

Position Statement

Subject: Pathology Testing for Transgender and Intersex Individuals – Statement of Best Practice for Medical Pathology Laboratories

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Purpose

- To provide safe, respectful and affirming care for transgender (including gender diverse and non-binary) and intersex individuals.
- To provide pathology testing to inform high quality, efficient and effective health care; to understand clinical disease processes, diagnostic methods and reporting of diagnostic tests where medical safety and patient care are provided while being mindful of patient privacy for transgender and intersex individuals.
- To provide appropriate reference limits, interpretation and reporting of pathology testing.

Background Information

Transgender people are individuals whose gender identity is different to the sex assigned to them at birth and includes people with a binary and/or non-binary gender identity. Gender is historically considered to be male or female yet the experience of many is that gender is more of a continuum. Although the majority of people identify as male or female, there is increasing awareness that sex and gender are flexible concepts, with a person's sex and gender determined not only by their X and Y chromosomes but also by an inherent deep-rooted sense of one's self, expressed through behaviours. When a person's assigned sex and gender identity do not align, an individual may identify as transgender or agender. Being non-binary relates to a gender or sexual identity that is not defined by traditional binary categories such as male and female.

Due to often intense feelings of incongruence between one's gender and body (termed dysphoria), many transgender individuals undergo gender-affirming hormone therapy to align their physical characteristics with their gender identity to improve psychological, social and cultural functioning. Some may desire a slower rate of physical change and hence use low-dose or micro-dose gender-affirming hormone therapy. Other treatments individuals can undergo to help have their physical characteristics more closely align with their gender identity include oophorectomy (removal of one or both ovaries), hysterectomy (removal of uterus), mastectomy, orchiectomy (removal of testicles) and gender affirming surgery.

While many transgender people will seek to update their legal name and gender marker to align with their identity, costs to do so are prohibitive for many, or it may be cheaper to maintain their sex assigned at birth, e.g. if a transman decides to become pregnant. Using a former pronoun, gender marker or name, however, even if still listed on identity documents, can cause intense distress and lead to, or exacerbate gender dysphoria for an individual.

Intersex is a person born with sexual anatomy that does not fit the typical biological definitions of male or female. Intersex individuals may choose to remain as intersex rather than identify as male or female.

Currently, the majority of electronic medical record and laboratory information systems are limited to recording and reporting sex/gender in a binary fashion, as male or female. Therefore, interactions with laboratory services can exacerbate distress and affect the mental health of an individual. This can lead to 'stealth' or reluctance to disclose personal information or even to access care.

Why acknowledgement that transgender and intersex is important in pathology

- To provide appropriate reference limits, interpretation and reporting of pathology testing.
- To ensure safe provision of transfusion services to transmen and non-binary individuals of child-bearing age.
- To show respect for individuals and provide person-centred health care.
- To show awareness of prejudice and to shed light on current misunderstandings.
- To prioritise medical safety and patient care whilst maintaining patient privacy with concern for the preferred use of demographic information in providing pathology testing.

The Issues for Pathologists

- Insufficient high-level evidence on the effects of different doses and duration of gender-affirming hormone treatment on certain tests to allow confident reporting of a single set of sex-specific reference limits in all cases.
- Binary gender fields in laboratory information systems with
 - inability to have more than one gender applicable for a patient episode, eg a trans man requiring blood transfusion and creatinine measurement, and
 - current inability (technically and safely) or limitations to providing reference limits for both males and females on the same report.
- Possible misdiagnosis or inappropriate treatment (eg in assessment of kidney function or administration of red blood cells) due to lack of knowledge of a person's gender history and medications.

Best Practice Roles of the Pathologist

- Ensure that the laboratory has a Transgender and Intersex Policy to provide accurate, sensitive and respectful health care to the transgender and intersex community.
- Ensure cultural orientation has been provided to pathology staff providing specimen collection and testing for transgender and intersex individuals.
- Offer a safe environment for all individuals who present for pathology testing.
- Provide a Laboratory Information System that can incorporate the specific requirements of transgender and intersex individuals (and avoid the need to ask sensitive questions every time the individual presents for testing).
- Ensure medically safe reporting and appropriate use of reference limits and interpretive comments.
- Protect the privacy of individuals who are part of the transgender and intersex community.

Sources

Adriaansen MJ, Perry WNC, Perry HE, Steel RC. Binary male-female laboratory reference ranges do not reflect reality for transgender individuals on sex-hormone therapy. *NZ J Med Lab Sci* 2017; 71: 101-105.

Cheung AS, Lim HY, Cook T, Zwickl S, Ginger A, Chiang C, Zajac JD. Approach to interpreting common laboratory pathology tests in transgender individuals. *J Clin Endocrinol Metab.* 2020 Aug 18:dgaa546. doi: 10.1210/clinem/dgaa546. Epub ahead of print. PMID: 32810277.

RCPA Lay Committee Transgender and Intersex Task Force Forum, October 2019.

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Glossary

Agender:	denoting or relating to a person who does not identify themselves as having a particular gender
Gender:	the social and cultural construction of what it means to be a man or a woman, including roles, expectations and behaviours
Gender identity:	a person's internal, deeply felt sense of being male or female (or something other or in between). A person's gender identity may or may not correspond with their sex (Alternative term: Preferred gender)
Genderqueer:	a person who does not express a traditional gender identity. Some gender queer individuals may not change their physical sex or cross-dress, but can identify as genderqueer, gender neutral or androgynous
Intersex:	Describes a variety of conditions where a person is born with sexual anatomy that does not fit the typical biological definitions of male or female. Individuals may prefer to remain intersex rather than conform to male/female categories
Non-binary:	relating to a gender or sexual identity that is not defined by traditional binary oppositions such as male and female (alternative term: Agender)
Sex:	a person's biological make-up and the distinction between male and female based on chromosomes and physical sexual characteristics
Sex assigned at birth:	categorisation of an individual according to physical characteristics evident at birth (alternative terms are: Assigned sex at birth; Birth sex; Biological sex; Gender presumed at birth; Presumed gender at birth)
Related sex-specific terms are:	Male assigned at birth (MAAB)/Assigned male at birth (AMAB) Female assigned at birth (FAAB)/ Assigned female at birth (AFAB)
Sexual orientation:	describes the gender(s) that someone is attracted to. A person can be attracted to someone of the same sex or sexual identity as they are, (homosexual, for example gay, lesbian or queer), or the opposite sex or sexual identity (heterosexual), or attracted to both/all sexes (bi/pansexual)
Transgender:	a person whose gender or sex identity is different from their physical sex assigned at birth
Transitioning:	steps taken by transgender people to live in their chosen identity. These steps can be social or medical and they may but do not have to include gender affirming hormone therapy or gender reassignment surgery. Detransitioning: the cessation or reversal of a transgender identification or gender transition
Trans man or boy:	someone assigned a female sex at birth, who has a male gender identity
Trans woman or girl:	someone assigned a male sex at birth, who has a female gender identity

Sourced in part from: Adriaansen MJ, Perry WNC, Perry HE, Steel RC. Binary male-female laboratory reference ranges do not reflect reality for transgender individuals on sex-hormone therapy. NZ J Med Lab Sci 2017; 71: 101-105.