



August 3, 2021

Dear AAP National Conference 2021 Representative,

I am an AAP fellow, practicing pediatrician, and a Director of the Society for Evidence-Based Gender Medicine (SEGM), a nonprofit with a mission to promote safe, compassionate, ethical, and evidence-informed health care for children, adolescents, and young adults with gender dysphoria.

SEGM registered for a booth at the upcoming October 2021 NCE in Philadelphia, paid in full, and we looked forward to attending. However, yesterday we received an email stating that our application was rejected, and our registration cancelled. I hope this was in error, as the information SEGM aims to share with AAP fellows is of vital significance for all practicing pediatricians. Since the application did not provide much opportunity to detail our goals for the AAP conference, I have outlined them below.

Our intention is to share the latest developments in pediatric gender medicine, and to summarize the evidence in key areas. As you may know, a recent study published in *Pediatrics* reported that nearly 1 in 10 of US adolescents in an urban school district report a gender diverse identity—a sharp rise from a decade ago, when it was estimated that 2-14 in 100,000 individuals identified as transgender.<sup>1,2</sup> The epidemiology of pediatric cases has also markedly changed, from a preponderance of prepubescent males to mostly adolescent females.<sup>3</sup> Most currently presenting cases suffer from significant mental health and neurocognitive comorbidities.<sup>6</sup> These epidemiological shifts remain poorly understood, but they have profound implications on treatment decisions, since these cases were not considered in the foundational research that evaluated hormonal and surgical treatment for gender dysphoric minors.<sup>5</sup>

AAP members are eager to learn more about the state of evidence for pediatric medical transition. For example, Resolution #33, introduced at the AAP Annual Leadership Forum 2021, which deals with evidence in pediatric gender medicine, has been the 5<sup>th</sup> most voted-on resolution among nearly 60 resolutions this year, and the 4<sup>th</sup> in terms of the number of affirmative votes. This resolution, which registered concern about the low quality of evidence underpinning treatment of minors with hormones and surgeries, was upheld by over 80% of AAP members who voted. AAP members' comments reveal that the majority would like to better understand the



evidence to help patients and families make better-informed decisions about treatments that will impact them for the rest of their lives.

Gender-diverse youth deserve quality, evidence-based care. SEGM is committed to partnering with pediatricians to provide them with unbiased, up-to-date, evidence-based information about the state of gender medicine and its implication for pediatricians and their patients.

Kind Regards,

Julia Mason MS MD FAAP

P.S. We hope that this explanation is sufficient to justify our presence at the AAP NCE. If you are not able to reverse your surprising denial of SEGM's participation, we would greatly appreciate an explanation of the reasons for the denial.

## References

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4. Kaltiala-Heino R, Sumia M, Työläjärvi M, Lindberg N. Two years of gender identity service for minors: overrepresentation of natal girls with severe problems in adolescent development. *Child Adolesc Psychiatry Ment Health*. 2015;9(1):9. doi:10.1186/s13034-015-0042-y
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