

# OHIO STATE MEDICAL ASSOCIATION HOUSE OF DELEGATES

**Resolution No. 05 – 2023**

**Introduced by:** OSMA Medical Student Section

**Subject:** Protection for Physician Administration of Gender-Affirming Care

**Referred to:** Resolutions Committee No. 1

**WHEREAS**, Scope-limiting legislation has increased significantly in the Ohio General Assembly in recent years, with goals to intervene on the physician-patient relationship and ban physicians from implementing specific evidence-based treatments<sup>1</sup>

**WHEREAS**, such legislation aims to punish providers of these evidence-based treatments, such as removal of one’s state licensure or even criminal prosecution of physicians for providing evidence-based care<sup>2</sup>; and

**WHEREAS**, such legislation impacts nearly every specialty, and additionally allows for untrained non-physician legislators to dictate what treatments a physician is allowed to consider and how physicians counsel their patients<sup>3</sup>; and

**WHEREAS**, House Bills 513 of the 133<sup>rd</sup> Ohio General Assembly and 454 of the 134<sup>th</sup> Ohio General Assembly are named the “Vulnerable Child Protection Act” and the “Save Adolescents from Experimentation (SAFE) Act” respectively, to imply that physicians are harming vulnerable children and experimenting on adolescents in use of evidence-based care<sup>4,5</sup>; and

**WHEREAS**, H.B. 454 aims to ban specific gender-affirming medical treatments and procedures for adolescent patients, treatments which have been proven to improve quality of life and psychological well-being, as well as reduce suicidality in a high-risk population<sup>6-10</sup>; and

**WHEREAS**, gender-affirming treatment in minors is administered with parental consent, and has been shown to improve mental health, quality of life and social development, as well as decrease psychiatric comorbidities associated with untreated Gender Dysphoria<sup>11-14</sup>; and

**WHEREAS**, H.B. 454 threatens removal of public funding for healthcare institutions where gender-affirming care occurs, therefore punishing every physician, staff member and patient in a hospital system that performs evidence-based medicine<sup>5</sup>; and

**WHEREAS**, our OSMA has passed policy to actively work to ensure that the sanctity of the physician-patient relationship is protected in all legislative and regulatory matters, and also opposes any portion of proposed regulation that criminalizes clinical practice that is the standard of care<sup>15,16</sup>; and

**WHEREAS**, our OSMA has passed policy to support evidence-based treatment for gender-affirming care and education for physicians to provide culturally-competent care, though current policy does not oblige OSMA to pursue protection for physicians who provide this care<sup>17</sup>; and NOW THEREFORE

**BE IT RESOLVED**, that our OSMA oppose any efforts to ban the administration of evidence-based care to patients when determined to be clinically indicated by their physician; be it further

**RESOLVED**, that our OSMA oppose legislative or regulatory actions that would penalize physicians, Allied Health professionals, or healthcare entities who administer evidence-based gender-affirming care to patients.

**Fiscal Note:**           \$ (Sponsor)  
                                  \$ 25,000 (Staff)

**References:**

1. Drs. Don Mack and Sarah Sams Testify on Criminalization of the Practice of Medicine – Ohio Academy of Family Physicians. <https://www.ohioafp.org/wfmu-article/drs-don-mack-and-sarah-sams-testify-on-criminalization-of-the-practice-of-medicine/>
2. DeWitt D, July 21 OCJ, 2022. Ohio AG’s refusal to guide doctors facing felony criminal charges is a massive failure of duty. Ohio Capital Journal. Published July 21, 2022. <https://ohiocapitaljournal.com/2022/07/21/ohio-ags-refusal-to-guide-doctors-facing-felony-criminal-charges-is-a-massive-failure-of-duty/>
3. National Association of Criminal Defense Law - Ohio Resources on the Criminalization of Pregnancy and Reproductive Health. NACDL - National Association of Criminal Defense Lawyers. Accessed December 4, 2022. <https://www.nacdl.org/mapdata/CriminalizationPregnancyReproductiveHealthOH>
4. House Bill 454 | The Ohio Legislature. 134<sup>th</sup> Ohio General Assembly. Retrieved December 4, 2022, from <https://www.legislature.ohio.gov/legislation/legislation-summary?id=GA134-HB-454>
5. House Bill 513 | The Ohio Legislature. 133<sup>rd</sup> Ohio General Assembly. Accessed December 4, 2022. <https://www.legislature.ohio.gov/legislation/legislation-summary?id=GA133-HB-513>
6. Nobili A, Glazebrook C, Arcelus J. Quality of life of treatment-seeking transgender adults: A systematic review and meta-analysis. Rev Endocr Metab Disord. 2018 Sep;19(3):199-220. doi: 10.1007/s11154-018-9459-y. PMID: 30121881; PMCID: PMC6223813.

- 91 7. Lindqvist EK, Sigurjonsson H, Möllermark C, Rinder J, Farnebo F, Lundgren TK.  
92 Quality of life improves early after gender reassignment surgery in transgender  
93 women. *Eur J Plast Surg.* 2017;40(3):223-226. doi: 10.1007/s00238-016-1252-0.  
94 Epub 2016 Oct 29. PMID: 28603386; PMCID: PMC5440516.
- 95 8. de Vries AL, McGuire JK, Steensma TD, Wagenaar EC, Doreleijers TA, Cohen-  
96 Kettenis PT. Young adult psychological outcome after puberty suppression and  
97 gender reassignment. *Pediatrics.* 2014 Oct;134(4):696-704. doi:  
98 10.1542/peds.2013-2958. Epub 2014 Sep 8. PMID: 25201798.
- 99 9. Anderson D, Wijetunge H, Moore P, Provenzano D, Li N, Hasoon J, Viswanath  
100 O, Kaye AD, Urits I. Gender Dysphoria and Its Non-Surgical and Surgical  
101 Treatments. *Health Psychol Res.* 2022 Sep 23;10(3):38358. doi:  
102 10.52965/001c.38358. PMID: 36168640; PMCID: PMC9501960.
- 103 10. Tang A, Hojilla JC, Jackson JE, Rothenberg KA, Gologorsky RC, Stram DA,  
104 Mooney CM, Hernandez SL, Yokoo KM. Gender-Affirming Mastectomy Trends  
105 and Surgical Outcomes in Adolescents. *Ann Plast Surg.* 2022 May;88(4  
106 Suppl):S325-S331. PMID: 36248210; PMCID: PMC9555285.
- 107 11. Arnoldussen M, de Rooy FBB, de Vries ALC, van der Miesen AIR, Popma A,  
108 Steensma TD. Demographics and gender-related measures in younger and older  
109 adolescents presenting to a gender service. *Eur Child Adolesc Psychiatry.* 2022  
110 Nov 12. doi: 10.1007/s00787-022-02082-8. Epub ahead of print. PMID:  
111 36370316.
- 112 12. Tebbe EA, Budge SL. Factors that drive mental health disparities and promote  
113 well-being in transgender and nonbinary people. *Nat Rev Psychol.* 2022 Sep  
114 26:1-14. doi: 10.1038/s44159-022-00109-0. Epub ahead of print. PMID:  
115 36187743; PMCID: PMC9513020.
- 116 13. Coleman E, Radix AE, Bouman WP et al. Standards of Care for the Health of  
117 Transgender and Gender Diverse People, Version 8. *Int J Transgend Health.*  
118 2022 Sep 6;23(Suppl 1):S1-S259. doi: 10.1080/26895269.2022.2100644. PMID:  
119 36238954; PMCID: PMC9553112.
- 120 14. Prince JCJ, Safer JD. Endocrine treatment of transgender individuals: current  
121 guidelines and strategies. *Expert Rev Endocrinol Metab.* 2020 Nov;15(6):395-  
122 403. doi: 10.1080/17446651.2020.1825075. Epub 2020 Sep 29. PMID:  
123 32990485.
- 124 15. Legislative or Regulatory Inference in the Practice of Medicine in the State of  
125 Ohio, OSMA Policy 07-2020.
- 126 16. Criminalization of Medical Care. OSMA Policy 19-2012.  
127 Supporting Gender-Affirming Care for Transgender and Gender Minority  
128 Patients. OSMA Policy 15-2020