

GENDER AFFIRMING MEDICAL TREATMENTS FOR TRANSGENDER PATIENTS

Below is a list of possible gender affirming medical treatments. It is important to remember that not all transgender people want the same treatments. Patients may want some of these treatments, or none at all. While this is meant to be a comprehensive list, it is possible that some gender affirming treatments may not be listed below. If a patient requests a treatment not on this list, you may consider consulting a medical provider for more information.

Some treatments may be covered by insurance, including MediCare. For additional information about insurance coverage, contact the insurance provider directly. Regardless of insurance coverage, the risks/benefits and recovery time of treatments may vary by provider. Please discuss risks/benefits and expected length of recovery with the anticipated treatment providers if you are unsure.

Gender Affirming Hormones

Testosterone

- Masculinizing

Estrogen

- Feminizing

Spironolactone and other Anti-Androgens

- Demasculinizing, typically used in combined with estrogen

Feminizing Surgical Procedures

Facial feminization surgery

- Includes many possible procedures to create facial features that are considered more traditionally feminine by Western cultures (generally smaller, thinner, softer features).

Thyroid Cartilage Reduction (aka tracheal shave)

- Reduction of the cartilage known as the Adam's Apple.

Breast augmentation

- Implants to change breast size/shape

Calf augmentation

- Implants to change calf size/shape

Orchiectomy

- Removal of the testicles, typically leaving enough skin to create labia if labiaplasty is also desired. This reduces the amount of testosterone in the body.

Vaginoplasty

- Creation of a vaginal canal from tissue of the penis, usually includes clitoroplasty and labiaplasty.

Masculinizing Surgical Procedures

Facial masculinization surgery

- Includes many possible procedures to create facial features that are considered more traditionally masculine by Western cultures (generally larger, bolder features).

Bi-lateral mastectomy

- Removal of breast tissue

Masculinizing chest reconstruction

- Reconstruction of the chest to look more traditionally masculine, usually involved repositioning of the nipple and is typically done in conjunction with mastectomy

Metoidioplasty

- Typically done after at least a year of testosterone therapy which enlarges the clitoris, the clitoris is lengthened by and moved forward to mimic the location of a penis

Phalloplasty

- A phallus is created using skin grafts from the arm, leg, or other areas of the body. Skin grafts must have undergone hair removal procedures for several months prior to the procedure to avoid complications

Testicular implants

- Implants are placed to create testicles, typically also in combination with scrotal construction from labia

Penile implant

- An implant is placed into a neo-phallus (phallus constructed through phalloplasty) to allow the neo-phallus to become erect. Typical implants are either rods that are moveable but always erect, or pump which can be made erect or not erect at will.

Scrotal construction from labia

- A scrotum is constructed using skin from the labia

Glasplasty

- Construction of the glans of the penis (aka head of the penis), usually done at the same time as phalloplasty

Other

Electrolysis

- Laser hair removal. May be done to feminize appearance of body hair, or to prevent surgery complications for some genital surgeries.