# Article information:

Gender dysphoria is rising—and so is professional disagreement | BMJ  
<https://www.bmj.com/company/newsroom/gender-dysphoria-in-young-people-is-rising-and-so-is-professional-disagreement/>

# Article summary:

1. More children and adolescents are identifying as transgender and being offered medical treatment, but some providers and European authorities are urging caution due to a lack of strong evidence.

2. American medical professional groups support "gender affirming care" for gender dysphoria, but governing bodies around the world have come to different conclusions regarding the safety and efficacy of certain treatments.

3. Experts are questioning the evidence underpinning these guidelines, with concerns about teenagers being fast-tracked to medical intervention without proper mental health involvement.

# Article rating:

Appears moderately imbalanced: The article provides some useful information, but is missing several important points or pieces of evidence that would be required to present the discussed topics in a balanced and reliable way. You are encouraged to seek a more balanced perspective on the presented issues by exploring the provided research topics and looking at different information sources.

# Article analysis:

The article "Gender dysphoria is rising—and so is professional disagreement" by Jennifer Block in The BMJ Investigations Unit discusses the increasing number of children and adolescents identifying as transgender and receiving medical treatment, particularly in the US. The article highlights the lack of strong evidence supporting these treatments and the growing professional disagreement among medical providers.

The article presents both sides of the debate, with American medical professional groups supporting "gender affirming care" for gender dysphoria, while European authorities urge caution due to a lack of evidence. However, the article seems to lean towards questioning the evidence base behind these treatments and guidelines.

The author cites examples of deficiencies in WPATH's recommendations and serious problems with Endocrine Society guidelines, including weak evidence paired with strong recommendations. The article also notes that Sweden's National Board of Health and Welfare determined earlier this year that the risks of puberty blockers and hormone treatment outweighed possible benefits for minors.

However, some may argue that the article does not present enough evidence to support its claims or explore counterarguments. For example, while NHS England stated there is scarce and inconclusive evidence to support clinical decision-making for minors with gender dysphoria, it did not necessarily conclude that all medical treatment should be avoided.

Additionally, while some experts question the evidence underpinning these guidelines, others may argue that there is still emerging evidence indicating a general improvement in the lives of transgender adolescents. The article also does not fully explore potential risks associated with delaying or denying medical treatment for gender dysphoria.

Overall, while the article presents important concerns about the lack of strong evidence supporting current treatments for gender dysphoria in young people, it may benefit from presenting a more balanced view of both sides of this complex issue.

# Topics for further research:

* Evidence supporting medical treatment for gender dysphoria in adolescents
* Risks associated with delaying or denying medical treatment for gender dysphoria
* Counterarguments to concerns about lack of evidence for gender affirming care
* Perspectives from transgender individuals on medical treatment for gender dysphoria
* Long-term outcomes for individuals who receive gender affirming care in adolescence
* Differences in guidelines and approaches to gender dysphoria treatment across countries and regions.

# Report location:

<https://www.fullpicture.app/item/d43ddf5c248ee2dc5806033711055e8b>