

Informed Consent for Feminising Hormone Therapy

This informed consent form will explain the expected benefits and possible side effects of HRT so you can decide if it's something you would like to proceed with.

Please read through it carefully to make sure you have all the information needed to make an informed and confident decision.

By signing this form, you are stating that you have discussed the risks and benefits with your doctor or a member of the medical team and that you understand how these benefits and risks apply to you personally.

You agree to take androgen blockers and/or oestrogen ONLY as prescribed and to discuss your treatment with your doctor before making any changes.

This consent form uses some medical terms and words for body functions and parts. If you do not understand a word or term, please ask.

Glossary

Androgen blockers are used to decrease the amount and/or block the effect of testosterone on and reduce the traditionally male features of the body.

The **cardiovascular** or circulatory, system supplies the body with blood. It consists of the heart, arteries, veins, and capillaries.

Ejaculate is another word for sperm or semen.

Electrolysis is a method of removing individual hairs from the face or body by destroying the growth centre of the hair with chemical or heat energy.

Fertility is the ability to produce an offspring through reproduction.

HRT is an abbreviation for hormone replacement therapy.

To be **infertile** means that you wouldn't be able to get someone pregnant or conceive biological children of your own.

Oestrogen (usually estradiol) is a sex hormone that is largely made in the ovaries. A bio-identical version of this hormone is used to feminise the body and it can also decrease the amount and effect of testosterone.

Prolactin is a hormone made by the pituitary gland, a small gland at the base of the brain.

Testosterone is a sex hormone that is made in the testicles. Testosterone hormone levels are important to sexual development and functions. Cis women's bodies also make testosterone.

The Expected Effects of Feminising Hormone Therapy

It may take several months for feminine changes to become noticeable in the body and usually take up to 3 to 5 years to be complete. Because each person responds to hormone therapy differently, it is difficult to predict how will you and your body respond.

Permanent Changes (these will not go away, even if you decide to stop HRT):

- Breast growth and development – please note that breast size varies in all people; breasts can also look smaller if you have a broader chest.
- Testicles will get smaller and softer.
- Testicles will produce less sperm and you will become infertile. How long this takes to happen and become permanent varies greatly.

Please ask about your fertility preservation options if you are hoping to conceive biological children in the future.

Non-Permanent Changes (these will likely reverse if HRT is stopped):

- Loss of muscle mass and decreased strength, particularly in the upper body.
- Weight gain - this fat tends to go to the buttocks, hips and thighs, rather than the abdomen and mid-section, making the body look more feminine in shape.
- Skin will become softer and acne may decrease.
- Facial and body hair will get softer and lighter and grow more slowly. This effect may not be satisfactory or sufficient so women often choose to have electrolysis or laser therapy to remove unwanted body hair.
- Male pattern baldness of the scalp may slow down or stop, but hair will generally not regrow.
- Reduced sex drive. If this does affect you once you start HRT, please ask your clinician for advice as supplementary low-dose testosterone may help with this issue.
- Decreased strength of erections or inability to get an erection. The ejaculate will become thinner and watery and there will be less of it.
- Changes in mood or thinking may occur; you may find that you have an increased emotional reaction to things. Some people find that their mental health improves after starting hormone therapy.

Hormone therapy will **not** change the bone structure of the face or body; your Adam's apple will not shrink; the pitch of your voice will not automatically change.

If necessary, other treatments are available to help with these things, please ask about your options.

I have questions about the possible effects of hormone therapy. _____

My GP or a member of the medical team has answered my questions about the effects of HRT. _____

The Risks and Possible Side Effects of Oestrogen Therapy

- Loss of fertility - the ability to make healthy sperm may not come back, even after stopping HRT. Because the effect on sperm is unpredictable, if you have penetrative sex with an AFAB partner, you or your partner should still use birth control (e.g. condoms).
- Increased risk of developing blood clots; blood clots to the lungs, heart or brain could result in death.
- Increased risk of having cardiovascular disease, a heart attack or stroke. This risk may be higher if you smoke cigarettes, are over 45, or if you have high blood pressure, high cholesterol, diabetes or a family history of cardiovascular disease.
- Possible increase in blood pressure; this might require medication for treatment.
- Increased risk of developing diabetes.
- Nausea and vomiting, especially when starting oestrogen therapy.
- Increased risk of gallbladder disease and gallstones.
- Changes in blood tests for the liver; oestrogen may contribute to damage of the liver from other causes.
- May cause or worsen headaches and migraines.
- May cause elevated levels of prolactin; some people on oestrogen have developed prolactinomas, a benign tumour of the pituitary gland that can cause headaches and problems with vision and other hormone problems.
- May worsen depression or cause mood swings.
- May increase the risk of breast cancer. The risk is higher than in cis men but lower than in cis women; the risk probably is related to how long you take oestrogen therapy. It's important that you attend cancer screening appointments when prompted.

The Risks and Possible Side Effects of Androgen Blockers (Dutasteride)

- Increased urine production and possible changes in kidney function.
- A drop in blood pressure and feeling lightheaded.
- Increased thirst.
- Increase in the potassium in the blood and in your body; this can lead to muscle weakness, nerve problems and dangerous heart arrhythmias (irregular heart rhythm).

I have questions about the risks of hormone therapy. _____

My GP or a member of the medical team has answered my questions about the risks of HRT. _____

Please note that smoking may greatly increase the risk of blood clots and cardiovascular disease. If you smoke, you should try to cut back or quit; your GP should be able to provide help with this.

I would like to discuss ways to help me quit smoking. _____

Important Notes

- Taking oestrogen in doses that are higher than recommended by your doctor will increase your risk of side effects and may not produce better feminising effects.
- You will need to stop taking hormones for a few weeks before and after any surgery.
- Treatment with oestrogen is expected to be lifelong; suddenly stopping oestrogen treatment after you have been on it for a long time may have negative health effects.
- You may choose to stop taking hormone therapy at any time or for any reason. You are encouraged to discuss this decision with your medical provider.
- Your GP may decrease the dose of oestrogen or androgen blockers or stop prescribing hormone therapy because of medical reasons and/or safety concerns. This, like all treatment decisions, will be discussed with you first.
- Hormone therapy is not the only way that a person may appear more feminine or transition to live as a female. Your medical provider and/or a mental health provider can help you explore other options that may help relieve your dysphoria and affirm your gender.

By signing this form, you agree to:

- Take androgen blockers and/or oestrogen only at the dosage and in the form that your medical provider prescribes. If you want to try other preparations or dosage, please contact your GP to discuss.
- Inform your medical provider if you are taking or start taking any other prescription drugs, dietary supplement, herbal or homeopathic drugs, or street drugs or alcohol so that you can discuss possible interactions with and effects on your hormone treatment.
- Inform your medical provider of any new physical symptoms or any medical conditions that may develop before or while you are taking HRT. Please inform your GP if you think you are having bad side effects from the medications, including mental health changes.
- Keep regular follow up appointments; this may include regular blood tests, medication reviews and cancer screening appointments (mammography, prostate examination etc).

I have questions about my rights and responsibilities with taking hormone therapy.

My GP or a member of the medical team has discussed my questions with me.

By signing this form, you acknowledge that you have adequate information and knowledge to be able to make a decision about hormone therapy and that you understand the information your medical provider has given you.

Based on this information I choose to start oestrogen HRT and/or androgen blockers.

Patient signature

Date