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### BMI and Associated Variables in A Pediatric Gender Clinic Sample

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## INTRODUCTION

Transgender/gender diverse (TGD) youth may be at increased risk for overweight/obesity.

Nationally representative data identifying the health status and needs of TGD youth is lacking.

**Aim:** Describe BMI and associated variables in treatment-naïve pediatric TGD patients.

## METHOD

**Method:** Chart review of 282 Gender Pathways Services (GPS) patients

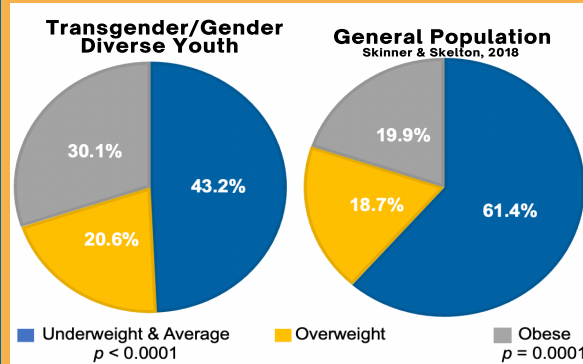
**Inclusion Criteria:** 9-19 yrs. old, treatment naïve, attend GPS initial session & caregiver present

**Measures:** Demographic, Pediatric Quality of Life Inventory- Well-Being, Recreational activities

**Statistics:** 2X2 Chi-square test, Independent samples t-test, Linear regression, ANOVA

# BMI and Associated Variables in a Pediatric Gender Clinic Sample

## Weight Status



## Higher BMI

### Assigned Females

Youth who were assigned female ( $M=0.90$ ,  $SD=1.19$ ) at birth had higher BMIs than youth assigned male ( $M=0.57$ ,  $SD=1.37$ ) at birth,  $F(1, 280)=3.63$ ,  $p=0.05$ .



### Medication

Most (54.3%) of youth were on medication. Nine groups of medication were associated with increased BMI:

- 1) gastrointestinal
- 2) antihypertensive
- 3) anti-emetic
- 4) anxiolytic
- 5) diabetes
- 6) endocrine
- 7) mood stabilizer
- 8) vitamins
- 9) SSRI/SNRI

### Creative Arts Involvement

Caregiver-reported creative arts involvement was associated with an increase in BMI ( $t=2.0$ ,  $p=0.047$ ;  $M=1.49$ ,  $SD=0.95$  vs  $M=0.95$ ,  $SD=1.23$ ).

### Media Use

Youth-reported watching/listening to media was associated with an increase in BMI ( $t=3.62$ ,  $p=0.000$ ;  $M=1.38$ ,  $SD=0.94$  vs  $M=0.79$ ,  $SD=1.2$ ).

## Lower BMI

### No Medication Use

Not taking medication was associated with a decrease in BMI ( $t=-2.21$ ,  $p=0.035$ ).



### Spending Time with Family and Friends

Youth-reported spending time with friends and family was associated with average BMI z-scores ( $t=-2.12$ ,  $p=0.035$ ).



### Well-Being

An increase in caregiver-reported well-being predicted a decrease in youth BMI ( $b=-0.02$ ,  $p=0.02$ ,  $R^2=0.06$ ).



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## PARTICIPANTS

### Patient Characteristics:

- 76.2% assigned female at birth
- 76.9% self-described masculine gender identity
- 86.2% White or Caucasian
- Average age of 14.8 ( $SD=2.07$ )
- 28.4% on SSRI/SNRI

## DISCUSSION

- 1) TGD youth demonstrated significantly higher rates of overweight and obesity than the general population.
- 2) Weight should be monitored in TGD youth.
- 3) TGD youth may benefit from improving connection with others.
- 4) TGD youth would benefit from programs to decrease sedentary activities.

References available upon request: [mforfander@cmh.edu](mailto:mforfander@cmh.edu)

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