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Transgender Identity Among Adolescents with PCOS

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Transgender Identity Among Adolescents with PCOS

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IRB Number: 1405

Describe role of Submitting/Presenting Trainee in this project (limit 150 words): Assisted in writing protocol, literature review, chart review and data collection, and writing abstract.

Background, Objectives/Goal, Methods/Design, Results, Conclusions limited to 500 words

Background:

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.

Objectives/Goal:

The objective of our study was to describe the prevalence of transgender identity among adolescents with PCOS.

Methods/Design:

A secondary data analysis was conducted in 169 adolescents (16.1 ± 1.64 yrs) from our Multidisciplinary Adolescent medicine and Pediatric endocrine PCOS (MAPP) clinic who met NIH criteria for PCOS and had gender identity recorded. Variables analyzed included gender identity; androgen levels; Ferriman-Gallwey (FG) scores; and a history of depression, anxiety, and suicidality. For comparison, a group of 82 non-PCOS adolescents (15.6 ± 1.54 yrs) who had gender identity recorded and were seen during the same time period was analyzed. 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:

In the PCOS cohort, 7% (n=11) identified as transgender versus 4% (n=3) in the comparison group (p=0.56). Among adolescents with PCOS, gender dysphoria was significantly associated with FG scores (p<0.01), but not with androgen levels. A trend toward an increased prevalence of “history of suicidality” in transgender PCOS teens compared to cisgender PCOS youth was observed: 36% vs 15% (p=0.08).

Conclusions:

A slight difference in the prevalence of transgender identity between PCOS and non-PCOS patients was observed, though not statistically significant. Notably, higher percentages of transgender youth were present in both cohorts as compared to published estimates. Our data furthermore suggest that transgender youth may have a higher suicidality risk on top of the underlying risk already associated with PCOS. However, larger group analysis still needs to be performed to confirm this trend. Interestingly, patients with greater degrees of hirsutism were more likely to identify as transgender. This may have implications for treatment goals in those that desire a transmasculine appearance or fear increased identity conflict with return of menstrual cycles. In summary, our findings suggest that screening for gender dysphoria should be considered in practice recommendations for comprehensive adolescent PCOS programs.