

Gender Dysphoria under the care of the Hospital Authority in Hong Kong

➤ Meaning of medical terms

- Sex : a general term, more biological concept involving sex organs, hormones, chromosomes
- Gender : more psychological & social concept involving feelings, thoughts, social roles
- **Gender identity (性別認同)** : feeling of oneself being male or female or other genders
- **Sexual orientation (性取向)** : enduring pattern of emotional & sexual attractions to men, women or both

➤ Gender Dysphoria (性別不安)

- Discomfort caused by discrepancy between a person's gender identity (their psychological sense of themselves as men or women) and the sex they were assigned at birth (with the accompanying body sexual characteristics and/or expected social role)
- Core symptom of **Gender Identity Disorder (GID, ICD-10)** & **Gender Dysphoria (GD, DSM-V)**
- Associated symptoms of the desire to get rid of one's sexual characteristics, and the desire for having sexual characteristics of the other sex and being accepted as the other gender
- **Spectrum of severity** from very mild symptoms to the most severe ones

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➤ Transsexualism (易性症)

- The most severe form of GID / GD
- Strong desire to undergo transition to a sex other than that assigned at birth, typically through hormones & surgery

➤ Gender Identity Disorders / Gender Dysphoria

- **Very rare** : male-to-female (MtF) 1 in 11000 to 1 in 30000, female-to-male (FtM) 1 in 20000 to 1 in 100000, estimated from clinic sample
- MtF to FtM ratio ~3 : 1
- The cause is unknown, probably an interplay between biological and environmental factors
- Cannot be cured by medications or psychological treatment without transition
- When symptoms are severe & patients can't cope, patients may seek help from professionals including those from mental health services

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➤ Position Statement of GID /GD services under the Hospital Authority (HA)

- (1) HA has been providing medical services to treat the physical and mental problems of patients with "Gender Identity Disorders" (in DSM-IV & lately "Gender Dysphoria" in DSM-V) and with "Disorders of Sex Development" in their best interest.
- (2) Medical professions in HA are willing to provide medical evidence on the conditions mentioned under (1).
- (3) Gender recognition may go beyond medical perspectives and should be deliberated by the society at large.

➤ Care pathway for GID / GD under the HA

- Any registered medical practitioners can refer patients with gender dysphoria to psychiatric specialty outpatient clinics (SOPCs) under the Hospital Authority
- **Multi-disciplinary** approach : psychiatrists, clinical psychologists, geneticists, endocrinologists, plastic surgeons, urologists, gynaecologists, social workers, etc
- **Coordinated** care through case psychiatrists
- Year 2013-14 : 121 patients have received services under Psychiatric SOPCs, 12 undergone Sex Reassignment Surgery

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➤ Patient journey in the care for GID / GD under the HA

- Making **diagnosis** : interview with patients and their family members or significant others
- Provide **information and support** for patients and their family members or significant others
- Discussion on **treatment goals and options** which are open, based on individual needs, in the best interest of the patients, & making reference to international guidelines e.g. WPATH SOC
- Patients have **full autonomy** in making decisions for treatment options, no treatment will be provided without patients' informed consent
- **Psychological treatment** : e.g. counselling to consolidate gender identity, strengthen understanding, coping & resilience
- **Real Life Experience** : living full time in the desired gender, a period for transition into new gender role, under support & guidance from mental health professionals
- **Hormonal treatment** : female hormones for MtF, male hormones for FtM, for changing body shape & some sexual characteristics, and to enhance psychological well-being, with close monitoring of side effects
- **Sex Reassignment Surgery** : after at least 12 months of successful Real Life Experience, recommendation letters from 2 mental health professionals, involves removal of original sexual structures and reconstruction of structures of the desired sex
- Not all patients choose to receive all treatment, optimal care plan to relieve gender dysphoria is reached by thorough discussion on risks and benefits in the **best interest of the patients**

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