



## **Experimental medical procedures that hurt, sterilize, and permanently damage children are not healthcare.**

Unproven surgeries and hormonal treatments that use children and adolescents as guinea pigs, while sterilizing them and mutilating their bodies, are more akin to abuse than healthcare.

We need to protect minors who are dealing with biological sex dysphoria (discomfort with one's biological sex). Undergoing these procedures must wait until adulthood, when the girl or boy is mature enough to decide for herself or himself and can understand the permanent consequences. Confused youth need counseling, not chemicals or scalpels.

### **What experimental treatments are currently legal in Utah that are seriously harming our children?**

**\*\*Puberty blockers<sup>1</sup>:** Children, sometimes as young as 9 years old, are taken to adolescent transgender clinics where they are given drugs, such as Lupron<sup>2</sup>, to block puberty.

- 1) **No proof they're safe:** There is no long-term study to demonstrate that puberty blockers are safe for biological-sex-incongruent youth, especially over the long term.
- 2) **Lupron can cause harmful (sometimes life-long) side effects.** These include premature osteoporosis, seizures, anxiety disorders in young women, obesity and testicular cancer in young men, and memory problems in men and women.
- 3) **Permanent sterility for boys and girls** - when prescribed simultaneously with or followed by cross-sex hormones.
- 4) **Arrested male genitalia development** – In some cases, puberty blockers used on young boys have been reported to cause the development of their genitalia to be arrested, such that by their late teens, their genitalia were still equivalent to those of a 9 year-old boy and they experienced a loss of sexual sensation.

**\*\*Cross-sex hormones:** "Trans"-identified youth next take cross-sex hormones to try to present as the opposite sex. Young girls are given testosterone and young boys are given estrogen.

<sup>1</sup> <https://thebridgehead.ca/2019/09/25/world-renowned-child-psychiatrist-calls-trans-treatments-possibly-one-of-the-greatest-scandals-in->

<sup>2</sup> [https://www.lupronped.com/about-lupron-depot-ped.ped.html?cid=ppc\\_ppd\\_ggl\\_lupron\\_peds\\_br\\_2017\\_Lupron\\_depot\\_ped\\_side\\_effects\\_Exact\\_2021924621#side-effects-of-treatment](https://www.lupronped.com/about-lupron-depot-ped.ped.html?cid=ppc_ppd_ggl_lupron_peds_br_2017_Lupron_depot_ped_side_effects_Exact_2021924621#side-effects-of-treatment)

- 1) **High risk:** This puts youth at an increased risk of heart attacks, stroke, diabetes, blood clots, cancer and more across their lifespan. And the best long-term evidence we have among adults shows medical intervention fails to reduce suicide.
- 2) **Permanent sterility for both sexes** when prescribed with puberty blockers.

**\*\*Surgery:** "Top and bottom" surgeries are being given to adolescents to change their sexual body parts. Girls as young as 12 years old are being subjected to mastectomies. All of the surgeries are irreversible and permanently mutilate these young people. "Bottom" surgeries render them permanently sterile.

These misguided and draconian procedures can hardly be called healthcare. Rather, they are dangerous experiments on children and adolescents, without any credible medical or scientific validation. Introducing opposite sex hormones, and surgically removing and crudely reconstructing artificial sexual body parts, cannot change a human male into a female and a human female into a male. It is in effect declaring war on every cell in a young person's body at a time when they are growing.

**MOST KIDS RESOLVE THEIR CONFUSION.** Most teens with biological sex dysphoria are girls and boys who are anxious, depressed, or traumatized, sometimes struggling with ADHD, autism or other mental or emotional challenges, and are uncomfortable with their bodies and struggling with their identity.

**The truth is, the percentage of minors who ultimately resolve the confusion they feel and become comfortable with their biological sex is very high. According to the DSM-5, females who identify during childhood as male, up to 88% resolve and identify as their biological sex by adulthood. For males who identify during childhood as female, it is as high as 97.8% who resolve/identify as their biological sex. There are many other studies with similar results.**

Dr. Michelle Cretella, M.D., executive director of the American College of Pediatricians, has said, "Puberty is not a disease. It is a critical window of development that is permanently disrupted by puberty blockers because time machines do not exist. . . . This time period, during which highly significant and irreplaceable advances in bone, brain, sexual and psycho-social development occur, is time that can never be given back."

According to the Controlled Substance Database of Utah, the number of minor females who were prescribed testosterone in Utah in 2020 was 663. The only reason to prescribe testosterone to females is to advance an attempted sex change. There is no medical reason to do so. In Utah, testosterone is a controlled substance and must be reported. According to the Controlled Substance Database, the number of female minors in Utah who were prescribed testosterone from 2015 through 2020 is: 2015: 5, 2016: 32, 2017: 96, 2018: 189, 2019: 553, 2020: 663 That is over a 10,000% increase in 6 years, and reflects a disturbing trend among youth in our state. That was just the girls. We don't have the numbers yet for boys who were prescribed estrogen, but it likely is in the range of a few hundred in the last couple of years. That would mean that presently anywhere from 1000 to 1500 children and adolescents are being medically "treated" with puberty blockers, cross-sex hormones and surgeries every year.

**CHILD AND ADOLESCENT BRAINS ARE NOT YET FULLY DEVELOPED ENOUGH TO MAKE IRREVERSIBLE LIFE- AND BODY-ALTERING DECISIONS.** Children are not permitted to drink, smoke, or drive as minors. Yet some adults are promoting treatment plans for these children and youth that will likely render them permanently sterile and disfigured. Minors and their parents need to wait until the minors are adults and have sufficient maturity to competently make such huge decisions that will impact their entire lives and their ability to reproduce. **THESE CHILDREN AND YOUTH DESERVE MENTAL HEALTH SUPPORT AND TREATMENT.** Proponents of these treatments often argue passionately that confused children and youth will attempt suicide without them. There is no question that the pain a confused minor feels is very real, and we need to give them effective help. A child or youth with suicidal feelings needs and deserves proper mental health support. Therapy that reinforces confusion instead of helping a young person deal with conflicted feelings about his or sex will not reduce suicidality. There is no evidence that surgeries and administration of cross-sex hormones have resulted in fewer suicides. Utaheagleforum.org