



American College of Pediatricians®
The Best *for* Children

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Honorable Jerome M. Adams, MD
United States Surgeon General
U.S. Department of Health & Human Services
200 Independence Avenue, SW
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February 5, 2020

Honorable Dr. Adams,

As leaders of medical and mental health organizations, we are writing to ask your intervention in a growing health crisis affecting children and adolescents diagnosed with gender dysphoria. Under an internationally controversial standard known as “gender affirming care,” U.S. physicians are subjecting minors—who are diagnosed with gender dysphoria or identify as transgender or non-binary—to hormonal and surgical treatments, including mastectomies and genital surgeries. **These treatments cause sterility, sexual dysfunction, surgical complications, thromboembolic and cardiovascular disease, osteoporosis, malignancy, and fail to alleviate persistently elevated rates of suicide.**^{1,2,3,4,5} They also carry additional unknown, long-term risks.

Eight months ago, after the Royal College of General Practitioners in the United Kingdom issued an unprecedented warning about the “lack of evidence” to support these treatments, our organizations wrote to you (July 22, 2019 letter enclosed/attached) asking you to sound a similar warning. In particular, we asked you to assure the development of evidence-based standards that will provide care for these children without causing such irreversible harm. Since then, this matter has increased in urgency. In the U.K., a [lawsuit](#) on behalf of a psychotherapist and de-transitioned young woman is underway against the National Health Service and Tavistock Clinic, seeking judicial intervention to “protect children from experimental medical treatment.”⁶ Medical organizations, individual physicians and mental health professionals throughout the world, including the Australian College of Physicians,⁷ the Royal College of General Practitioners in the United Kingdom,⁸ and the Swedish National Council for Medical Ethics,⁹ now characterize prescribing puberty blockers and cross-sex hormones in youth as experimental and dangerous. World-renowned Swedish child psychiatrist Dr. Christopher Gillberg calls gender-affirming interventions on children “**possibly one of the greatest scandals in medical history.**”¹⁰ His neuropsychiatry research group at Gothenburg University has called for “**an immediate moratorium on the use of puberty blocker drugs because of their unknown long-term effects.**”¹¹

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Tragically, American medical and mental health organizations continue to endorse “gender-affirming care” as “proven and life-saving.” These claims are unfounded. Worse, they dupe vulnerable children (and their parents) into consenting to radical interventions that may render a child sterile forever, require amputations of healthy organs, and yet still fail to resolve the psychological symptoms afflicting these children. In a recent [article](#) in the peer-reviewed *Journal of Sex & Marital Therapy*, psychologist Dr. James Cantor discredits the American Academy of Pediatrics’ (AAP) endorsement of puberty blockers, cross-sex hormones and surgeries for minors as a grave misrepresentation of science. Upon reviewing every reference in the AAP statement in favor of puberty blockers and cross-sex hormones Dr. Cantor concluded, “[The] AAP’s statement is a **systematic exclusion and misrepresentation of entire literatures. Not only did AAP fail to provide compelling evidence, it failed to provide the evidence at all. Indeed, AAP’s recommendations are despite the existing evidence.**”¹² Parents and vulnerable adolescents, however, are being misled by the AAP’s flawed endorsement.

This ethical crisis in American medicine has become so dire that numerous [state legislators across our nation](#) are proposing legislation to protect children from this dangerous medical experimentation.¹³ These legislative initiatives reflect strong concerns of various stakeholders, but they are piecemeal attempts to remedy a larger crisis—one that requires strong leadership and boldness on behalf of our children.

We respectfully urge you to provide that leadership, for vulnerable children, their families, and countless medical professionals deeply concerned over the consequences of these unethical treatments. As the chief public health officer and the nation’s doctor, you have shown a serious commitment to both science and the Hippocratic Oath. We ask you to take whatever steps are in your power to halt these scientifically unsupported, unethical treatments, to end the harm being inflicted on thousands of minor children—and their families.

Sincerely,

Michelle Cretella MD
Executive Director
American College of Pediatricians

Mark J. Chuff, LPC
Chair of Behavioral Health Committee
American College of Pediatricians

cc: Secretary Alex M. Azar, II & Mr. Roger Severino

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- ⁸ <https://www.rcgp.org.uk/-/media/Files/Policy/A-Z-policy/2019/RCGP-position-statement-providing-care-for-gender-transgender-patients-june-2019.ashx?la=en>
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- ¹⁰ <https://thebridgehead.ca/2019/09/25/world-renowned-child-psychiatrist-calls-trans-treatments-possibly-one-of-the-greatest-scandals-in-medical-history/>
- ¹¹ Doctors back inquiry on kids' trans care
- ¹² James M. Cantor (2019) Transgender and Gender Diverse Children and Adolescents: Fact-Checking of AAP Policy, *Journal of Sex & Marital Therapy*, DOI: 10.1080/0092623X.2019.1698481
- ¹³ <https://thefederalist.com/2020/01/28/2020-guide-to-state-proposals-to-protect-children-from-transgender-exploitation/>