

September 4, 2018

Michael Shores  
Director, Office of Regulation & Policy Management  
Office of the Secretary  
Department of Veterans Affairs

Re: Exclusion of Gender Alterations from the Medical Benefits Package [Doc No 2018-14629]

Dear Mr. Shores,

On behalf of the Endocrine Society, we appreciate the opportunity to provide comments on the Veterans Administration's (VA) request for information related to gender alteration surgeries. Founded in 1916, the Endocrine Society represents approximately 18,000 physicians and scientists engaged in the treatment and research of endocrine disorders, such as diabetes, hypertension, infertility, obesity, osteoporosis, and thyroid disease. Many of our physicians care for transgender individuals, providing expert care across the range of transgender medical interventions including hormone therapy and surgeries. As established in our position statement on transgender health<sup>1</sup>, we strongly support access to the full spectrum of medical care for transgender individuals and urge the VA to include coverage of transgender-specific surgeries (gender alteration surgeries) in its medical benefits package.

In 2017, the Endocrine Society published one of the definitive clinical practice guidelines on care for transgender individuals that provides clinical recommendations on the continuum of transgender medical care. *Endocrine Treatment of Gender-Dysphoric/Gender-Incongruent Persons*<sup>2</sup> provides evidence of the safety and efficacy of hormone therapy and transgender-specific surgeries. We believe that medical decisions should be made by medical professionals based on current standards of care.

*Evidence for the safety and effectiveness of transgender-specific surgeries for the treatment of gender dysphoria*

Although data are modest and more rigorous study is needed, there are data for significant improvement in long-term mental health. One study showed that satisfaction with breasts, genitals, and femininity increased significantly after surgical treatment for transgender females.<sup>3</sup>

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<sup>1</sup> Endocrine Society. Transgender Health. September 2017 <https://www.endocrine.org/advocacy/priorities-and-positions/transgender-health>

<sup>2</sup> Hembree, W, et al. Endocrine Treatment of Gender-Dysphoric/Gender-Incongruent Person: An Endocrine Society Clinical Practice Guideline. *J Clin Endocrinol Metab* 102: 3869–3903, 2017

<sup>3</sup> Simonsen RK, Hald GM, Kristensen E, Giraldo A. Long-term follow-up of individuals undergoing sex-reassignment surgery: somatic morbidity and cause of death. *Sex Med*. 2016;4(1):e60-e68.



*Evidence of the impact of transgender medical and surgical intervention on the rates of suicide and suicide ideation*

Few peer-reviewed studies exist that demonstrate the effect of transgender surgeries on mental health and/or suicide rates among transgender individuals. However, two studies show that mental health seems to improve for those receiving medical interventions in general including hormone therapy and surgeries.<sup>4,5</sup>

Thank you for considering this evidence. We strongly believe that transgender individuals should have affordable access to the full continuum of care. If we can be of further assistance as the VA weighs the evidence, please contact Stephanie Kutler, Director, Advocacy & Policy, at [skutler@endocrine.org](mailto:skutler@endocrine.org).

Sincerely,

Susan Mandel, MD  
President, Endocrine Society

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<sup>4</sup> Costa R, Colizzi M. The effect of cross-sex hormonal treatment on gender dysphoria individuals' mental health: a systematic review. *Neuropsychiatr Dis Treat*. 2016;12:1953–1966.

<sup>5</sup> de Vries ALC, McGuire JK, Steensma TD, Wagenaar ECF, Doreleijers TAH, Cohen-Kettenis PT. Young adult psychological outcome after puberty suppression and gender reassignment. *Pediatrics*. 2014;134(4):696–704.