

Highs, Lows, and Hormones: A Qualitative Metasynthesis of Transgender Persons' Experiences Undergoing Gender-Affirming Hormone Therapy.

Fowler J A¹, Warzywoda S¹, Franks N², Lazarou M¹, Mendis M³, Wood P⁴, Bisshop F⁵, Dean J A¹

¹The University of Queensland, Faculty of Medicine, School of Public Health, Herston, Brisbane, QLD 4006, Australia, ²The University of Southern Queensland, Faculty of Health, Engineering and Sciences, School of Psychology and Counselling, Centre for Health Research, Institute for Resilient Regions, Ipswich, QLD 4305, Australia, ³The University of Queensland, Faculty of Medicine, General Practice Clinical Unit, Herston, Brisbane, QLD 4006, Australia, ⁴Alexander Heights Family Practice, Perth, WA 6064, Australia, ⁵Holdsworth House Medical Practice, Brisbane, QLD 4006, Australia

Background: Gender Affirming Hormone Therapy (GAHT) is a therapeutic approach which aims to help Transgender individuals transition from their sex presumed at birth to their internal gender identity. This qualitative meta-synthesis of published articles explored the experience of GAHT from the perspective of Transgender people to provide a nuanced and highly contextual understanding of the GAHT journey.

Methods: Systematic searches of eight databases yielded an initial 2670 papers. Following PRISMA guidelines, abstracts were screened independently by two authors, full-text review was conducted by one author, with excluded papers reviewed by a third. Thematic analysis was conducted of the final 28 papers, with final themes agreed by all research members.

Results: Whilst the journey of GAHT is highly personal, and at times difficult (e.g., negotiating rapid mood changes), the overarching message from participants was that undergoing GAHT is life changing and always “worth it”. However, GAHT should not be treated as a “fix” for any potential co-existing psychological issues. Participants described how inherent rules governed how physical changes are appraised and this linked to their expectations and satisfaction of GAHT journey outcomes. Unmet expectations and violation of these rules may lead to hormone overuse, especially if not receiving adequate or desired practitioner supervision. A final theme spoke to the importance of societal affirmation of Transgender identities.

Conclusion: Our findings highlight that the GAHT journey is highly personal, making it essential that practitioners use holistic, affirming, person-centred models of care and work collaboratively to meet patients' idiosyncratic GAHT needs. A desire for rapid physical changes and management of mood changes may pose difficulty for patients but may be mitigated by managing patient expectations and practicing informed consent models of care. It is essential to Transgender care that practitioners cultivate affirming, safe spaces to meet Transgender person's unique needs, expectations and challenges.

Disclosure of Interest Statement: The authors have no conflicts of interest to declare. This research was funded by the Sexual Health Research Fund Grant (Round 2) 2019. Administered on behalf of Queensland's Department of Health by Australasian Society for HIV, Viral Hepatitis and Sexual Health Medicine (ASHM).