St Columcille's Hospital Loughlinstown, Co Dublin, D18 E365 www.nationalgenderserviceireland.com

11th March 2024

To Whom It May Concern,

I was asked to comment on a Parliamentary Question directed to the Minister for Health on recommendations on blood testing at the National Gender Service.

Provision of clinical care of any kind (including gender affirming hormone therapy and surgical interventions) is based on a fundamental principle that to recommend any clinical intervention the apparent benefits of that intervention should exceed any apparent risks.

The approved model of care in practice at the National Gender Service is based on a comprehensive multidisciplinary assessment that results in a formulation of risk and benefit that informs a recommendation on clinical intervention. This assessment takes into account all aspects of a person's health and wellbeing, rather than focusing only on gender and gender dysphoria. An outline of the assessment process is on our website www.nationalgenderserviceireland.com

When people are on hormones, hormone concentrations can be monitored but hormone measurements are not proven to risk stratify or risk manage care in this clinical scenario. Risk of harm exists simply be using hormones, and this risk exists regardless of blood concentrations.

There are blood tests that may help mitigate risk: full blood counts and liver functions tests. Elevated Haematocrit can predict clots (one complication of hormone therapy) in people using testosterone. Liver damage can sometimes be detected by liver function tests.

When people are on hormones, hormone concentrations can be monitored but hormone measurements are not proven to risk stratify or risk manage care in this clinical scenario. Hormone levels can be measure to guide treatment decisions in some scenarios, such as requests to increase hormone doses.

This is done on an individualised basis with consideration to the individual goals, potential benefits, and potential risks, and it not based on a 'treat to target' approach (i.e. adjusting doses to achieve a specific biochemical reference range).

I hope the above has been clear and useful.

Yours Sincerely,

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Clinical Lead

National Gender Service

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Grúpa Ospidéil Oirthear na hÉireann

