# Exhibit M

## From DEPARTMENT OF CLINICAL NEUROSCIENCE Karolinska Institutet, Stockholm, Sweden

### ON GENDER DYSPHORIA

Cecilia Dhejne



Stockholm 2017

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Printed by Printed by Eprint AB 2017

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ISBN 978-91-7676-583-8

#### On Gender Dysphoria

#### THESIS FOR DOCTORAL DEGREE (Ph.D.)

at Karolinska Institutet, to be publicly defended in lecture hall Nanna Svartz, Karolinska University Hospital Solna.

Friday, March 31, 2017 at 9:00 a.m.

By

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#### 6 ON THE IMPACT OF RESEARCH FINDINGS

Researchers are happy if their findings are recognized and have an impact. However, once published, the researcher loses control of how results are used. Study III is the first long-term cohort study of mortality and psychiatric inpatient care following gender transition (Dhejne et al., 2011). This paper has also had an impact outside the scientific world. Our findings have been used to argue that gender-affirming treatment should be stopped since it could be dangerous (Levine, 2016). But the results have also been used to show the vulnerability of the group and that better transgender health care is needed (Arcelus & Bouman, 2015; Zeluf et al., 2016). Despite the paper clearly stating that the study is not designed to evaluate whether or not gender-affirming is beneficial, it has been interpreted as such. But we do not know what would have happened without gender-affirming treatment; the situation may have been even worse. As an analogy, similar studies have found increased somatic morbidity, suicide rates, and overall mortality for patients treated for depression and bipolar disorder (Ösby, Brandt, Correia, Ekbom, & Sparen, 2001). This is important information, but it does not follow that antidepressant or mood stabilizing treatment cause the mortality. Most of the articles that use the study to argue against gender-affirming health care are published in non-peer reviewed papers and the public media in general. These non-scientific publications are difficult to keep track of. I am grateful to friends, colleagues, patients, LGBT organizations, and journalists who have alerted me when the results of the study have been misinterpreted, giving me a possibility to respond to the authors. One could argue that the results should never have been published due to the hurt caused to transgender persons. However, not publishing the results would also hurt the transgender group and take away an opportunity to receive better health care.