



Quality care for trans and gender diverse (TGD) people in general practice

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ASPOG conference



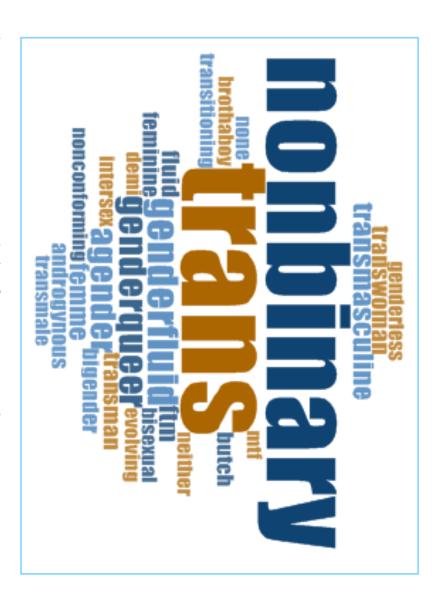


## Some challenges in TGD care

- Rapidly changing language, terms, diversity
- Movement from specialist to generalist TGD care
- Rapidly increasing demand for services
- Increasing expectations of 'informed consent' model
- Lack of available training
- Evidence gaps e.g.
- Fertility preservation
- Cancer risk and screening best practice
- Bone health



### Gender diversity



Trans identities in TGD model of care consultation Victoria, 2018

## TGD care in primary care

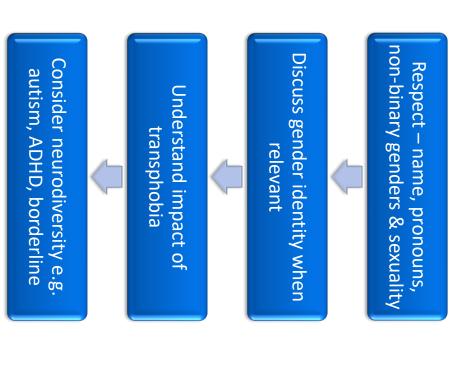
affirming surgery, are best delivered in the context of more can be delivered by a primary care practitioner." specialised facilities; however, the majority of health-care needs "Some clinical services for transgender people, including gender-

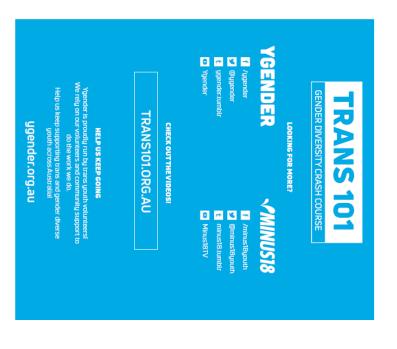
delivery models in transgender health." The Lancet 2016; 388(10042): 401-411 Wylie, K., et al. "Serving transgender people: clinical care considerations and service





# Guidance from trans community







World Professional Association for Transgender Health (WPATH) – 7<sup>th</sup> version, 2011

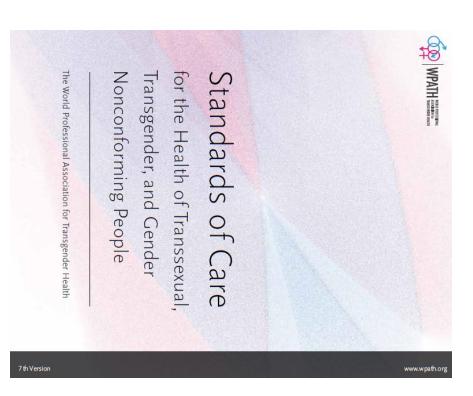
#### Principles:

- gender non-conformity is not pathological
- informed consent model is encouraged

### Mental health assessment:

- conducted by an experienced clinician (GP, clinical psychol, psychiatrist)
- to exclude rare differential diagnoses or issues requiring management prior to gender affirmation treatments

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## Gender – diagnostic terms



DSM-V, 2013 (previous term gender identity disorder):

experience their gender as different from that assigned at birth and who experience significant psychological distress as a result Gender dysphoria - a psychiatric diagnostic term attributed to people who

different from the social norms typically assigned to their gender assigned **Gender non-conformity** — a person's expression of their gender being



ICD-11, 2018:

the gender felt or experienced and the gender assigned at birth. No longer a mental health disorder **Gender incongruence** – a marked and persistent incongruence between

[Homosexuality was completely removed]













joy, and a developing sense of Gender euphoria - comfort or pride, regarding one's gender expression

# Children and gender affirmation

Royal Children's Hospital Gender Service

https://www.rch.org.au/adolescent-medicine/gender-service



specialist support for Clinical nurse families



counselling, support for social transition Assessment and



Fertility preservation testicular biopsy



Around 16yo + - cross sex hormones



At puberty commence puberty blockers e.g. goseralin (Zoladex) implants

Referral to GP at 18yo for maintenance







#### Hormones

- Feminising to create changes in the body such as breast growth
- Masculinising to create changes in the body such as facial hair growth

#### Surgery

- Chest reconstruction
- Genital gender reassignment
- 'Reducing size of 'Adams apple'
- Facial surgery

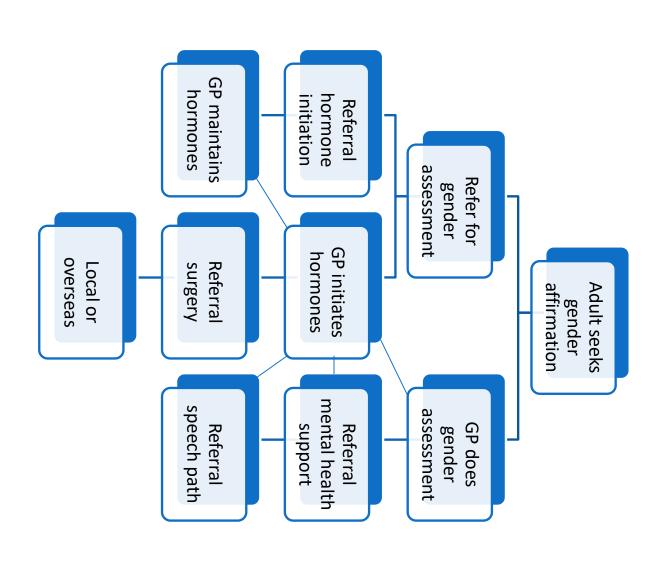
#### Voice therapy

- Feminising
- Reducing vocal fatigue
- Improving vocal range

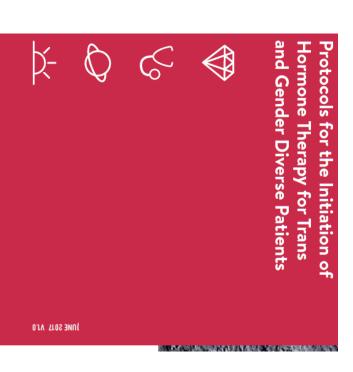




### Pathways to gender affirmation care for adults







Approved by the Australia New Zealand Professional Association of Transgender Health (ANZPATH)

https://equinoxdotorgdotau.files. wordpress.com/2018/08/equinox informed-consent-guidelines.pd1



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### Fertility preservation

### Trans feminine

- Sperm storage
- Testicular biopsy if early puberty (immature sperm ? potential)

### Trans masculine

- Egg storage
- Ovarian tissue freezing (for later transplantation)



## Health promotion generally

Cancer screening

Cardiovascular

AOD, smoking

Contraception

Family support

Mental health support

### Barriers to cervical screening- gender diverse and trans men (Johnson 2016)

- More androgynous, gender diverse people and trans males than cis LB women are under-screened
- due to gender dysphoria Less likely to have gynaecological examination
- Speculum examination painful
- Experience more discrimination in health care
- Less likely to be offered screening



Oliver Kensit and TJ Sweet: Trans men on 'You Can't Ask That', ABC, 2016

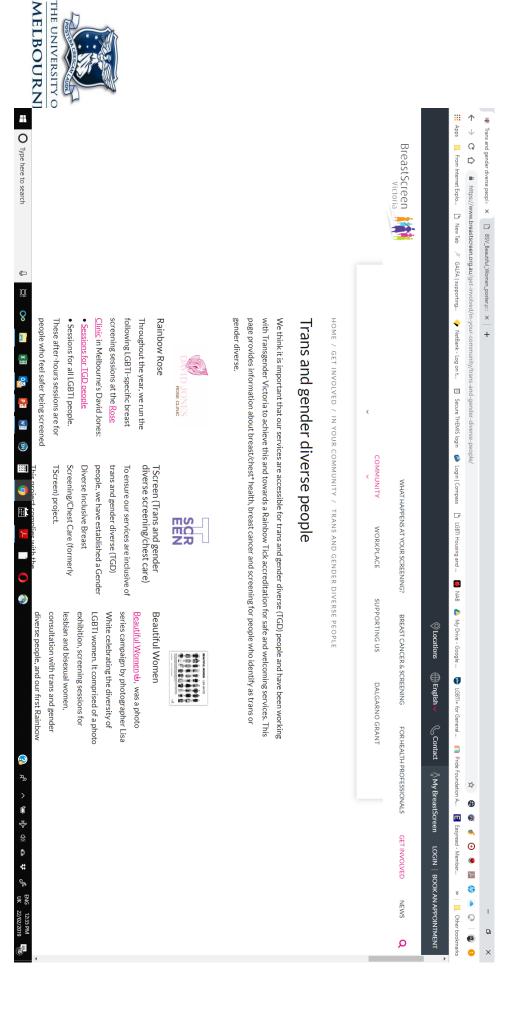




### Consultation tips to enable cervical screening

discomfort sitting up slightly, mirror 'bits', 'junk', 'front hole' Offer self-collection if eligible Offer vaginal oestrogen 2 weeks prior Invite to bring support person Acknowledge barriers – past trauma, Control – can stop anytime, patient speculum insertion, Use person centred language – e.g. gender neutral

# Breastscreen and TGD people





# Some support groups in Victoria

Transgender Victoria

http://www.transgendervictoria.com/

Y-Gender

https://**ygender**.org.au/

Minus-18

https://minus18.org.au/

https://www.pgdc.org.au/ Parents of gender diverse children



LGBTI HealthPathways — via Primary Health Networks

AusPATH — Australia Professional Assoc. for Transgender Health

list of health providers

https://www.auspath.org/providers

Monash Gender clinic – secondary consultation service with GPs

Tuesday afternoons – Dr Jaco Erasmus

Ph: 9556 5216

Email: genderclinic@monashhealth.org

health <a href="https://lgbtihealth.org.au/networkmindout/">https://lgbtihealth.org.au/networkmindout/</a> MindOut training and community of practice re LGBTI mental





### Online training module for GPs on TGD healthcare

https://nwmphn.org.au/health-systems-capacity-building/trans-

gp-module/





### Thank you



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