



# Healthy Body, Healthy Mind: The Fundamental Multidisciplinary Approach to Gender Dysphoria

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## Abbreviations

DSM-5-TR: Diag-Nostic and Statistical Manual of Mental Disorders, Fifth Edition Text Revision; CBT: Cognitive-Behavioral Therapy; ACT: Acceptance and Commitment Therapy; GAHT: Gender Affirmation Hormone Therapy; FtM: Female-to-Male; MtF: Male-to-Female; AMAB: Assigned Male Sex at Birth; AFAB: Assigned Female Sex at Birth.

## Introduction to Gender Dysphoria

### Definition and Characteristics

Introduction should provide background, comprehensive insight on the purpose of the study and its significance. Gender dysphoria is a complex psychological condition characterized by a persistent incongruence between an individual's experienced or expressed gender and their assigned gender at birth [1]. The diagnosis and treatment of gender dysphoria have evolved over time, with the providing criteria for its diagnosis. According to the Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition Text Revision (DSM-5-TR), to make a diagnosis, there must be significant distress or impairment in social, occupational, or other important areas of functioning.

Efforts to coerce a transgender individual into identifying as cisgender (often termed gender identity conversion

efforts or "gender identity conversion therapy") are deemed unethical and have been associated with detrimental mental health consequences [2]. So, the actual approaches involve the freedom of the individual to express themselves to the best of how they feel. According to current guidelines, considering the lived experiences of these patients who describe themselves as "trapped in their own bodies" [3], it is agreed that if the individual meets certain eligibility criteria, medicine can come to their aid by facilitating the process of bodily acceptance, also adjusting physical appearance to align with their gender identity [4]. That's why a multidisciplinary approach is crucial. This method combines the expertise of professionals from different fields to provide the best possible care for individuals with gender dysphoria. Utilizing various perspectives ensures that every aspect of the individual's well-being is considered, from mental to physical health.

### Evolution of Diagnosis and Treatment

A multidisciplinary approach involving professionals from various fields, including endocrinologists, psychologists, child neuropsychiatrists, and bioethicists, is fundamental in the comprehensive care of individuals with gender dysphoria, especially adolescents [5,6]. This approach ensures holistic assessment, tailored interventions, and ongoing support addressing the complex physical, psychological, and social aspects [7]. Collaboration among professionals also facilitates

an informed decision-making process. Psychological interventions play a crucial role in the management of gender dysphoria [6]. Therapeutic approaches may include individual psychotherapy, family therapy, and group therapy, aiming to explore gender identity, alleviate distress, and facilitate coping strategies. Cognitive-behavioral therapy (CBT) and acceptance and commitment therapy (ACT) are among the commonly used modalities to address distress and improve well-being [8,9].

To ensure the alignment of bodily appearance with the experienced gender, gender affirmation therapy, which may include hormone therapy and gender-affirming surgeries, is often considered for individuals experiencing persistent gender dysphoria. Hormone therapy aims to align secondary sexual characteristics with the experienced gender, thereby alleviating gender dysphoria and improving overall well-being [10]. It typically involves the administration of hormones consistent with the affirmed gender, such as testosterone for female-to-male transition and estrogen for male-to-female transition. Numerous studies have documented an increase in the prevalence of people diagnosed with gender dysphoria, with an increase in the request for Gender Affirmation Hormone Therapy (GAHT), even in younger age groups, including adolescents [11-13]. GAHT at any age, especially if started in adolescence, can reduce the incidence and prevalence of disorders such as depression, anxiety, eating disorders, school dropout and/or social stigmatization, up to the risk of suicide [14-16]. GAHT consists of androgen administration in female-to-male (FtM) transition hormone therapy and the administration of antiandrogen drugs and estrogens in male-to-female (MtF) transition hormone therapy [1,17].

In adolescent patients who have received a diagnosis of gender dysphoria from a team of mental health experts, without other interfering psychopathology and with persistent dysphoric symptoms despite psychotherapy, it is justified to start hormone therapy with puberty blocker in subjects with stages of pubertal development still early, G1-G3 (according to Tanner) [18] in subjects assigned male sex at birth (AMAB) and B1-B3 (according to Tanner) [19] in subjects assigned female sex at birth (AFAB), waiting to be able to start, after generally reaching the age of 16, possible gender affirmation hormone therapy of the experienced/desired sex [20]. The GAHT aims to obtain the secondary sexual characteristics of the sex experienced to improve the subject's quality of life in terms of psychophysical wellbeing and acceptance of one's body image and has the aim of preparing the subject for a possible gender affirming surgery reassignment surgery [21]. However, transgender people often have difficulty accessing medical or surgical gender affirmation therapy due to social, economic and health system organization factors in various regions of the world [22]. Sometimes, transgender

people report real or perceived discrimination even on the part of healthcare personnel, suggesting the need for specific training of various healthcare professionals on the topic of transgender people's health [4].

### Ethical Considerations and Contemporary Approaches

Protecting the health of transgender people is an emerging topic. It concerns the management of any adverse effects of GAHT [23], including fertility, contraception and adherence to health screening campaigns provided for cisgender people [24]. Furthermore, some studies are investigating a possible negative influence of GAHT on common cardiovascular risk factors in the transgender population, with results that are not yet well defined [25]. In conclusion, it is imperative to establish dedicated teams comprising professionals from various medical and psychological fields to provide the best possible treatment for gender dysphoria. By assembling interdisciplinary teams, individuals experiencing gender dysphoria can receive comprehensive care that addresses their physical, mental, and emotional needs. In order to feel mentally well, it's important to feel comfortable in our own bodies, so collaboration among experts in endocrinology, psychiatry, psychology, surgery, and other relevant disciplines will ensure that patients receive personalized and effective treatment plans tailored to their unique circumstances. This holistic approach not only enhances the quality of care but also fosters a supportive environment where individuals can explore their gender identity with confidence and dignity.

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