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United States Senate

COMMITTEE ON HEALTH, EDUCATION,
LABOR, AND PENSIONS

WASHINGTON, DC 20510-6300

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October 9, 2024

VIA ELECTRONIC TRANSMISSION

Mark Del Monte, J.D.
CEO / Executive Vice President
American Academy of Pediatrics
345 Park Boulevard
Itasca, IL 60143

Dear Mr. Del Monte:

I write to request information regarding The American Academy of Pediatrics' (AAP) 2018 Policy Statement, "Ensuring Comprehensive Care and Support for Transgender and Gender Diverse Children and Adolescents," which was developed for children and/or adolescents suffering from "gender dysphoria." As the Ranking Member of the Senate Committee on Health, Education, Labor, and Pensions, I have a responsibility to ensure transparency and accountability in matters that directly affect public health. As the largest professional organization of pediatricians in the U.S., the public must be properly informed on the scientific evidence your organization relies on, especially since these guidelines have the potential to influence physicians, minors, and patients.

In January 2020, the United Kingdom's National Health Service (NHS) established a working group, the Cass Review, to review the published evidence on the use of puberty blockers and cross-sex hormones in children and young adults.¹ The Cass Review aimed to understand the reasons for the rapid rise in children and adolescents seeking gender transition procedures and to develop recommendations to ensure that they undergo procedures that are "safe, holistic, and effective."²

On April 10, 2024, the Cass Review Final Report (Final Report) was published. The Final Report included systematic reviews of scientific literature carried out by University of York on issues including characteristics of children and young people who are seeking gender transition procedures, the forces driving the rise in referrals and the change in patient demographics, and gender transition procedures provided through NHS-affiliated hospitals.³ The University of York's review further evaluated international guidelines on gender transition procedures, the effects of social transitioning, puberty blockers and hormone treatments, and evaluated 23 regional, national,

¹ NATIONAL HEALTH SERVICE, THE CASS REVIEW—INDEPENDENT REVIEW OF GENDER IDENTITY SERVICES FOR CHILDREN AND YOUNG PEOPLE—FINAL REPORT (UK).

² *Id.* at 20.

³ *Id.* at 21.

and international guidelines covering key areas of practice—nearly all of which were influenced by either WPATH or Endocrine Society Guidelines.⁴

According to the Final Report, evidence on the use of puberty blockers and cross-sex hormones on mental or psychosocial health is “weak” and there continues to be a lack of high-quality evidence supporting their use.⁵ The Final Report also found insufficient evidence to assess whether social transition in childhood has positive or negative effects on mental health, and weak evidence for efficacy in adolescence.⁶ Evidence for early puberty suppression is also unclear, with unknown effects on cognitive and psychosexual development.⁷ The Final Report also notes that, there is insufficient evidence the physical risks and benefits of these procedures.⁸

AAP’s 2018 Policy Statement argues that the practice of “watchful waiting,” wherein a child’s assertions of being the opposite sex are held as possibly true until a certain post-pubertal age where they can be considered valid.⁹ One peer-reviewed scientific journal reviewed AAP’s 2018 Policy Statement and found that AAP, in making this claim, misrepresented medical research and omitted all the studies that undermine gender transition procedures.¹⁰ In fact, the article stated that AAP’s 2018 Policy Statement, “told neither the truth nor the whole truth, committing sins both of commission and of omission, asserting claims easily falsified by anyone caring to do any fact-checking at all.”¹¹

Notably, AAP’s Policy Statement was included in the Cass Review’s evaluation of 23 national, regional, and international gender transition guidelines, most of which the Final Report found were influenced by the World Professional Association for Transgender Health’s (WPATH) and the Endocrine Society and lacked clarity on various key issues.¹² Following the Cass Review’s Interim Report, in 2023, AAP announced that it would commission a systematic review of the medical evidence, saying that its updated policy statement and companion clinical and technical reports will reflect five additional years of data and research in gender transition procedures since the 2018 Policy Statement’s initial release.¹³ Their decision followed reports that AAP warned WPATH that it would not endorse the group’s recommendations if it included age limits for gender transition procedures.¹⁴

⁴ *Id.* at 28.

⁵ *Id.* at 20.

⁶ *Id.* at 31.

⁷ *Id.* at 32.

⁸ *Id.* at 32, 130.

⁹ *Id.* at 4.

¹⁰ James M. Cantor, *Transgender and Gender Diverse Children and Adolescents: Fact-Checking of AAP Policy*, J. of Sex & Marital Therapy (2019), https://www.ohchr.org/sites/default/files/Documents/Issues/SexualOrientation/IESOGI/Other/Rebekah_Murphy_20191214_JamesCantor-fact-checking_AAP-Policy.pdf.

¹¹ *Id.*

¹² NATIONAL HEALTH SERVICE, THE CASS REVIEW—INDEPENDENT REVIEW OF GENDER IDENTITY SERVICES FOR CHILDREN AND YOUNG PEOPLE—FINAL REPORT (UK).

¹³ Alyson Wyckoff, *AAP reaffirms gender-affirming care policy, authorizes systematic review of evidence to guide update*, AAP NEWS (Aug. 4, 2023), <https://publications.aap.org/aapnews/news/25340/AAP-reaffirms-gender-affirming-care-policy?autologincheck=redirected>.

¹⁴ Azeen Ghorayski, *Biden Officials Pushed to Remove Age Limits for Trans Surgery, Documents Show*, THE NEW YORK TIMES (June 25, 2024), <https://www.nytimes.com/2024/06/25/health/transgender-minors-surgeries.html>.

On June 6, the American College of Pediatrics led seventeen other medical and health policy organizations, as well as dozens of individual healthcare experts in calling on AAP to “**immediately stop** the promotion of social affirmation, puberty blockers, cross-sex hormones, and surgeries for children and adolescents.”¹⁵

AAP must answer for its failures given its oversized impact on children and young adults seeking gender transition procedures. Accordingly, I ask that you respond to each of the following questions, on a question-by-question basis, **by October 24, 2024**. For the production of records, we ask these be unredacted and bates stamped.

1. Please describe the process for developing and reauthorizing the Policy Statement AAP’s 2018 Policy Statement.
2. What types of scientific evidence were considered when formulating the 2018 Policy Statement? Please also produce all peer-reviewed and non-peer reviewed materials considered or relied on when drafting and finalizing the Policy Statement.
3. Please provide the name(s) and title(s) of each individual involved in creating and updating AAP’s 2018 Policy Statement.
4. When developing its 2018 Policy Statement, how did AAP address conflicting studies or evidence?
 - a. As stated above, the Final Review found that the evidence on the use of puberty blockers and cross-sex hormones to treat the mental or psychosocial health of minors is “weak” and there continues to be a lack of high-quality evidence. If the evidence is “weak,” how was it possible for AAP to measure its 2018 Policy Statement in improving “health outcomes?”
5. Produce AAP’s organizational charts from 2018 to the present.
6. Produce a list of AAP Board of Directors from 2018 to the present.
7. Produce all records, including agendas, minutes, electronic communications, and electronic recordings, for AAP Board of Directors meetings that relate to the 2018 Policy Statement on gender transition procedures from 2018 to the present.
8. Please provide an update on AAP’s process for reevaluating its guidelines as well as a proposed timetable for reevaluation.
9. Produce all electronic communications between AAP and WPATH regarding WPATH’s Standards of Care (SOC8).

¹⁵ *Doctors Protecting Children Declaration*, AMERICAN ASSOC. OF PEDIATRICS (June 6, 2024), <https://doctorsprotectingchildren.org/>.

10. Produce complete Form 990s that your organization has filed with the Internal Revenue Service for each year from 2018 to the present. In your submission, please also provide complete Schedule Bs.

Respectfully,

Bill Cassidy, M.D.

Bill Cassidy, M.D.

Ranking Member

U.S. Senate Committee on Health,
Education, Labor, and Pensions