

World's experts condemn the McHugh hoax

By Cristan Williams

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Abstract

The Wall Street Journal (WSJ) recently ran an op-ed by the right-wing anti-transgender psychiatrist, Paul McHugh. McHugh purposefully misrepresented the research he cited in his article, misleading WSJ readers, and the wider population into believing the lie he was selling. When the World Professional Association for Transgender Health (WPATH) learned of the McHugh hoax, they responded. While WPATH [...]

Article

OPINION

Transgender Surgery Isn't the Solution

A drastic physical change doesn't address underlying psychological troubles.

By PAUL MCHUGH

June 12, 2014 7:19 p.m. ET

The government and media alliance advancing the transgender cause has gone into overdrive in recent weeks. On May 30, a U.S. Department of Health and Human Services review board ruled that Medicare can pay for the "reassignment" surgery sought by the transgendered—those who say that they don't identify with their biological sex. Earlier last month Defense Secretary Chuck Hagel said that he was "open" to lifting a ban on transgender individuals serving in the military. Time magazine, seeing the trend, ran a cover story for its June 9 issue called "The Transgender Tipping Point: America's next civil rights frontier."

Yet policy makers and the media are doing no favors either to the public or the transgendered by treating their confusions as a right in need of defending rather than as a mental disorder that deserves understanding, treatment and prevention. This intensely felt sense of being transgendered

The Wall Street Journal (WSJ) recently ran an op-ed by the right-wing anti-transgender psychiatrist, Paul McHugh. McHugh purposefully misrepresented the research he cited in his article, misleading WSJ readers, and the wider population into believing the lie he was selling. When the World Professional Association for Transgender Health (WPATH) learned of the McHugh hoax, they responded. While WPATH Board Member, Dr. Dan Karasic, responded to McHugh and the WSJ published the response, they refused to publish the part where WPATH notes that McHugh misrepresented the research he cites.

Since the WSJ seems to be content to help McHugh perpetrate his anti-trans hoax, I present the

actual response WPATH sent to the WSJ which includes the section that notes that McHugh misrepresented the research he cites in his WSJ article:

Dr. Paul McHugh (“Transgender surgery isn’t the solution”) writes about the study at Johns Hopkins in the 1970’s showing poor outcomes from transgender surgeries, leading to McHugh shutting down Johns Hopkins’ transgender program in 1979, and the US Department of Health and Human Services declaring transgender surgery experimental, and therefore not covered. Two weeks ago, HHS reversed its 1981 decision, and removed transgender health exclusions from Medicare. McHugh seems unaware of the work in transgender health in these last 30 years that led to this reversal by HHS.

McHugh does cite one study from 2011, by Cecilia Dhejne, MD and colleagues at Karolinska Institute in Stockholm. However, he misunderstands Dr. Dhejne’s work. In the paper, Dr. Dhejne states that the study was not designed to draw conclusions on the efficacy of transgender surgeries, yet McHugh does exactly that. A closer reading of the paper shows that the increased mortality is in those who had surgery before 1989, and that mortality in trans people after 1989 is not statistically different from the general population. A recently published paper by Dr. Dhejne and colleagues shows that the regret rate for those having surgery from 2001-2010 is only 0.3%. Dr. Dhejne’s work shows that outcomes for transgender surgery have improved tremendously in the past 30 years, which supports the HHS decision to remove trans exclusions.

McHugh also mischaracterizes the treatment of gender nonconforming children. As McHugh states, most gender nonconforming children do not identify as transgender in adulthood. However, those who receive puberty blocking drugs do not do so until puberty, when trans identity is likely to persist. These drugs allow adolescents and their parents to work with doctors to achieve the best outcome. This approach was demonstrated to be successful in research in the Netherlands before being adopted widely in the U.S.

The American Psychiatric Association and the World Professional Association for Transgender Health no longer view transgender identity as inherently pathological. Dr. McHugh’s views are stuck in the past.

Dan Karasic, MD

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Member, American Psychiatric Association Workgroup on Gender Dysphoria

Member, Board of Directors, World Professional Association for Transgender Health

Compare the above with the redacted letter the WSJ published:

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Dr. McHugh also mischar-acterizes the treatment of gender-nonconforming chil-dren. As he states, most gen-der-nonconforming children do not identify as transgender in adulthood. However, those who

receive puberty-blocking drugs do not do so until puberty, when trans identity is likely to persist. These drugs allow adolescents and their parents to work with doctors to achieve the best outcome. This approach was demonstrated to be successful in research in the Netherlands before being adopted widely in the U.S.

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Dan Karasic, M.D.

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In a notice sent to WPATH membership, alerting them of the McHugh/WSJ hoax, the WPATH newsroom wrote:

Many more responses and blogs relating to this article have been published; however, we thought we would provide you with a link to the response prepared by Mari Brighe: "Clinging to a dangerous past: Dr Paul McHugh's selective reading of transgender medical literature."

Mari gets to the facts in her response, stating: "It is important to remember that the opinions of Dr McHugh fly in the face of currently accepted medical practice and the positions of many major medical associations. The American Medical Association, the American Psychological Association, the American College of Obstetrics and Gynecology, the American Psychiatric Society, the American Public Health Association, and the World Professional Association for Transgender Health have all adopted positions supporting the medical necessity of transition-related care, including hormonal and surgical interventions, as well as expressing support for insurance coverage of these interventions. Despite his authoritative sounding title at a respected medical institution, Dr McHugh's opinions do not represent the views of the mainstream medical establishment, rather they are the erroneous, bigoted beliefs of a scientist who appears far too invested in his own antiquated, disproven theories and his anti-LGBT political position than the current state of medical affairs".

See the full text of Mari's response at

<https://www.transadvocate.com/clinging-to-a-dangerous-past-dr-paul-mchughs-selective-reading-of-transgender-medical-literature>

WPATH is an international multidisciplinary professional Association that promotes evidence-based care, education, research, advocacy, public policy and respect in transgender health. The organization represents the world's leading experts in transgender psychological and medical health care.

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