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Transgender Identity Among Adolescents with PCOS

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## Background

- In 2015, Children’s Mercy created the Multidisciplinary Adolescent medicine and Pediatric endocrine PCOS (MAPP) clinic, a collaboration between Divisions of Adolescent Medicine and Endocrinology to provide more comprehensive evaluation and care for patients referred for PCOS
- As the clinic evolved, providers noted what appeared to be an increased prevalence of sexual minority youth among the adolescents presenting for evaluation
- The estimated prevalence of transgender identity among US adolescents is 0.5% to 1.3%
- Some studies have suggested an increased prevalence of PCOS in transmasculine adults before testosterone therapy
- There is a paucity of data describing the relationship between gender dysphoria and PCOS in adolescents

## Methods

- Secondary data analysis of adolescents evaluated in MAPP clinic from 2015 to 2020
  - PCOS, n=247 (NIH criteria)
  - Two comparison groups from 2015 to 2020
    - MAPP clinic
      - no PCOS, n=244
    - Adolescent Specialty Clinic (ASC)
      - no PCOS, n=77
- Variables analyzed included gender identity, androgen levels, Ferriman-Gallwey scores (clinical hirsutism score), history of anxiety, depression, and suicidality
- Groups were compared using chi-square and Wilcoxon rank sum tests. Gender identities self-reported as male, fluid/both or non-binary were pooled into the transgender category

## Results

- Within the MAPP clinic, 7.6% (n=12) of patients with PCOS identified as transgender versus 1.8% (n=3) in the comparison group without PCOS (p=0.01)
- Among adolescents with PCOS, gender dysphoria was significantly associated with FG scores (p<0.01), but not with androgen levels
- In patients with PCOS, we found a significantly higher proportion of depression in the transgender group compared to cisgender, 100 vs 38%. There was also significantly higher anxiety in transgender patients compared to cisgender, 78 vs 36%

## Limitations

- Only 2/3 of MAPP patients had gender identity recorded, so there can be selection bias
- Gender identity and anxiety/depression history were collected by private interview without validated screening questionnaires
- FG scores are subjective
- Non-PCOS MAPP patients may still be at higher risk for developing PCOS
- ASC is a consultation clinic, so there can be referral bias regarding mood disorders and gender dysphoria

## Conclusion

- Transmasculine patients may make up a significant proportion of patients with PCOS and treatment goals may not align with general PCOS treatment recommendations
- We recommend routine screening of gender identity in multidisciplinary care as it offers a unique opportunity to individualize treatment and to also address healthcare disparities often seen in transgender youth