introduced me to the ideas of transgender (at the time it was still called transsexual) culture, I never backed down from it, and felt I had to pursue hormones and surgery in order to fix my faulty body, since it seemed disgusting for a girl to have a male body.

Though my transition was unusually successful by the standards of the time due to halting male puberty, in my early 20s I began to intellectually question the ideas I had been encouraged to believe, especially that through my transition I had stopped being male and become a real woman. My dysphoria did not subside, but became more pronounced in many ways because I no longer had the option of moving past it. I tried to accept what I had been told to believe about my body, that it was a woman's body, that my genitals were just like a woman's, and not disgustingly mutilated. I still experienced the feelings that had made me want to believe I was a woman, and even as my doubts grew I took comfort in my ability to imitate a woman, and pride in the knowledge that I was unusually good at it. By my mid 20s I was no longer able to inwardly regard myself as a woman, and began to accept that I was, in fact, a eunuch who looked like a woman. I began to realize that I had become vulnerable to an ideology that promised to fulfill an impossible desire, and that I had done great damage to my health and wasted many years of my life. I cut off contact with my family. By the time I turned 30, I finally felt able to look back on my life and consider the events and thoughts that led me to experience gender dysphoria, and to consider how I had been encouraged to develop a delusional identity in response to my dysphoria. I tried to distract myself with work, study, and hobbies, but I went through phases of extreme, suicidal depression and distress at my mutilated body, sometimes despairing that it was still not a woman's body, other times wishing it were simply the healthy male body it could have been. As I watched the practice of transgender medicine expand to more and more youth, I began to feel I had an obligation to speak my thoughts truthfully. I felt I couldn't survive speaking my own truth, and I felt deeply suicidal anyway, so I began writing. My suicide attempt failed, but I produced this story: <https://archive.fo/oaU7V>

I can't know for sure what would have happened in my life without being encouraged by my family and the medical and mental health professionals they hired to see myself as female and to accept the idea that I could alter my body to conform to my feminine identity. Perhaps I would still have decided to transition someday, but I doubt it. I had the awareness to understand myself as someone who wanted to be female but couldn't be, and I don't think anyone but my family could have influenced me strongly enough to change that idea. I was discovering a compromise that worked for me, but that compromise, mild as it was, was so disturbing to my family that they thought it would be better if I were a girl, and my therapists offered me what seemed like an escape from my shame. I wish I had simply been given the time to explore my own sense of self on my own terms, and to make my own mistakes. If I imagine myself now as an adult man, I know a part of me would still feel feminine, maybe even dream of being a woman, but I think that's fine. Gender identity simply seemed to become less important as I matured. I just wish my body were healthy and whole.

Dear Dr. Adams,



I am in full support of this petition. As founder of 'Lupron Victims Hub' ("Lupron" being the most commonly prescribed 'puberty blocker'), I have received untold numbers of emails over the decades detailing the physical and mental health adverse effects that Lupron has caused women, children, and men for 'treatment' of various indications such as endometriosis, IVF (including egg donors and surrogates), prostate cancer, precocious puberty, and fibroids. I have yet to receive contact from a transgender Lupron victim - but I'm afraid that I will. If women, children, and men, receiving Lupron for a multitude of reasons report serious health problems post-lupron, why would the transgender population be any different?

A number of concerned parents of gender dysphoric youth (children who are seeking to start Lupron) have contacted me, and all these parents report they were told "Lupron is safe", "Lupron is reversible", "only minor side effects" - assertions that are blatantly false. One mother stated she and her daughter were told "Lupron is 100% safe, and has been well studied". Knowing that nothing can be 100% safe this mother did her own research, and was shocked by what she read on my website. Lupron's risks are well documented in the medical literature (i.e., see: <http://lupronvictimshub.com/risks.html>), and patients and parents are not being provided honest and accurate information.

As Surgeon General, you should be concerned about the disinformation campaign (suppression of Lupron's risks) by the ubiquitous proponents of such hazardous 'treatment', and you should also be concerned about the lack of compliance to NIOSH guidelines for proper handling and administration of the "hazardous drug" Lupron (please see <https://www.hormonesmatter.com/nightmare-lupron-street/>) - these are matters of public health. And most of all, as Surgeon General, you must protect children and the youth (and women and men) from human experimentation without informed consent - which is precisely what Lupron "treatment" is when accurate and honest information is withheld.

"I believe that a moratorium on and an investigation of the use of lupron needs to be instituted immediately" were words I wrote in a 1997 testimony to the Mass. Joint Committee on Health Care (<http://lupronvictimshub.com/documents&correspondences.html>). As the years and decades tick by without action, and the victims accumulate exponentially, I wonder how many tens of thousands (? millions) would have been spared in these intervening 22 years had action been taken in 1997. (The disgraceful and demoralizing, yet successful, marginalization of this critical mass of Lupron victims is best explained by the nefarious machinations exposed in the 'Klein case' [<http://www.hormonesmatter.com/lupron-thyroid-broken-scales-justice/>] and by the fraudulent data uncovered within Lupron's clinical trials [<https://impactethics.ca/2014/05/02/hidden-clinical-trial-data-about-lupron/#more-1297>].)

And now Dr. Adams, informed by this 2019 petition, you have the ability to put a stop to the carnage. This is not said in hyperbole - see FAERS data (<http://lupronvictimshub.com/aers.html>) and/or search medication review websites or FaceBook groups, where the widespread extent of serious, heart wrenching complaints as a result of Lupron prescription becomes evident. See also my 'Links' and 'Media' pages for further resources.

Please do not let years or decades pass without addressing what can only be described as a hidden health care crisis. And please do something - anything - to prevent more children from being added to this pile of human misery. (To read email excerpts of children harmed from Lupron treatment for precocious puberty, see <https://www.hormonesmatter.com/lupron-precocious-puberty-parents-patients-speak/>.) Perhaps in your hands, there can finally be open acknowledgment of the serious adverse effects associated with Lupron 'therapy', and hopefully medicolegal advocacy for this suffering and damaged group can then follow.

Otherwise, if the status quo continues, when the transgender population encounters serious medical and mental health problems from Lupron - and they will - and they contact me looking for help and direction ... what should I say, and where should I send them?

Respectfully submitted,

Lynne Millican, RN, BSN, paralegal (disabled post-lupron)
Founder: www.LupronVictimsHub.com

Jacqueline Schloen

Jul 23, 2019

MY CONSENT WAS NOT INFORMED when I unwittingly underwent an irreversible chemical sterilization as part of a "fertility treatment"!?!? This was done to me under the guise of a medical treatment AS AN ADULT and eleven years later, remains the single most devastating mistake of my life. Let there be no mistake about it: a chemical sterilization is excruciating, generating an extensive list of debilitating, long-term side effects, which make it impossible to continue with a normal life (go to the Lupron Victims Hub for further details). Hormones do not just affect the reproductive system, but every other system of the human body! I remain baffled as to how it was ever possible to legalize gonadotrophin releasing hormone agonists, seeing the sheer devastation they cause in the human system. They are not fit for human consumption under any circumstances! SHAME, SHAME, SHAM on anybody who is involved in administering this poison to anyone, let alone young children.

Anonymous

Jul 22, 2019

Please stop this from being allowed to be done to another human. Lupron was only created for men with prostate cancer to keep them comfortable until they pass away. It is pure poison. Would you allow your family to have this done to them? I would hope not or you would show your disregard for them and their daily assistance.

Grandma

Jul 22, 2019

How did we get to this point, where we need to ask the Surgeon General to stop the harming of our children! Read the comments here - First Do No Harm. Dr. Adams protect our children, grandchildren, from the harms.

Suzanne Preston

Jul 23, 2019

Prescribed ONE shot of Lupron 3.75mg for a small benign fibroid removed by hysteroscopy. Drug caused SEVERE irreversible hernia resulting in multiple abdominoplasties. Fascia is weakened by (temporary) lack of estrogen. Located several other female patients with the same injury. Hernia is a side effect listed in the physician's desk reference BUT only for men, and the severity is misrepresented. Incurred \$50,000 in medical bills not covered by insurance. Plaintiff in a \$10 million lawsuit. Contact me. DON'T TAKE LUPRON!

Barbara Bittinger

Jul 24, 2019

These drugs like Lupron are a multi billion dollar money making poison. I should know it destroyed my life after only 5 doses. I'm disgusted that they give it to children for any reason. FDA do your Damn job. You are corrupt and will face the music from being corrupt one day. Repent and make it right.

Parents

Anonymous

Jun 24, 2019

Several children in my daughter's small middle school identify as transgender and two have already been on hormones for over 2 years, which will result in permanent sterilization. I have tried to find a therapist for my daughter to help her cope with feelings of sex dysphoria; however due to laws in place in my state, there are no therapists available who will not immediately push her towards gender transition. She was seen one time by a counselor locally for suicidal ideation, and was assessed to be a "transgender male" after a single visit of less than an hour. It is inappropriate to start children on powerful medications with life-altering effects on the basis of their own feelings alone. There is no diagnostic test to show which kids might benefit from such treatment and which will be harmed. No other treatment with such catastrophic potential side effects are given to children as a first line treatment without any controlled studies showing a benefit. Parents rely on doctors to give them reliable information and to promote treatments which are safe and effective, not push experimental treatments based on political ideology.

Alice Hope

Jun 24, 2019

What happened to "First do no harm?" Why is the significantly high rate of transition-regret not taken into account? These teens are vulnerable and need someone with common sense preventing them from rushing into life-altering procedures and hormones

Lynn

Jun 24, 2019

There is no reliable diagnostic criteria, no evidence-based treatment that demonstrate long-term improvement, and all evidence counter to affirmation surgery is silenced as bigotry rather than rationally investigated and evaluated. Stop this madness.

John Delk

Jun 24, 2019

Our teen daughter was struggling with chronic anxiety, depression, and OCD. She suddenly became fixated on transitioning to a male identity after befriending other trans teens on social media. She quit seeing her regular therapist. Then a medical doctor prescribed her testosterone after just one visit and a note from a different therapist who had only seen our daughter one time as well. This has only exacerbated her mood and behavioral problems. She still has depression, anxiety, and OCD just like before. The physical side effects are also causing her difficulties. And there is no controlled scientific study showing the harms or benefits of such hormones. Yet no therapist, psychologist, or doctor will spend time investigating her overall mental or physical health because these medical professionals are no longer permitted to do so and instead must merely "affirm" the alternate gender identity. I urge the Surgeon General and the medical community at large to seriously investigate what is happening to kids, teens, and young adults.

Concerned father

Jun 20, 2019

My daughter decided she was my son after several other girls at her small school came out as transgender. Her 14 year old mind found no issue with immediately starting treatments and she found nothing but eager support from local therapists and endocrinologists. Only my wife took the time to understand her motivations for changing and suggested she delay life-changing decisions. Why isn't this a standard of professional care? Do we routinely prescribe diet pills for body dysphoria? Do we encourage "being your true self" when a child starts cutting? The medical profession has been convinced that there is "science" to support medicalization when there is actually nothing but a series of self-referential talking points and circular reporting initiated by activists and the Human Rights Campaign. There is no real data to analyse because no one has ever collected it. Please stop the medicalization of our children for profit and political agendas.

Stacy Daumeyer

Jun 20, 2019

As the parent of a gender non conforming child I feel completely let down by the medical community. Transgender Clinic offered hormones on the first visit. They did not recommend therapy. Only wanted to help us make the school accommodate our child. I felt bullied by the head of the program.

KD Williams

Jul 05, 2019

Please protect our children! My child declared she was transgender at 12; right in the middle of the trauma of puberty. If allowed she would choose full mastectomy and hysterectomy at 12. This is horrifying to me! Children in Oregon can start hormone therapy and surgeries at 15 without parental consent or knowledge; why?! A child in Ohio was taken from her parents when they asked their daughter to wait...no signs of abuse other than NOT agreeing with hormone therapy and a sex change for their child! Dr Ray Blanchard, PHD Psychologist was banned on twitter when he stated in his lifetime of research (he is an expert in trans/Canada) Blanchard explained his clinically-informed opinion that "sex change" surgery should not be considered for any patient until that patient has reached the age of 21 years and has lived for at least two years in the desired gender role." Dr Blanchard was suspended for hateful conduct for expressing a lifetime of research in a tweet that went against the trans activists narrative. While activists may find this offensive, Blanchard correctly referenced the true statistics on gender dysphoria. Although the Ph.D. psychologist supported sex-change surgery for 21-year-old adults whose gender dysphoria has persisted against other forms of treatment, he acknowledged that even post-operative transgender individuals are still biologically male or female beneath the surgical changes. No matter how good transgender surgery gets, a biological male still has X and Y chromosomes in virtually every cell of his body and a biological female still has two X chromosomes. No surgery or identity can alter this. Children should not be offered life-altering hormonal and surgical interventions that are not supported by rigorous studies establishing long-term efficacy and safety. The risks of irreparable harm and regret are too great! Please help us!

Susan

Jul 02, 2019

Our daughter, at around age 15 began to think that she was transgender. She is now 17 and is considering transitioning to a boy as soon as she turns 18, believing lifelong treatment of synthetic testosterone, permanent body altering surgeries, and sterilization is the answer. She said she likes boys, but also believes she is a boy. We've talked to doctors and psychologists we know, off the record, who've expressed to us their opinion that taking hormones long term and that removing breasts and ovaries is gravely harmful to the majority of young people, but that laws keep their "hands tied."

She has been accepted to a public university in the fall. She knows transition will be easy to start once on campus because there is very little medical oversight of this issue at the campus clinics. We learned this government funded university provide gender "treatments," such as taking synthetic testosterone, with very little time spent evaluating the student. We have reached out to doctors, counselors for help, but because of laws and special interest groups, it is VERY difficult to get any help other than from those who affirming that she should pursue medical treatment

Shanna Pendergrast

Jul 02, 2019

I can tell you from experience that my son's gender dysphoria is based on underlying issues. He is Aspergers and ADHD, very socially awkward, and has never had a close friend or a girlfriend. He was influenced by groups online because they "accepted" him. His counselor at college told him in the very first session that yes he's transgender. Last I checked you don't diagnose in one session. Please Please stop accepting this idea "fad" at face value. You have got to ask yourself why this is so popular now? It's because it's become a popular thing to do.

Brenda Ellis

Jul 02, 2019

No child should be subjected to surgery. They need therapy first as long as it takes.

Dan Harder

Jul 02, 2019

Please do the right thing and issue a statement on the harm of gender transition treatments on children. It's child abuse.

EJ Green

Jul 02, 2019

As grandmother in a relatively small community I have ran into other grandmothers whom like myself have granddaughters that believe themselves to be transgender. After living decades of seeing contagious ideologies that young girls have faced it is devastating to us that physicians & therapists are readily affirming these young with life altering hormones and surgeries! Please hear our pleas Dr. Adams and stop these dangerous practices being done to our children & young adults, issue a call to action. First do no harm to our grandchildren!

Anonymous

Jun 24, 2019

Please help us heal our children. We know them best and know in most cases transition is not the best solution. My son came out as transgender last September and since that time his mental health deteriorated rapidly. Prior to his trans id he was a straight A student and an Eagle Scout. After his trans id he could barely get through his senior year of high school. He was prescribed hormones after 2 visits. He admitted in September that he never knew he was transgender until he realized transgender was a thing. He said it helped explain to him why he always felt different and why he never fit in. I will be the first to say go ahead and transition but only after he seeks proper medical care for years to address his underlying mental health issues. For many of our kids being transgender and transitioning is believed to be the solution to all of their problems. For most, transition just introduces new problems. We need help from the medical community now. PLEASE!

Szilvia Gresham

Jun 25, 2019

There is a serious ethical problem in allowing irreversible, life-changing procedures to be performed on children who are too young themselves to give valid consent. My 15 years old daughter told me a few months ago: "Thank you mom, you didn't let me change my gender a year ago, I don't know what was I thinking! I'm so thankful you were strong for me!" Study shows 75 to 95 percent of gender-dysphoric youth end up happy with their biological sex after simply passing through puberty.

Dear Dr. Adams,



I wish you had known my daughter. She was quite amazing and really poised for success after her high school education where she received top honors and many accolades. There is literally nothing that could have prepared my wife and I for the year that followed high school when she suddenly claimed a transgender identity while away at college and severed ties with us. My wife has done an amazing job as the family historian and has saved many of her school papers, photographs and the like assuming at some point she would pass these on to our daughter to enjoy. Now we dream of the day when these documents, all 18 years of them, might be used in the court of law as evidence that only coercion and undue influence could lead to such a drastic dissociation from her reality and to the medical harms that have been enacted upon her. Her voice is deep, her chin is bearded, her breasts are gone, her uterus is shriveling, her heart is being stressed, and this list continues as the time on cross-sex hormones is allowed to continue. The documents we have tell a different story of the daughter we love and as the father of this truly amazing young woman, I am heartbroken.

Our daughter, like countless other young people, joined what has come to be known as a 'trans cluster' where most, if not all friends in the group, claim they have gender dysphoria and then seek services for this condition. It is then off to the races and parents are at a loss to stop the medical 'care' our children have sought. Practically every major children's hospital has a gender clinic today where 'children' up thru age 21 or 25 can seek services. The aids clinics from years past have jumped into this revenue producing business as has Planned Parenthood, college campus clinics and telemedicine clinics. I would love to have the opportunity to share the details of my own daughter's university and the clinic where she is being seen to turn her into to a robot of the transgender movement. This experiment will fail and the American medical community will once again have blood on its' hands much like the opioid crisis. Your work on the opioid crisis has been swift and life changing for the myriad of families caught up in this crisis. I do hope you can see the parallels to the looming transgender crisis.

The level of stress and mental anguish that our family and others have experienced is not to be discounted. I have personally connected with many families where suicidal ideation and depression have been very real for the parents and siblings of these young people. Many cannot find proper mental health care for themselves in a society that has been hoodwinked to discount science and historical truth to believe in gender ideology.



While I know little of my own daughter's life now save for the occasional insight thru a social media post here and there, I know her delusion is not likely to last forever. I know this social contagion will someday come to pass as all social contagions eventually do and that she will fully mature and hopefully snap out of it. I also know she will need a great deal of care when this happens. Please consider what this looks like for these young people. While right now many young people are quite literally parading their scarred chests with surgical drains, their bottles and syringes full of testosterone, and their newfound identities on social media, what is it they are really telling us? Please consider making an account on Tumblr or Reddit and type in top surgery, testosterone, FTM, MTF, binding, etc. You will get a window into their world and it is not a world in which you would want your own child to be hanging out, I can assure you.

I keep a document I have titled 'The Ugly Truth of Gender Ideology' where I copy and paste some of the more shocking news in the world of gender ideology. These include 'top surgery' for a young down syndrome 'transgender man,' prosthetic penis' for 5 year old girls, transgender porn stars visiting college campuses, comprehensive sex education curriculums teaching children they can be 'born in the wrong body,' drag queens who have been previously accused of sex crimes reading at story hours in public libraries, and cross sex hormones being prescribed to already seriously ill young people.

It is common sense to label the above perverse and unethical and to call it grooming. Families are literally desperate for empathy and action from authoritative bodies like the Office of the Surgeon General whose mission it is "to protect, promote, and advance the health of our nation." These are our loved ones and we want them to fully mature prior to undertaking drastic measures that are not in alignment with their historical reality. Our young people are our future and they deserve better than the lack of respect and care they have been given. Please help us.



BB Green

Jun 25, 2019

Our MD not understanding the magnitude of the transgender crusade suggested we go to a prestigious university's gender clinic for an assessment. After spending only a couple of hours with us at this clinic, proclaimed her to know herself, at 13y/o, to be a transgender. Without looking at any other mental health or physical health issues. The therapist also alluded to the fact that if we don't "accept" this identity the increase risk of suicide to be a factor. This therapist also told us that we should start her on Testosterone, and could make an appointment that day with the MD. I asked, "the doctor would put my child on T -today?" She said "yes, she will do as I say." My husband, male, has never taken hormones himself, let alone allowing a 13-y/o female to be prescribed Testosterone.  



Fred G

Jun 25, 2019

My granddaughter had previous my issues, tho. Finding online she could change her name, and identity her therapist and doctors expedately reconized her transgender identity and wld of stared her on testosterone in one day. I pray for her to be able to wait until adulthood to make sure she want HRT & life altering surgeries!  



Joy Flores

Jun 23, 2019

went to a gender clinic which affirmed and offered to prescribe my 13 year old daughter Testosterone – on that same day! In a private consult myself with this MD, who was NOT an ENDOCRINOLOGIST, disclosed to me "their clinic is having a harder time distinguishing between 'real' and 'social influenced' trans kids". I also asked her "with no long term studies you're are giving young females an adult male hormone, how do you sleep with yourself at night"? Her reply, "it makes them SO HAPPY"  



Kathryn Blankenburg

Jun 23, 2019

This has become such a political issue and trans activists are absolutely skewing the facts and shutting down conversation from anyone who questions their logic. I'm not a hater nor am I transphobic. As a parent, I understand what a vulnerable time the teenage years are, how brain development isn't even complete until the mid twenties, and how dangerous it is to make decisions like hormone therapy at such a vulnerable young age. Teens aren't truly cognizant of the long term impact of some of their choices as their brains don't work that way yet. Our youth are vulnerable and need to be protected. I'm sad to think how we will look back at this time in our history. I think today's teenagers in 20 or so years will be angry that those adults who knew better didn't fight harder to protect them.  



Anonymous

Jun 23, 2019

They are children for god's sake! How can they know,want or decided what they want ? They should be allowed to reach late puberty at the very least before even ANY tests and investigations are done. Ridiculous.  

Margaret Arader

Jun 23, 2019

Please listen to these parents. They love their children and they need your help. Our country's children need your help. Our entire society needs your help to put an end to this nightmare. We need someone to stand up and put a stop to this ever growing and outrageous medical malpractice. The only reason there is not a massive outcry about children, teens and young adults being treated this way is because well funded activists have deliberately confused the issues and used misleading language and shifting definitions, so that most people have little idea what is going on, and the rest are afraid of being called bigots. Well it is not bigotry to try to protect vulnerable young people from lifelong physical harm and mental anguish. Please help.  

Jessica Fishburn

Jun 22, 2019

This is the most heart wrenching experience we as parents have gone through. Our son started college in the fall of last year and four months later began hormone therapy. The Gender Clinic he went to prescribed hormones immediately without having him undergo a psychological evaluation. Prior to college our son was a normal young man with many interests and even had several girlfriends in high school. He is now angry, depressed, anxious and looks extremely frail. This madness has to STOP!!! I plead with you to take this matter seriously and end horror!

Tatyana Belyayeva

Jun 22, 2019

It's our moral duty to stop this nightmare.

Mark Newman

Jun 20, 2019

There are plenty of boys and girls who regret taking cross sex hormones and puberty blockers. They have de-transitioned. Many girls have permanent masculine voices. Many will be permanently infertile. Boys will be sterile and left with disfunctioning sex organs. This is not science but it is extremely harmful!

Claire Frost

Jun 20, 2019

Dear Dr. Adams,
Thank you for your consideration of a Call to Action to increase public awareness of the off-label, dangerous prescription of estrogen to young men and testosterone to young women. My son was prescribed estrogen through his college health center. This was done without an in depth assessment of his physical and mental health. This is medical malpractice. I support this petition.

Anonymous

Jun 20, 2019

Please wake up and examine this issue. Youth who self-identify as transgender are now....a quite recent development...being met with affirmative-care, no diagnostics, no counseling, only bobble-heading by those who really do know better...they whole psych profession. The safeguarding system was removed, and medical treatments are the first and only thing offered. My young adult daughter now has a deep voice and a hairy chin from being prescribed testosterone after only 1 visit to an informed-consent clinic. The health effects of testosterone on females is very real, yet it was prescribed to her very quickly. In reality, she shows signs of ADHD.

Anonymous

Jun 26, 2019

This is the heartbreaking reality in which I am losing my daughter. I believe in tolerance and understanding, however, I do not believe in blind acceptance. We need the science to make truly informed decisions. We need to question. The medical and therapy communities have failed our children. I say this as one who has been part of those communities.

"When all think alike, no one thinks very much." – Walter Lippmann

Sarah Adamson

Jun 26, 2019

Dear Dr. Adams,

👍 1 | ↩

My daughter is not transgender. She was never what is called gender-nonconforming. I should preface that by saying that I believe children that are gender-nonconforming are simply children. They are not born in the wrong body.

Our daughter got caught up in the

trans trend during her college years. It was very popular on her college campus. Her identity shifted several times--again, very common with this group.

She was able to easily access testosterone in the college health clinic. If a college clinic does not offer that service, the student will go to Planned Parenthood. One visit is all it takes to start on a path to permanent medical harm.

We will never hear our daughter's natural voice again.

Our daughter then managed to get her breasts chopped off.

Is she now infertile? Possibly. Women on testosterone will require a hysterectomy after about five years of on this drug.

Why are we allowing this massive medical harm?

Our daughter has closed so many doors to her future self.

She cut ties with her family--because we did not immediately affirm that she was "male".

The disavowal of family is encouraged by many in the trans community--including counselors who have been trained in affirmation politics.

Her college provided her with a "Safe Place" to medically transition.

It was anything but safe.

She is no longer a joyous, bright person looking forward to her future.

We do not want this to happen to other young people or their families.

Kristie Sisson

Jul 09, 2019

My 20 year old daughter has fallen prey to the transgender movement. She left our family to follow this cult in pursuit of the happiness that she was promised by several social media sites. After taking testosterone (which she got from Planned Parenthood) for less than a year, her voice has dropped and she now has a beard. She wants a double mastectomy and hysterectomy. Our family is distraught! ROGD is a social contagion and any child who has access to the internet is vulnerable and susceptible to the same actions my daughter has taken. Please stop the madness before our next generation of mothers are completely sterile!

👍 | ↩

Kathy Murano

Jun 20, 2019

My daughter has been physically mutilated by US doctors after suddenly deciding she was transgender in college. Now she is a doped up, breast-less, college dropout and will not associate with anyone that questions her newfound identity. She was so rapidly indoctrinated into this massive groupthink of gender ideology and isolated from her family that I am terrified for other young women today. Her doctors, therapist, and university staff- literally none of them would engage with us when we shared our concerns. When she crashes, things are going to be bad. Who is going to help these young people when they realize the bag of lies that was fed to them under the veil of medicine? This situation is a dire US medical crisis. Our young people and their families need help.

Anonymous

Jun 20, 2019

My daughter has been physically mutilated by US doctors after suddenly deciding she was transgender in college. Now she is a doped up, breast-less, college dropout and will not associate with anyone that questions her newfound identity. She was so rapidly indoctrinated into this massive groupthink of gender ideology and isolated from her family that I am terrified for other young women today. Her doctors, therapist, and university staff- literally no one would engage with us when we shared our concerns. When she crashes, things are going to be bad. Who is going to help these young people when they realize the bag of lies that was fed to them under the veil of medicine? This situation is a dire US medical crisis. Our young people and their families need help.

Anonymous

Jun 20, 2019

I have lost a daughter to this madness.
There is absolutely no gate-keeping in the medical community.
This is a trend socially--and medically.
I do not want other young people to close doors to their futures.
Voice: unrecognizable.
Breasts: gone.
Fertility: may be lost.
Uterus: If testosterone continues, a hysterectomy will be unavoidable.

Why are we medicalizing a fad?
Where were these young people ten years ago?
They didn't exist.

Beth Pearce

Jun 20, 2019

After a childhood with no gender dysphoria or discomfort (beyond what's normal when going through puberty), my daughter mistook her later-developing bipolar symptoms & extreme anxiety as evidence of really being transgender. Internet bingeing was a direct trigger, as she admitted.

She dropped out of college due to poor mental health, and resumed psychiatric treatment & counseling from two different professionals, each of whom recognized the trans identity as a maladaptive coping mechanism. Alas, she went to Planned Parenthood and got a testosterone prescription after one visit, a blood test, and another visit where they instructed her on how to inject herself.



Fortunately, she didn't like the way testosterone made her feel and has begun the process of reconciling herself to her female sex. Incredibly, though, she has two female roommates who also got T from Planned Parenthood and whose voices are now permanently deepened and whose lovely faces sport the beginnings of little beards. From my observation over the past year, their mental health has worsened.

This medical scandal must be fully researched, and unless and until the data support instantly medicalizing these young people instead of offering them thoughtful counseling to unearth the sources of their gender unease, a national moratorium should be declared on puberty blockers, opposite-sex hormones, and surgeries designed to give the appearance of the opposite sex. Please help.

Healthcare Professionals



Susan Jane Bradley

Jul 07, 2019

As a child psychiatrist who worked in this field for many years I have been very saddened to see how young people have been encouraged to make decisions that have potential deleterious long term effects on their health and well being based on no evidence. These are vulnerable children and youth who lack the capacity to fully realize the impact of their decisions. I fully support this petition.  

JEREMIAH REILLY

Jun 20, 2019

Dear Dr. Adams, I support the comments made by my colleagues in this petition. In addition, I want to follow up the many points about lack of evidence. There is NO evidence whatsoever that transgender identification is a medical condition. In fact, it is a example of a contagious moral panic, of which there are many historical precursors, such as burning witches, alien abductions, recovered memories. Please use your position to end this madness and to hold the physicians causing reprehensible harm responsible. Thank you.  



Lisa Gilbert MD FAAFP

Jul 15, 2019

As a physician, I strongly support this. We are medically experimenting on children and it is dangerous.  



Kathleen Castellanos

Jul 14, 2019

Please don't allow political correctness and a motivated lobby disregard medical science in making these decisions. In Maine and many states, just not showing full support to an adolescent who is considering this change could cause me to lose my license. Something is very wrong when stating medical studies is not allowed.  



Dr Lesley Semmens

Jun 30, 2019

Children and young people need careful counselling. These off-label drugs are dangerous and there have been no long term studies. Drugs and surgeries are no way to treat healthy children.  

Anupam Singhal

Jun 30, 2019

I graduated medical school in 1984 and have been a neuroradiologist for 30 years. Our children are being harmed.  

Charlotte Gonzales

Jul 12, 2019

As a Mom and a Registered Nurse, I am overwhelmingly concern about this non-evidenced based practice of medicalization and surgical interventions to children and young people. These interventions are life altering and definitely will have a great impact on their health, mentally, emotionally and psychologically. Children and teens do need help when they start questioning their gender identities but not to the extent of changing their biological realities early on their lives. Evidenced-based studies have to be explored what are truly helpful and effective for this populations. Please Surgeon General, I plead, take an action to stop this practice. These children are our future. Please do something!

D Walker DO

Jul 12, 2019

As a physician, seeing the exponential growth in the increase of children & young adults adapting to their self identification as being transgender, NB. Help stop the growing practice of experimental pediatric identity medicine. Children should not receive hormonal and surgical treatments that are not supported by rigorous long-term studies.

Nadege Altier PhD

Jul 14, 2019

There is no scientific evidence to support the medical transitioning of children and young adults who are gender non-conforming. It is unethical and harmful to prey on this vulnerable population.

Anonymous

Jul 17, 2019

I work for a health insurance company in utilization management. There are requests for gender dysphoria procedures that are generally approved per a healthplan policy. Yet, requests for plastic surgery to minimize the impact of a port wine stain, large protruding pinnae or other congenital anomalies are denied because they are 'cosmetic' and do not improve the function of the individual. This practice of denying procedures that would restore confidence in pediatric patients while allowing gender altering procedures for the same reason is hypocritical and favoring one subset of patients above all others. This is wrong and needs to stop!

Kim Salinger FNP

Jun 20, 2019

Administering hormones to children, adolescents & teens is a dangerous practice that can cause irreparable harm physically and emotionally. Hormone therapy for sexual identity confusion should never be utilized in developing children and young persons, esp as the majority reverse their confusion and select their birth sex when they reach maturity.

Emma Zane

Jun 20, 2019

As a healthcare economist, I have to weigh in with some additional facts. Currently, over 1 million US adolescents and young adults, whose brains have not reached neurological maturity, are claiming a transgender identification (according to CDC's 1.8% estimate). Most of these youths have no documented history of gender dysphoria in childhood--the time when gender incongruence typically shows up. Unlike typical transgender patients, who are mostly biological males, these youth are disproportionately female. And they tend to announce their trans identification in groups--pre-existing groups of friends, and usually after heavy online exposure to transgender topics.

Prominent sex researchers who have treated transgender adults for decades are baffled by this atypical presentation. A recent study by Kaiser Permanente (funded by PCORI) showed that transgender-identifying youths have up to 20 times the rates of ADHD, ASD, and other comorbid mental health disorders.

The vast majority of these children are not transgender: they are adolescents having a hard time coping with the stress of growing up and attributing their distress to the increasingly-trendy & transgender status. Their untreated mental health illness contributes to the distress and disassociation from their body.

Using the most conservative estimates, over \$1B per year is being spent on transgender treatments. It's become a profitable industry with more and more clinicians entering it. Most are well-meaning but ill-informed about the key facts: over 80% of youths desist from transgender identification if left unmedicated; and the vast majority of youths being medicalized today are getting the interventions that were never studied in, and never meant for, this novel and poorly understood patient segment. They were meant for adults who have had well-documented, persistent and consistent gender dysphoria for decades, and who underwent through psychological testing and treatments for years prior to being approved for these drastic, life-altering procedures.

History is replete with examples of well-meaning treatments that had horrendous consequences. A comparison to lobotomies is tempting, but there is a much more recent example--the opioid epidemic, where medications were given out like candy to treat temporary discomfort. Every day I speak with youths who had mastectomies, who have permanent side effects from hormones, and sadly, some who lost their reproductive organs. They came to regret their decision around the same time as their brain reached neurological maturity.

In a well-meaning attempt to remove barriers to transgender procedures for mature adults, we have inadvertently removed all safeguarding for youth, for many of whom transgender identification is a temporary phase of identity formation.

It's not clear how to undo this damage, but we must at least pause and reflect. The evidence simply does not support routine medicalization of increasing numbers of youths with permanent, life-changing drugs and surgeries that rob these kids of a healthy future, turning them into patients for life, and allowing them to opt out of their future reproductive abilities long before they are mature enough to comprehend the drastic and irreversible nature of the treatments they so eagerly desire.

Monique Robles MD

Jun 20, 2019

Please see the article I authored at
<https://www.thepublicdiscourse.com/2019/04/51024/>



Laura Haynes PhD

Jun 21, 2019

The Centers for Medicare and Medicaid Services (2016, 2018) found no scientific support for transgender surgery. Please perform the same study for cross-sex hormones.



Andrew Sodergren PsyD

Jun 21, 2019

As a clinical psychologist, I agree with this summary of the situation and urgently ask for action on the behalf of gender-nonconforming children and their families.  



Quentin Van Meter

Jun 21, 2019

I am a practicing pediatric endocrinologist who trained at Hopkins while John Money was on the faculty. Treatments he promoted were harmful then and are no less harmful now.  



Sally Driscoll

Jun 21, 2019

Johns Hopkins, which pioneered this procedure, had the sense to stop long ago. Sadly now it has resumed, including at JH. If this is not stopped, I can only hope there will be massive lawsuits in the future as these medical victims of propaganda become adults and realize what has been stolen from them.  



William T Brewer

Jun 21, 2019

Science, human experience, and common sense tell us disorders of the mind are not cured or made better by trying to "re-order" the body.  

Anne Bevan



Jun 21, 2019

Please don't allow harmful hormonal and irreversible surgical interventions that are being performed on gender-nonconforming children without one single long-term study to support their safety or efficacy.  

At least make it a requirement that any doctors giving these "treatments" provide follow-up monitoring of these children through a minimum of ten years of adulthood. And that they take responsibility for any remedial treatment the patients need.



Robin adler

Jun 24, 2019

Teens transitioning with no previous dysphoria is harmful and against the "do no harm" oath. Give these poor kids time to grow and mature. Don't fall for this as being a human rights issue. These are vulnerable children making lifelong medical decisions  

Bryan Kelso

Jun 24, 2019

As a licensed therapist I find many adult client struggle to know who they are. Children as we know are often swayed by adults and their ideologies, in fact most children are. Allowing children to make adult decisions that affect them the rest of their lives seems highly irresponsible and unethical. They will have plenty of time to do this kind of decision when they're adults.  

Anonymous

Jun 20, 2019

What if they are wrong? What if that child is not really transgender? What if they are confused and suffering from other mental health issues? Is persistent, insistent and consistent really a good screening test? What if people's good intentions are pushing kids towards medicalization and driving kids towards thinking that they are transgender by providing positive reinforcement to support that theory? What if these kids go thru irreversible medical treatments only to realize several years later that they really were not transgender? What then? How are those adults and medical professionals going to be held responsible for what they have done to those kids? There is a reason why doctors make those kids and young adults sign those informed consent forms. Because they don't want to be held accountable for what they are doing to these kids. Well they should be held accountable!

Anonymous

Jun 20, 2019

The potential risks to these children are enormous. They and their futures must be protected.

Anonymous

Jun 20, 2019

I had gender dysphoria in the 1980s. Puberty resolved the dysphoria for me and I went on to find fulfilment and be a productive member of society. I live in fear that children today won't have that opportunity to become at peace with their sexed bodies and will instead suffer preventable harms from unnecessary medicalisation. No medicalisation of children's healthy bodies please.

Tracy Hernandez

Jun 20, 2019

Fortunately, though I had gender dysphoria, I never transitioned.

Please protect children from serious surgical harm.

Paul Pratt

Jul 24, 2019

There is a long term (30 year) government study that shows that those who get a sex change operation are far more likely to commit suicide.

The conclusion states:

CONCLUSIONS:

Persons with transsexualism, after sex reassignment, have considerably higher risks for mortality, suicidal behaviour, and psychiatric morbidity than the general population. Our findings suggest that sex reassignment, although alleviating gender dysphoria, may not suffice as treatment for transsexualism, and should inspire improved psychiatric and somatic care after sex reassignment for this patient group.

<https://www.ncbi.nlm.nih.gov/pubmed/21364939>

Stephen Beck MD

Jun 26, 2019

Please help our children by reviewing the facts with a Call to Action. Puberty blockers and cross sex hormones: 1) have never been studied in controlled trials, 2) are off label indications for these drug, 3) are NOT reversible, and have significant known side effects / complications, and 4) have NOT been proven to impact long term positive outcomes in this at-risk population. We need common sense treatments from our providers. Primum non nocere.

Margaret Schick

Jun 26, 2019

As a retired nurse, I feel action is needed.

Sally Driscoll

Jul 06, 2019

I'm a medical journal copy editor and familiar with these mutilating "treatments" that make healthy children and adults into medical cripples. Viciously unconscionable.

👍 | ↩

Elina Holland

Jun 27, 2019

Please consider investigating this hasty approach. Children are being permanently damaged.

👍 | ↩

Kimberly Chambers

Jun 27, 2019

Claiming to be transgender has become the go-to coping mechanism for kids who have suffered trauma or sexual abuse, who are on the autism spectrum or are ADHD/OCD, have been bullied or are same-sex attracted, to name some of the more common problems which send kids on a quest to escape their current self and become someone new. Clinicians, rather than exploring the child's psychological and medical histories, are immediately taking these kids' self-diagnoses as absolute fact and then putting the kids on the path toward medical transition, despite their being no long-term studies on the safety or efficacy of these medical treatments, many of which are permanent and can include permanent sterility as a side effect.

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It is NOT conversion therapy to explore reasons why a child or teen might wish to become the opposite sex. Kids deserve evidence-based care, not short-sighted, activist-driven demands for total capitulation.

Janine McLean

Jul 04, 2019

We, the founders of Parents of ROGD Kids, urge the Surgeon General to act quickly to protect our most vulnerable youth from undergoing unnecessary and dangerous medical procedures which have little to no evidence of benefit.

👍 | ↩

To date, we have received over 1,000 emails from parents desperate to protect their children from medical professionals who are eager to medically transition their children without taking the time to explore underlying issues or to try to find less-invasive solutions.

Please visit our website, ParentsofROGDKids.com, and read some of our parents' stories to get an idea of the magnitude of the tragedies that are unfolding in our families at the hands of members of your profession.

Jon Uhler

Jun 21, 2019

Children are being harmed. Please take active measures to stop this fraudulent and dangerous practice.



Anonymous

Jun 21, 2019

No more slicing and dicing of children's flesh and genitals. No more mastectomies, hysterectomies, and phalloplasties for girls and young women who think they are male (and end up having to urinate through their anuses). No more gonadectomies for boys and young men who think they are female. No more wrecked cardiovascular and endocrine health from regimens of puberty suppressants and wrong sex hormones. No more teen sterilizations. No more surgical interventions that amount to mutilation and result in disfigured bodies and fractured psyches. No more. NO MORE. Stop this now.



Amy Atterberry

Jun 21, 2019

Please help stop doctors from doing irreversible harm to our precious children. Many lives are being destroyed by the gender identity movement. Many of the children being harmed are autistic and/or have mental health issues. The majority have experienced trauma, only to be horrifically traumatized by doctors!



Laura Haynes PhD

Jun 21, 2019

The Centers for Medicare and Medicaid Services (2016, 2018) found no scientific support for transgender surgery. Please perform the same study for cross-sex hormones.



Nina Cranmer

Jul 03, 2019

Healthy children are being put on a medical pathway into a lifetime of medication and surgical procedures which cause irreversible changes to their bodies and may increase health problems as they get older - links to osteoporosis for puberty blockers and increased risk of heart attacks or strokes for Testosterone. There should be more psychological help for these children not surgeries especially for under 18s. Please investigate this



W Arthurs

Jul 03, 2019

Open your eyes to what is happening to our children. It is like a horror story. People need to go through puberty for their brains to fully develop. There needs to be more research on the lifelong medical effects of what is being done to minors and then as adults they can make informed decisions.

