

Summary of a recommendation by COHERE 16.6.2020
Finland

Medical treatment methods for gender dysphoria in non-binary adults – recommendation

In its meeting on 11 June 2020, the Council for Choices in Health Care in Finland (COHERE Finland) adopted a recommendation on medical treatment methods for gender dysphoria, i.e. anxiety, related to a non-binary gender identity in adults.

The recommendation clarifies the roles of different healthcare operators in a situation where an adult is uncertain about their gender identity and presents the medical treatment methods included in the range of public healthcare services for the medical treatment of gender dysphoria caused by non-binary variation in gender identity.

Gender dysphoria has increased in prevalence both in Finland and in other Western countries. Some people suffering from gender dysphoria seek diagnostic examinations, a portion of them are diagnosed as gender non-binary, and still fewer wish to undergo treatments that would permanently modify their bodies. In Finland, the diagnostics of gender dysphoria, the assessment of the need for medical treatments and the planning of their implementation are centralised by law in the multi-professional research clinics of Helsinki University Central Hospital (HUS) and Tampere University Hospital (TAYS).

In COHERE's view, people experiencing a lack of clarity related to their gender identity should first be provided with psychosocial support according to the severity of their symptoms and the need for care as part of the primary or specialised healthcare provided by their municipality. Any assessment of the need for psychiatric and psychosocial care, and any treatment deemed necessary, should be arranged before the person is referred to the centralised research clinic so that the diagnostic period can be initiated. These measures would improve the appropriate allocation of healthcare resources and ensure the timeliness of the diagnostic process and any treatment process.

It is medically justified to send persons to the multi-professional research clinics at HUS and TAYS if they meet the following criteria. The person has a significant and prolonged gender conflict that causes reliably identifiable and harmful suffering in everyday situations, the person has undergone diagnostics and treatment of possible concomitant psychiatric symptoms and their continuation during and after treatment, if necessary, has been ensured, and the person has been confirmed to have the psychological conditions and sufficient functional capacity for a demanding evaluation.

Medical care in research clinics is always planned on an individual basis, and the treatments to be carried out must be medically justified in relation to the desired outcome. When deciding on treatment measures, it must be ensured that the dysphoria associated with gender identity is persistent (> 2 years), that the person can consistently describe how the dysphoria is harmful to them in everyday situations and that it can be reliably established that the dysphoria is detrimental to their social life or professional career or causes significant suffering. In addition, the personal and identity development of the person must be sufficiently structured, and the diagnostics and treatment of any simultaneous psychiatric symptoms must be appropriately arranged. Treatment measures that modify the body to be more congruent with the person's gender identity can be carried out if the person can reasonably justify the need for them and is aware of the risks associated with them.

When these conditions are met, COHERE considers that, in accordance with an individual assessment and medically justifiably in the management of persistent and severe dysphoria related to non-binary gender



Summary of a recommendation by COHERE 16.6.2020
Finland

identity, the range of services should include hormone therapy that is individually tailored in terms of duration and dosage, and, for persons assigned female at birth, a chest reshaping surgery to remove contours indicating a female sex. Chest surgery procedures are carried out in line with the principles of promoting a good outcome and reducing adverse events as detailed in the Current Care Guidelines. The multi-professional working groups with expertise in the study and treatment of gender identity at HUS and TAYS should jointly agree on uniform indications and implementation for epilation treatment and phoniatics consultation.

Research data on the treatment of dysphoria due to gender identity conflicts is limited. COHERE considers that, moving forward, multi-professional clinics specialising in the diagnostics and treatment of gender identity conflicts at HUS and TAYS should collect extensive information on the diagnostic process and the effects of different treatment methods on mental wellbeing, social and professional capacity, and quality of life. There is also a need for more information on the disadvantages of procedures and on people who regret them.

Link to the COHERE website: <https://palveluvalikoima.fi/en/frontpage>

The Council for Choices in Health Care in Finland (COHERE Finland) works in conjunction with the Ministry of Social Affairs and Health, and its task is to issue recommendations on services that should be included in the range of public health services. Further information: www.palveluvalikoima.fi.

