

NUMBER OF CHILDREN ENROLLED, RECEIVING PUBERTY BLOCKADE AND CROSS SEX HORMONES IN FIVE GENDER CLINICS IN AUSTRALIA, 2014-2021

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Below are five figures that summarise the current numbers in gender clinics for children and young people in Australia, showing referral and treatment trends over the eight years from 2014 to 2021. You will notice some discrepancies between current figures and previous graphs published to 2019. I have relied upon figures provided by the gender clinics under GIPPA (formerly FOI) and they have varied with each request. The numbers are therefore approximate, but the trends, I believe, are reliable.

I have presented the data by year and state to make different comparisons easier.

Referrals have continued to rise over the eight-year study period. Melbourne RCH continues to receive the highest numbers of referrals.

The apparent decrease in the prescription of puberty blockade may be due to the effects of the COVID pandemic, which resulted in the greatly reduced capacity of many medical treatment clinics around the country between 2019 and 2021.

The low ration of those prescribed puberty blockade to those prescribed cross sex hormones is not consistent with overseas research that indicates a high proportion of those commencing puberty blockade proceeding to cross sex hormones. The information provided by the clinics was not segmented by age or sex. It would be necessary to know the ages of those young people enrolled in these clinics as some may be too young to be eligible for puberty blockade or were commenced on puberty blockade and remained on it for several years. In addition, the time lag between enrolment/triage/appointment and being seen by an endocrinologist to work out relevant rates of medication to eligible enrolled adolescents may also skew the ratios of those prescribed puberty blockade proceeding to cross sex hormones.

Queensland is the rogue state with respect to the prescription of puberty blockade. Queensland and Victoria prescribe more cross sex hormones in their GD clinics than WA, NSW (who refers young people to adult clinics for CSH) and South Australia (although no figures are available for 2020-2021).

It is also possible that the Melbourne RCH gender clinic is outsourcing the prescribing of cross sex hormones and possibly puberty blockade medication to GPs or transgender community clinics. It is also possible that patients prescribed medication at the RCH obtain the prescriptions from external pharmacies, rather than the RCH pharmacy, which would again risk under-reporting in the figures provided.

These numbers represent only those young people receiving treatment in public hospitals. They do not include children and young people being "treated" by private practitioners or in the new clinics such as Maple Leaf in Newcastle for which no figures are available.

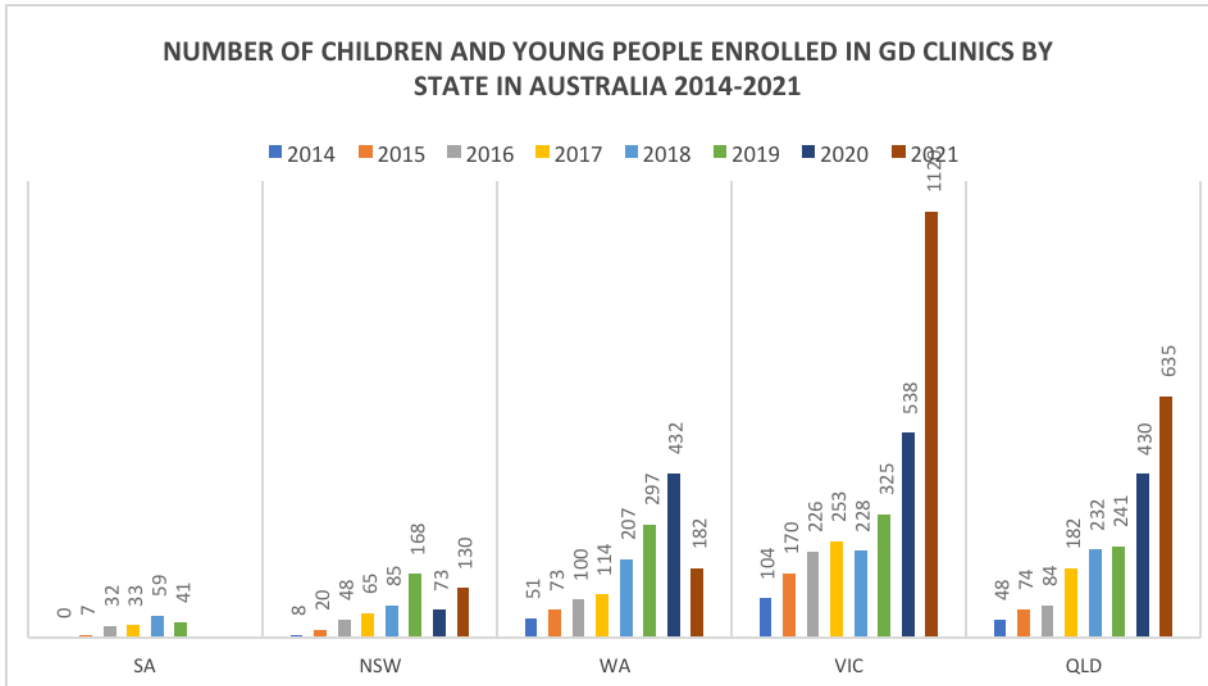


Figure 1

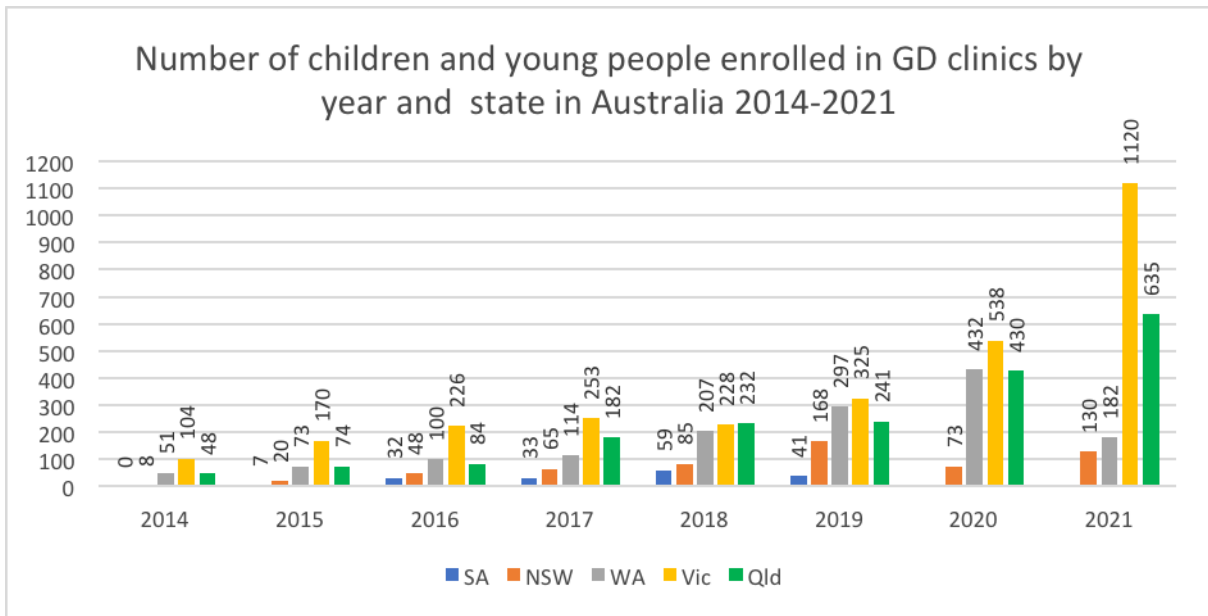


Figure 2

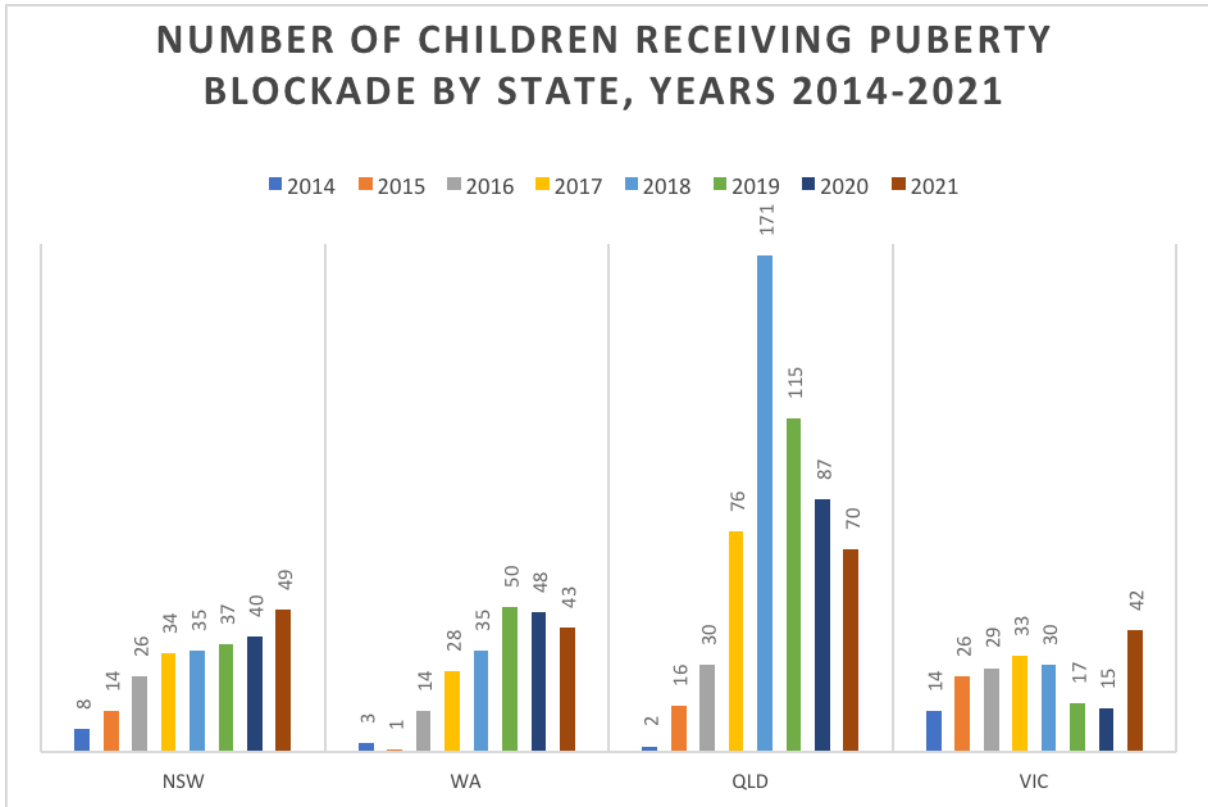


Figure 3

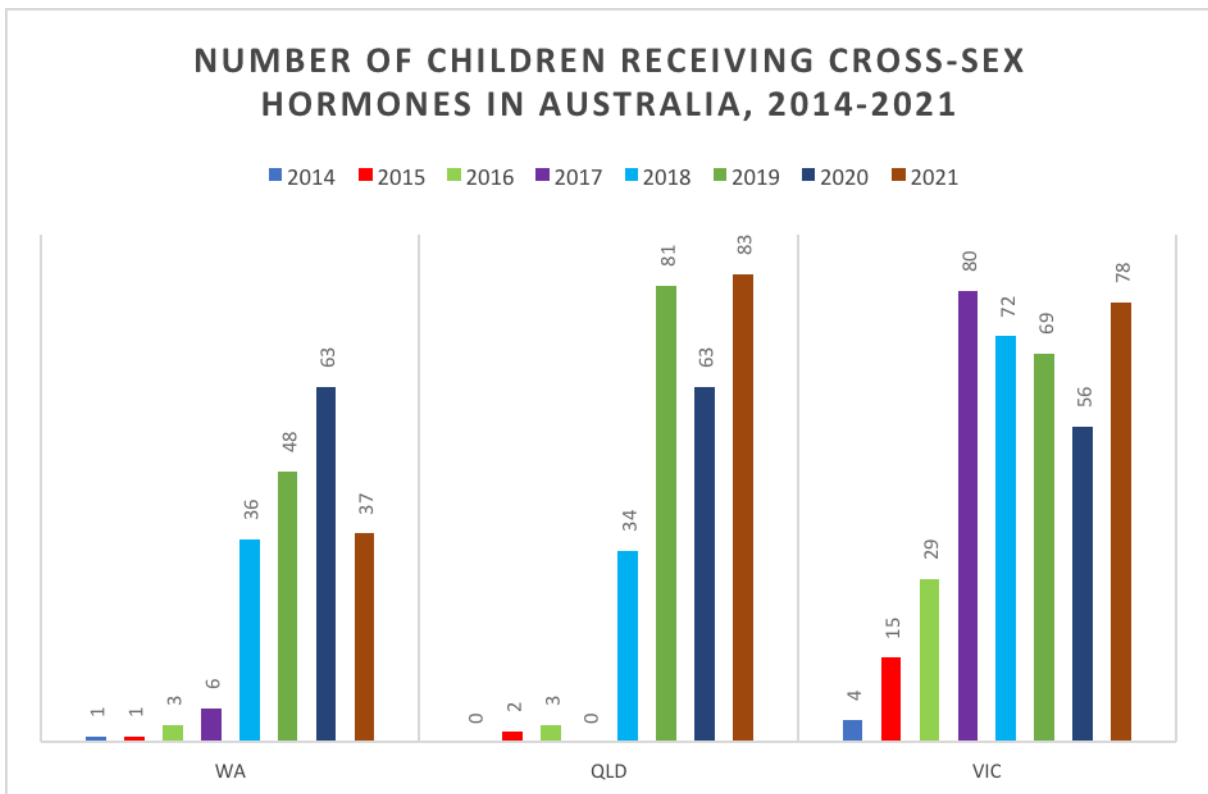


Figure 4

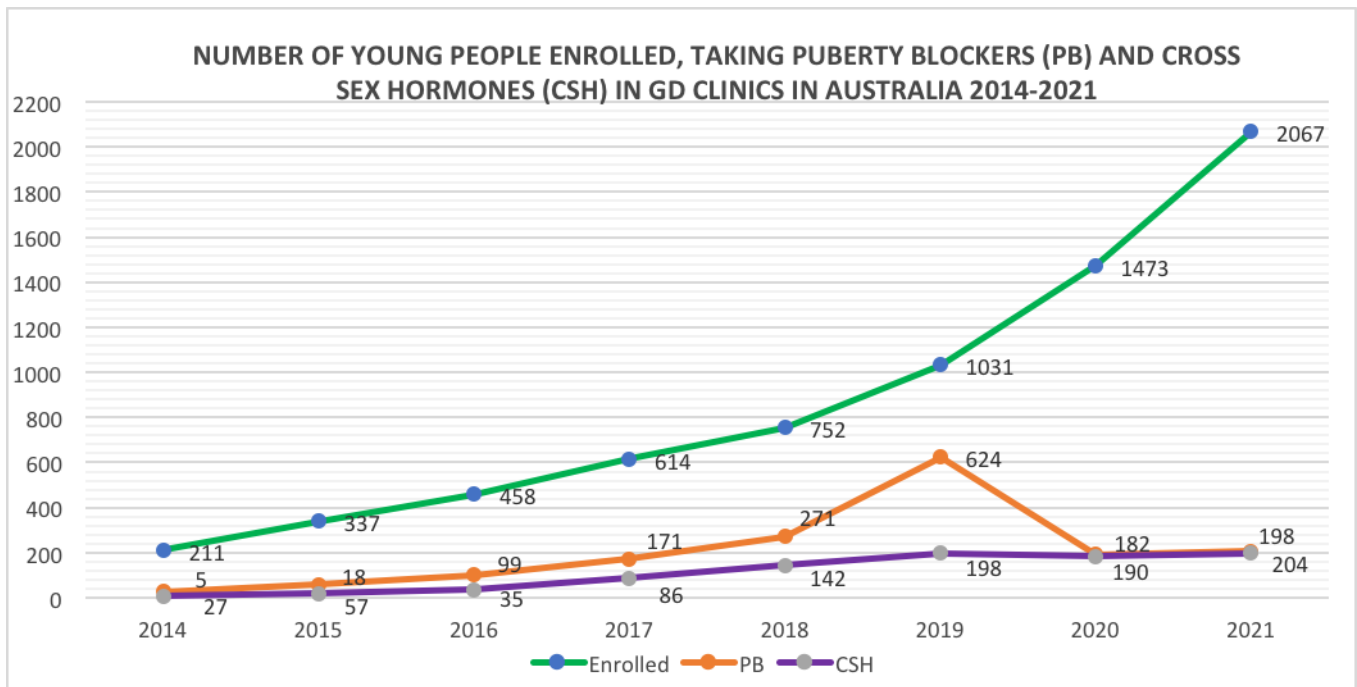


Figure 5