

Gender Reassignment Surgery: A Review

Context

Gender Identity Disorder (GID), also known as gender dysphoria, is a condition in which a male or female feels a strong identification with the opposite sex. A person with GID often experiences great distress about his or her actual anatomic gender and gender role. GID, a rare disorder affecting children and adults, is more common in males, although the overall prevalence is uncertain. Management of GID may include hormone therapy, gender reassignment surgery, and psychotherapy and mental health support.

Technology

Gender reassignment surgery alters the physical appearance and function of the penis or vagina to resemble that of the opposite sex. It is usually the last step in the treatment process for GID in transsexuals who wish to live fully in the desired sex. Adult male-to-female (MtF) individuals may receive vaginoplasty, labiaplasty, orchiectomy, breast augmentation and breast implants, while phalloplasty, urethral extension, scrotoplasty, metaiodoplasty and mastectomy are treatment options for female-to-male (FtM) transsexuals.

Issue

A review of the clinical evidence on long-term patient outcomes as well as a review of the evidence-based guidelines on the physical and mental health care needs of patients who have undergone the procedures will help guide decisions about gender reassignment surgery.

Methods

A limited literature search was conducted of key resources, and titles and abstracts of the retrieved publications were reviewed. Full-text publications were evaluated for final article selection according to predetermined selection criteria (population, intervention, comparator, outcomes, and study designs).

Key Messages

Following gender reassignment surgery for GID or Gender Dysphoria:

- FtM and MtF patients appear to be satisfied with surgical outcomes and functioning.
- Long-term quality of life is uncertain.
- A clinical practice guideline suggests cardiovascular risks and bone mineral density be evaluated regularly.
- Screening for breast and prostate cancer is also recommended.
- High-quality evidence is limited.

Results

The literature search identified 525 citations, 29 of which were deemed potentially relevant. An additional 2 articles were identified from other sources. Of these 31 reports, 4 met the criteria for inclusion in this review: 1 systematic review, 1 population-based cohort study, 1 case control study, and 1 clinical practice guideline.

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