

Sex and gender. New findings, new controversy

'Patients who had undergone sex reassignment surgery at hospital, stated that the problems presented by patients before the surgery had not been resolved, at either human relationship, work or emotional level.'

Introduction

Sex and gender. Dr. Lawrence S. Mayer, an epidemiologist specialising in Psychiatry, and Dr. Paul R. McHugh, said to be the most important American psychiatrist of the last half century, have recently published a study entitled "Sexuality and Gender" in the journal *The New Atlantis* (see [HERE](#)), which offers an exhaustive review of more than five hundred scientific articles related with this matter. "I was alarmed to learn that the LGBT community bears a disproportionate rate of mental health problems compared to the population as a whole", says Dr. Mayer, one of the authors of the article. ¹

Background

In November 2014, Dr. McHugh had already published a report on the website *First Things*², in which he explained his decision as head of the Psychiatry Department at John Hopkins hospital in Baltimore, US, to no longer propose any sex reassignment surgery, in view of the negative findings that he obtained after a retrospective examination of patients who had undergone the procedure.

In the current article, the authors looked at studies published in recent years, in an attempt to establish statistically significant, well-proven evidence. Compared to other related studies, which often offer contradictory results on the topic, this one is distinguished by the large amount of data from many different sources, which gives it special credibility, as well as the backing of its indisputably eminent authors.

The timeliness of the study is undeniable. New trends in the approach to "gender dysphoria" (as defined in the American Psychiatric Association Diagnostic and Statistical [Manual of Mental Disorders \[DSM-5\]](#)), related with the promotion of sex reassignment procedures using pharmacological and surgical treatments, present these as the solution to a complex problem, to the point of approving legislative regulations that support and encourage their performance (see [HERE](#)).

However, this does not appear to be the conclusion reached by the studies concerned, but rather the contrary.

The extensive 140-page study offers surprising results, summarised below:

- It cannot be scientifically established that sexual orientation contradictory to the biological sex is an innate, fixed trait of human beings. There is therefore no evidence that there is a determination of genetic origin towards these types of behaviours.

- Sexual orientation is not fixed, but can change throughout life. This is especially important in the adoption of "irreversible " sex reassignment measures that can dramatically exacerbate the dysphoria symptoms. Specifically, 80% of adolescent males who report same-sex attraction no longer feel this when they reach adulthood.³ Although some investigators question these data and report methodological errors in the survey, they are nevertheless very significant.
- The risk of suffering health problems is higher in non-heterosexuals, both at general and mental health level. Thus, they have a 1.5 times higher risk of suffering anxiety, twice the risk of suffering depression, a 1.5 times higher risk of substance abuse and 2.5 times higher risk of suicide.
- As regards the transgender population, the number of attempted suicides is alarming, reaching 41% according to one study, compared to the 5% recorded in the non-transgender population in the United States. Another study found a 5 times higher risk of suicide attempts in the population who had undergone sex reassignment surgery, compared to the control groups. The risk of dying as a result of a suicide was 19 times higher than in the control population. With respect to this finding, it has often been argued that the stigma and social rejection suffered by the transgender collective is behind this increase. However, this does not seem to be a sustainable argument according to this study, which states that these high rates of suicide attempts are also recorded in transsexual persons who do not experience discrimination in their social circles.
- The percentage of the United States population who do not identify with their biological sex is 0.6%.
- Only a very small minority of children who display "cross-gender identification" continue to do so in adolescence and adulthood. This finding is particularly relevant in view of the attempts to promote sex reassignment in children before puberty, which can cause serious future disorders when the tendency spontaneously reverts.
- Data on the efficacy of sex reassignment treatments in adolescents — hormonal or surgical — are scant, and their generalisation is not backed by the available scientific evidence.

Sex reassignment surgery

Dr. McHugh, according to the conclusions of his first study², in which he collected follow-up on patients who had undergone sex reassignment surgery at his hospital, stated that the problems presented by patients before the surgery had not been resolved, at either human relationship, work or emotional level.

References

^[1] Mayer, LS., McHugh PR. Sexuality and Gender. The New Atlantis. 2016; 50:4-143

² <https://www.firstthings.com/article/2004/11/surgical-sex>

³Savin-Williams RC, Joyner K. “The Dubious Assessment of Gay, Lesbian, and Bisexual Adolescents of Add Health,” *Archives of Sexual Behavior*.2014; 43(3):413-22. <http://dx.doi.org/10.1007/s10508-013-0219-5>.



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