

January 23, 2020

Karen Parker, PhD, MSW
Director, Sexual & Gender Minority Research Office
National Institutes of Health
6555 Rock Spring Drive
Bethesda, MD 20817

Re: Request for Information; (FY) 2021-2025 Trans-NIH Strategic Plan for Sexual and Gender Minority Health Research

Dear Dr. Parker,

On behalf of the Endocrine Society, thank you for considering our comments on the 2021-2025 Trans-NIH Strategic Plan for Sexual and Gender Minority Health Research (SGMR). 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, and who care for vulnerable populations including transgender individuals and women. Through our advocacy and education, the Society strives to ensure that transgender individuals have access to health care services provided by clinicians who are knowledgeable about their unique needs and that there is increased funding for research that benefits these same individuals.

We thank the National Institutes of Health (NIH) for continuing to prioritize research on the health needs of sexual and gender minorities and we support many goals in the current strategic plan. We offer the following suggestions for scientific objectives on the draft framework for the 2021-2025 strategic plan and encourage the NIH to include these specific priorities within the framework and/or the full strategic plan.

1. Include children, adolescents, and families of individuals with disorders of sex development (DSD) and families of trans individuals in longitudinal outcomes research on current standards of care across the lifespan.
2. Support large scale multi-center or large cohort studies in transgender health.
3. Establish a biobank or repository of samples from transgender people.
4. Include both outcomes research and physiology research for transgender treatment regimens across the lifespan including consequences of hormone Rx (whether adding or subtracting) on human physiology. The topics might include chronic diseases and morbidity, and impact on multiple human organ systems (cardiovascular, GI, liver, renal, brain, lung, immunity/ ID, endocrine and others).



5. Include outcomes research for transgender interventions including mental health interventions, hormone Rx, and surgeries with emphasis on quality of life related to mental health and sexual function (and some of the topics already listed).
6. Include clinical research on diet and exercise regimens that are sensitive and effective for sex and gender minority populations.
7. Include obesity, venous thromboembolic disease, and bone health as chronic diseases that should be studied in these populations.
8. Including research related to lab assays and reference ranges for gender-diverse populations taking exogenous hormones should be a priority in methods and measures research.

Thank you for considering these comments and for prioritizing SGMR at the NIH. Should you be interested in additional information on any of these recommendations as you build out the full strategic plan, please contact Stephanie Kutler, Director, Advocacy & Policy, at skutler@endocrine.org.

Sincerely,

E. Dale Abel, MB.BS., D.Phil. (M.D., Ph.D.)
President, Endocrine Society