

Dear Chairman MacDonald and members of the Committee on Health, Human Services and Elderly Affairs,

My name is Ashleigh Shenton. I am a resident physician in my third year of Internal Medicine training at Dartmouth-Hitchcock Medical Center, and I live in Lebanon. I am writing to voice my opposition to HB377, relative to health care professionals administering hormone treatments and puberty blockers.

Gonadotropin-releasing hormone agonists, more commonly known as “puberty blockers,” are essential medications for young people whose gender does not conform to their sex assigned at birth. These medications are reversible, allowing time for teens/ preteens to confirm their gender identity without permanent repercussions¹. More importantly, they prevent the irreversible development of secondary sex characteristics like breasts, menses, body hair, and voice changes, which cannot even be reversed by hormonal therapy as an adult. Receiving puberty blockers has been shown to decrease thoughts of suicide among gender nonconforming youths when compared to children who wanted but did not have access to puberty blockers². Another study published in JAMA Pediatrics found that only three percent of those who had received puberty blockers regretted the decision³. For comparison, bariatric surgery has a 19.5% regret rate, and getting a tattoo has a 16.2% regret rate⁴.

Puberty blockers are a non-permanent means of improving mental health outcomes for children and teens with a lower regret rate than many common procedures. As a physician, I believe that these medications are a necessary part of medical care.

Thank you for your time and attention on this important subject.

Sincerely,

A handwritten signature in black ink, appearing to read "Ashleigh Shenton". The signature is fluid and cursive, with a long horizontal stroke at the end.

Ashleigh Shenton, MD

References:

1. Salas-Humara C, Sequeira GM, Rossi W, Dhar CP. Gender affirming medical care of transgender youth. *Curr Probl Pediatr Adolesc Health Care*. 2019 Sep;49(9):100683. doi: 10.1016/j.cppeds.2019.100683. Epub 2019 Nov 15. PMID: 31735692; PMCID: PMC8496167.
2. Turban JL, King D, Carswell JM, Keuroghlian AS. Pubertal Suppression for Transgender Youth and Risk of Suicidal Ideation. *Pediatrics*. 2020 Feb;145(2):e20191725. doi: 10.1542/peds.2019-1725.
3. Olson KR, Raber GF, Gallagher NM. Levels of Satisfaction and Regret With Gender-Affirming Medical Care in Adolescence. *JAMA Pediatr*. 2024;178(12):1354–1361. doi:10.1001/jamapediatrics.2024.4527
4. Thornton SM, Edelatpour A, Gast KM. A systematic review of patient regret after surgery - A common phenomenon in many specialties but rare within gender-affirmation surgery. *The American Journal of Surgery*. 2024. 234:68-73. <https://doi.org/10.1016/j.amjsurg.2024.04.021>.