The services for people with Gender Identity Disorders in Hospital Authority

22 December 2010



Gender Identity Disorders (GID)

- · A diagnostic category in
 - The Diagnostic and Statistical Manual of Mental Disorders (DSM) published by the American Psychiatric Association (APA)
 - The International Classification of Disease for Mental & Behavioural Disorders (ICD) published by the World Health Organization (WHO)
- · Definition of Transsexualism:
 - A desire to live and be accepted as a member of the opposite sex, usually accompanied by a sense of discomfort with, or inappropriateness of, one's anatomic sex and a wish to have hormonal treatment and surgery to make one's body as congruent as possible with the preferred sex.
 - Transsexual identity present persistently for at least 2 years, and must not be a symptom of another mental disorder, such as schizophrenia, or associated with any intersex, genetic, or sex chromosome abnormality.

Local Statistics (HA)

- According to HA Statistics, 139 patients have ever been diagnosed with GID (As of June 2010), i.e. ~2 in 100 000 population
- Of these 139 patients, 107 patients received HA's psychiatric service from 2005-06 to 2009-10.

The Harry Benjamin International Gender Dysphoria Association's SOC for GID, 6th Version (2001)

- International professional consensus about the psychiatric, psychological, medical, and surgical management of GID.
- The Goal of psychotherapeutic, endocrine, or surgical therapy is lasting personal comfort with the gendered self in order to maximize overall psychological well-being and self-fulfillment.
- Serves as a reference for management of GID while taking into consideration each patient's unique clinical condition.

Services for people with GID

- · A multidisciplinary team of professionals including
 - Psychiatrists
 - Clinical psychologists
 - Surgeons
 - Nurses
 - Medical social workers
 - Other relevant specialists e.g. endocrinologist, geneticist & gynecologist etc

Management of GID

- · Assessment interviews with individual & family
- Blood investigations
- Diagnosis
- · Psychotherapy for individual & family
- · Treatment for accompanying mental health problems
- Real-life experience for 1-2 years
- · Hormonal therapy
- Sex reassignment surgery (SRS)
- · Follow-up management

Treatment Approach

- Patient-centered with recognition of individual preferences, needs and circumstances
- Guided patients' decisions
- Support throughout transition period, whether successful or not successful
- · Reversible steps before the irreversible
- Implementation of the Real Life Experience (RLE) of full time living in the chosen gender role prior to eligibility for hormonal and surgical intervention.

Existing HA Service Logistics for SRS

- · Referral from a registered doctor to a Psychiatrist
- Completed assessment by a psychiatrist and a clinical psychologist and successful real-life experience for at least 12 months
- Recommendation letters from the psychiatrist & psychologist to surgeon for SRS
- Follow-up by the psychiatrists & psychologists after SRS.
- Multidisciplinary support throughout the transition process

Service Statistics of SRS in HA

- Only some patients with GID require and suitable for SRS
- From 2005-06 to 2009-10, 26 patients received Sex Reassignment Surgery (SRS) in HA hospital

Staff Training

- · 2-day workshop held on 30 & 31 July 2010
- · Coordinators: Prof. ML NG & Dr. John KO
- · Participants:
 - Psychiatrists, Surgeons, CP, Nurses, MSW, OT
- Topics
 - Introduction, assessment & general management plan, RLE, hormonal replacement, surgery, legal aspect, post-operation FU etc.



