

December 5, 2022

Florida Board of Medicine
4502 Bald Cypress Way Bin C-03
Tallahassee, FL 32399

Florida Board of Osteopathic Medicine
4052 Bald Cypress Way Bin C-06
Tallahassee, FL 32399

Re: Standards of Practice for the Treatment of Gender Dysphoria in Minors

Dear Florida Board of Medicine and Board of Osteopathic Medicine:

Physicians for Reproductive Health (PRH), a national network of more than 500 doctors, strongly opposes draft rules 64B8-9.019 and 64B15-14.014 establishing standards of practice for the treatment of *gender dysphoria* in minors published on November 11, 2022. The proposal to ban gender-affirming care for young Floridians ignores the vast body of medical and scientific research supporting this care and dismisses the well-being of transgender and nonbinary people. PRH is a physician-led, national organization working to improve access to comprehensive reproductive health care, including gender-affirming care. Our network includes physicians of all specialties from across the country, including physicians providing gender-affirming care in Florida, committed to meeting the health care needs of the patients they care for.

Gender-affirming care is safe, essential, life-saving health care that allows transgender and non-binary (TGNB) people to live their full and authentic lives. Leading medical organizations including the [American Academy for Pediatrics](#), [American Medical Association](#), [American College of Obstetricians and Gynecologists](#), [Endocrine Society](#), [Pediatric Endocrine Society](#) and [World Professional Association for Transgender Youth](#) support gender-affirming care for TGNB people.

Bans and restrictions on this essential health care make patients and our communities less safe and healthy and denies them access to the full range of the quality, compassionate, health care they deserve. These bans also disproportionately impact transgender youth of color, including Indigenous transgender youth, and transgender youth who are immigrants – communities who already face significant discrimination and barriers to accessing health care. As physicians, we know that access to supportive, gender-affirming care is vital for TGNB people, especially young people.

Puberty blockers are a safe way to temporarily pause puberty by blocking the sex hormones testosterone and estrogen. As a result of blocking these hormones, phenotypic transitions that occur during puberty, such as breast development, growth of facial hair, menstruation, voice deepening and widening of hips, are suppressed. By pausing puberty, young people have more time to consider their options, and because it is a temporary treatment, the effects can be reversed if the young person chooses to do so. While there are side effects associated with puberty blockers, all medications, including over the counter medication, contain side effects. Health care decisions can and should be made collaboratively between the young person, their family, and a team of health care providers to ensure decisions are made that are in person's best interest and with informed consent. Standards of care guidelines for gender-affirming care require strict criteria to be met before initiation of these medications.

Banning access to puberty blockers, hormones, and surgery will have devastating effects on the mental health of young TGNB Floridians.^{1,2} For transgender and non-binary youth, medical care that is affirming and supportive can mean the difference between life and death. Transgender and nonbinary youth have an increased risk of depression and suicidal ideation compared to other young people, with [recent studies](#) finding that between 66 to 72% of transgender youth are depressed and half considered suicide. However, research consistently proves that when TGNB youth are affirmed by people around them and have access to gender-affirming care, if they desire, rates of depression and suicide drop significantly. A [recent study](#) found that transgender youth who receive gender-affirming care are 60% less likely to be depressed and 73% less likely to have thoughts of suicide or self-harm compared to those who do not receive care. Alarming, this same study revealed that youth who are not able to access care experience a two- to threefold increase in depression and suicidal thoughts – indicating that delaying hormones and puberty blockers may in fact worsen mental health symptoms. Transgender and nonbinary youth should not be subjected to a forced, unwanted form of puberty, particularly when it comes at the unconscionably high price of their dignity and health.

Forcing young people not currently receiving gender-affirming care to rely on clinical trials for access to this basic form of health care fails to consider the needs of transgender and nonbinary young people and their families. Moreover, the cost of care is a significant obstacle for many families, particularly those insured through Medicaid who must pay for care out-of-pocket after the Florida Agency for Health Care Administration banned coverage for gender-affirming health care.³ Now, by limiting access to eleven medical schools conducting clinical trials, Florida is forcing families to travel outside of their community for care. The costs associated with travel creates additional barriers to care. Limiting care to clinical trials ignores the small size of clinical trials and difficulty of being accepted. Additionally, it appears there are currently no clinical trials for *gender dysphoria* in Florida.⁴ While the reason for this is unclear, we can expect that as Florida grows increasingly hostile towards the health and rights of transgender and nonbinary people, medical schools may be discouraged from pursuing research and clinical studies.

The Boards of Medicine is out of step not only with the large body of scientific and medical evidence, but with the majority of Floridians and with federal law. Public support for respecting the rights of TGNB people has grown significantly, with large majorities of people across the political spectrum opposing discrimination against transgender people in health care and other parts of public life. Furthermore, discriminating against people based on their sexual orientation or gender identity is a violation of the non-discrimination provisions in the Affordable Care Act. No person deserves to be targeted by politicians. Let transgender kids be who they are: kids who want to play, be with their friends and family, go to school, play sports, and access health care from compassionate, caring and competent providers.

It cannot be overstated that gender-affirming care is safe, essential, necessary health care that promotes adolescents' health and well-being. Banning access to care is clear government intrusion on

¹ Rule 64B8-9.019. Board of Medicine. Standards of Practice for the Treatment of Gender Dysphoria in Minors. <https://www.flrules.org/gateway/ruleNo.asp?id=64B8-9.019>

² Rule 64B15-14.014. Board of Osteopathic Medicine. Standards of Practice for the Treatment of Gender Dysphoria in Minors <https://www.flrules.org/gateway/ruleNo.asp?id=64B15-14.014>

³ Rule 59G-1.050. General Medicaid Policy. <https://www.flrules.org/gateway/RuleNo.asp?id=59G-1.050>

⁴ U.S. National Library of Medicine Clinical. Retrieved December 4, 2022. <https://clinicaltrials.gov/ct2/results?cond=&term=gender+dysphoria&cntry=&state=&city=&dist=>

personal decision making. The government should have no role interfering in private health care decisions that should remain between the patient and their trained expert health care provider. Patients, including young people, do not want or need government interference in decisions about their bodies. I implore you, as the Board of Medicine, to exercise your professional judgement and your compassion for the health and well-being for young people in the state of Florida. Rescind these draft rules. Transgender and nonbinary youth are depending on you to protect access to lifesaving, safe, essential, gender-affirming health care. Everyone should be able to access the care they need in the way that makes the most sense for them and their families. If you have any questions or would like additional information please reach out to Adrienne Ramcharan, Assistant Director of State Policy (aramcharan@prh.org).

Respectfully,

Jamila Perritt, MD MPH FACOG
President & CEO
Physicians for Reproductive Health