What does transgender mean?
Most people are told they are a boy or a girl (male or female) based on the genitals they were born with. This is the sex you are assigned at birth. For some people, that male or female label may not feel right.

Someone born female may feel that they are really a male, and someone born male may feel that they are really a female. People who feel this way are called transgender. Others may feel that they belong to neither gender or to both genders. People who feel this way sometimes identify as “gender nonbinary,” “gender fluid,” or “genderqueer.” Some other terms may include androgynous, agender, gender neutral, and gender nonconforming.

What steps do people take to express gender?
The ways people express their gender can vary. Some people who are transgender decide to change how they dress. Some choose to change their name and preferred pronouns. Some choose to take hormones or have surgery so that their bodies more closely match their gender identity. Others do not. There is no “right” way to be a transgender person.

I have questions about my gender. Who can I talk to?
It may be helpful to talk with your parents, a teacher, counselor, doctor, or other health care professional. It’s a good idea to ask about what can be kept private before you talk with an adult.
There are websites and hotlines where you can be anonymous if you need information. These websites also can help you educate your parents, family, and friends about the transgender community. See the “Resources” section for details.

**How can a doctor help me?**

There are doctors and other health care professionals who can help you

- figure out the best way to talk with your friends and family about your gender identity
- find information and resources in your community
- give documents to your school that support your gender identity
- get important health care (including vaccines, routine screenings, and birth control)
- find gender transition care

See the “Resources” section for help finding a trans-friendly doctor or other health care professional in your area.

**What options do I have for transitioning?**

A gender transition is a process you can go through to express your gender. There are many ways you can transition, including

- changing how you dress or act
- changing your name and preferred pronouns (she, he, they, etc.)
- taking medication (including puberty blockers and hormone treatment)
- having surgery

You can think about doing some, all, or none of these options. If you are interested in medication or surgery, talk with your doctor, who may have you see an obstetrician–gynecologist (ob-gyn) or other health care professional. They can help you transition safely. Taking treatments from anyone without a medical license can be dangerous.

**Whose permission do I need for a medical transition?**

In most places in the United States, you will need permission from your parent or guardian to do a hormonal or surgical transition before you are 18 years old. You also will need to talk with a mental health professional and get a letter of support before starting treatment. This may involve multiple counseling sessions.

**How do puberty blockers work?**

Puberty blockers (also called suppressors) are medications that delay the changes that come with sexual maturity. These medications can stop menstrual periods and the growth of breasts, or stop the deepening of the voice and the growth of facial hair. Most effects of puberty blockers are reversible.

Puberty blockers are given as an implant or as a shot. You may need to wait until you have started the early stages of puberty before taking puberty blockers. The early stages of puberty include budding breasts, growing testicles, and light pubic hair.

**How does hormone treatment work?**

Hormone treatment is medication that helps you look or sound more masculine or feminine. This also may be called cross-sex hormone treatment or gender-affirming hormone therapy. Depending on the treatment, these medications can help you develop sex characteristics, such as

- deepening your voice
- growing facial hair
- developing breasts
- changing your body shape

Most of these changes cannot be reversed.

Depending on the hormone, treatment comes in several forms, including as a shot, pill, patch, gel/cream, or implant. You may need to wait until you are 16 years old to begin hormone treatment, but you may be able to take puberty blockers in the meantime.

**What are the risks of puberty blockers and hormone treatment?**

Puberty blockers may

- slow your physical growth and affect your height
- decrease your bone density (making your bones more likely to break in the future)

Hormone treatment may increase your risk of

- blood clotting problems
- high blood pressure
• mood changes
• liver inflammation (hepatitis)

What are the benefits of puberty blockers and hormone treatment?
Puberty blockers may help your emotional and social development. They may make you more comfortable in your body. Hormone treatment is shown to help transgender people with depression and boost self-esteem. These treatments prevent changes in your body that you are not comfortable with. They also may prevent the need for future surgery, such as removal of the breast (“top surgery”).

Is surgery an option for me?
Surgery is usually only an option for people over the age of 18. One surgery that may be available for teens is a mastectomy (removal of the breasts). Talk with your ob-gyn or other health care professional if you are interested in surgery.

Do I need to keep seeing a doctor after a medical transition?
Yes, you need to keep seeing an ob-gyn or other health care professional to continue taking hormones. Health care professionals also will help make sure you stay healthy, physically and emotionally.

• have female reproductive organs (like a uterus or a vagina)
• are taking feminizing hormones (like estrogen)

Am I at risk of pregnancy or sexually transmitted infections?
All people who are sexually active are at risk of getting a sexually transmitted infection (STI). If you have female reproductive organs and are sexually active, you also can get pregnant. All teens who are sexually active and want to prevent pregnancy need to use birth control. See FAQ112 Birth Control for a list of birth control options.

Condoms give the best protection against STIs, but they are not the best protection against pregnancy. It is best to use condoms and another method of birth control, such as an intrauterine device (IUD) or a birth control implant, to protect against pregnancy and STIs.

What should I know about pregnancy after a medical transition?
Some kinds of hormone treatments may make it harder for you to have a baby in the future. Some kinds of surgery may make it impossible. Talk about this with your doctor before you have treatment. If you think you may want to have a baby in the future, there are ways to help keep that possible.

I’m bothered by period bleeding or cramps. How can I get help?
These are common problems that can be treated. Options may include birth control pills, a birth control shot, or an IUD. Talk with your ob-gyn or other health care professional about your options.

What other health risks should I know about?
Many parents, communities, and schools support teens who are transgender. Teens who do not feel supported by adults are more likely to be depressed. Some teens cope with these thoughts and feelings in harmful ways. They may try to hurt themselves. They may turn to drugs and alcohol. Some skip school or drop out. Some run away from home.

Help and support are out there if you need it. If you are feeling depressed or if you just want to talk to someone, think about talking with a teacher, counselor, or doctor. The “Resources” and “Hotlines” sections also have places you can go to for help.

Resources
Centerlink
(954) 765-6024
www.lgbtcenters.org
Directory of community centers for LGBT people.

Transgender Care Listings
www.transcaresite.org
Directory of trans-friendly health care professionals.

Trans Youth Equality Foundation
www.transyouthequality.org
Resources for transgender teens and young adults.

Campus Pride
www.campuspride.org
Resources for LGBTQ college students.

PFLAG
(202) 467-8180
www.pflag.org
Network of communities for LGBTQ people, parents, and friends.
Gender Spectrum
510-788-4412
www.genderspectrum.org
Organization that supports gender expansive children, teens, and their families.

Hotlines
Trevor Lifeline
Toll-free: 866-4-U-TREVOR (866-488-7386)
Hours: 7 days a week, 24 hours a day
www.thetrevorproject.org
Confidential suicide and crisis counseling for LGBTQ teens and young adults. Text and instant messaging options are available on the website.

Trans Lifeline
Toll-free: 877-565-8860
Hours: 7 am–1 am PST / 9 am–3 am CST / 10 am–4 am EST
www.translifeline.org
Peer support hotline that is run by and for trans people.

LGBT National Youth Talkline
800-246-PRIDE (800-246-7743)
Hours: Monday–Friday 1 pm–9 pm PST / 4 pm–12 am EST, Saturday 9 am–2 pm PST / 12 pm–5 pm EST
help@LGBThotline.org
www.glbthotline.org/youth-talkline.html
Peer support and resources for LGBTQ teens and young adults.

Glossary
Birth Control Implant: A small, single rod that is inserted under the skin in the upper arm. The implant releases a hormone to prevent pregnancy.
Depression: Feelings of sadness for periods of at least 2 weeks.
Estrogen: A female hormone produced in the ovaries.
Gender Identity: A person's sense of being male, female, or somewhere in between. This identity may or may not correspond to the sex assigned at birth.
Genitals: The sexual or reproductive organs.
Hormones: Substances made in the body that control the function of cells or organs.
Intrauterine Device (IUD): A small device that is inserted and left inside the uterus to prevent pregnancy.
Mastectomy: Surgery to remove part or all of the breast.
Menstrual Period: The monthly shedding of blood and tissue from the uterus.
Obstetrician–Gynecologist (Ob-Gyn): A doctor with special training and education in women's health.
Puberty: The stage of life when the reproductive organs start to function and other sex features develop. For women, this is the time when menstrual periods start and the breasts develop.
Sexually Transmitted Infection (STI): An infection that is spread by sexual contact.
Transgender: A person whose gender identity differs from the sex they were assigned at birth.
Uterus: A muscular organ in the female pelvis. During pregnancy, this organ holds and nourishes the fetus.
Vagina: A tube-like structure surrounded by muscles. The vagina leads from the uterus to the outside of the body.

If you have further questions, contact your obstetrician–gynecologist.

TFA08004: This information was designed as an educational aid to patients and sets forth current information and opinions related to women's health. It is not intended as a statement of the standard of care, nor does it comprise all proper treatments or methods of care. It is not a substitute for a treating clinician's independent professional judgment. Please check for updates at www.acog.org to ensure accuracy.
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