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Gender Dysphoria, BMI, and Weight-Management Behaviors among Adolescents referred to a Pediatric Transgender Clinic

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Background

- Abnormal BMI and maladaptive weight control behaviors increased
- Some transgender patients manipulate weight to decrease gender dysphoria

Demographics (n=276)

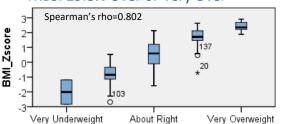
- Mean Age: 15.4 (1.9)
- 87% White, 81% Assigned Female
- 76% Transgender Male, 6% GNB, 17% Transgender Female
- Mean BMI Z-Score: 0.85 (1.23)
- 19% overweight and 21% obese
- YRBS: 16% overweight and 17% obese

Dysphoria and Well-Being

- Gender Dysphoria (n=155)
- Gender Identity/Gender Dysphoria Questionnaire (GIDYQ-AA): 2.1 (0.3)
- More severe in assigned women
- Appearance and Identity Congruence (n=58)
- Transgender Congruence Scale: 2.7 (0.7)
- PedsQL 4.0 Well-Being (n=160)
- Parent Assessment: 67.1 (16.4)
- Patient Assessment: 63.9 (16.3)

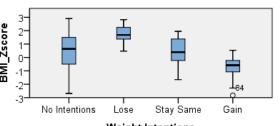
Weight-Related Perceptions, Intentions, and Behaviors

- Weight Perception
- 1.3% Very Underweight
- 11.9% Slightly Underweight
- 42.5% About the Right Weight
- 38.1% Slightly Overweight
- 6.3% Very Overweight
- YRBS: 29.8% Over or Very Over



Weight Perception

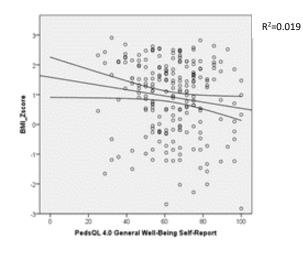
- Weight Intentions
- 6.9% Gain Wt., 40.0% Lose Wt.
- YRBS: 44.8% Lose Wt.



Weight Intentions

- Weight Control Behaviors
- Fasting 7.5%, Pills 1.3%, Purging 2.5%
- YRBS: Fasting 13%, Pills 5%, Purging 4.4%

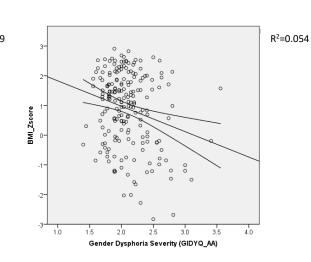
BMI and Well-Being

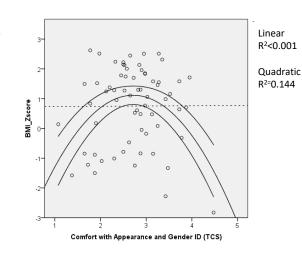


R²=0.074

PedsQL 4.0 General Well-Being Parent-Report

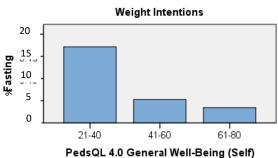
BMI and Dysphoria





Associations with Fasting





Conclusions

- Higher rate of elevated BMI but less maladaptive eating behaviors
- BMI Z-score: GIDYQ-AA and TCS
 - Not age, well-being, or gender ID
- Fasting: well-being and intention to lose weight
- Not age, race, BMI Z-score, weight perception, gender ID, appearance congruence, or dysphoria
- Longitudinal studies needed





