

PE2104/B: End the pause on prescribing puberty blockers to children in Scotland

Petitioner written submission, 11 September 2024

In 2020 NHS England and NHS Inform commissioned Dr Hilary Cass, a paediatric doctor with only limited experience of treating children with gender dysphoria, to review child gender dysphoria services provided by NHS England.

[This review was completed in 2024](#) and found that there “is not a reliable evidence base upon which to make clinical decisions about use of GnRH analogues” (The Medicines (Gonadotrophin-Releasing Hormone Analogues)(Emergency Prohibition) Order 2024), and this led the then Secretary of State for Health and Social Care, Victoria Atkins, to request a three-month moratorium of the routine provision of puberty blockers for gender dysphoria by NHS England. This was later extended to a total ban on their prescription for the treatment of gender dysphoria by NHS England in under 18s.

In April 2024, NHS Scotland followed suit and paused prescribing puberty blockers to children.

In July 2024, [the Health Secretary, Neil Gray, said that conclusions of the “Cass Review – Implications for Scotland report” would be considered by the Scottish Government](#). This report was compiled by a senior clinical team, commissioned by the Chief Medical Officer for Scotland to look solely at the recommendations of the Cass review.

Our Objection

Many organisations actively involved in providing care to transgender and gender-diverse people have criticised the Cass review, including the World Professional Association for Transgender Health (WPATH), a professional organisation devoted to the understanding and treatment of gender identity and gender dysphoria. [WPATH stated, the “Cass Review relies on selective and inconsistent use of evidence, and its recommendations often do not follow from the data presented in the systematic reviews”](#). An evidence-based [critique published by Yale University notes that “The Cass Review does not follow established standards for evaluating evidence and evidence quality”](#) and that “The Cass Review misinterprets and misrepresents its own data”.

The [British Medical Association \(BMA\) said it “believes it is clinicians, patients, and families who should be at the centre of an evidence-based decision-making process about their health, not politicians”](#). The implication of the BMA’s statement, is that they believe, as do many in the community, that the Cass review, far from being independent, is politically motivated.

The previous [UK Health Secretary was warned that a ban would impact an “extremely vulnerable group” and give rise to an increased risk of self-harm and suicide](#).

[Senior civil servants warned that, without time to engage with experts before implementing the ban, there was a high risk of causing harm to patients.](#)

The then [UK Health Secretary not only ignored these safety warnings but also told officials not to consult with any “specialist \[organisations\] claiming to represent those with \[gender dysphoria\] and their families/carers”.](#)

GnRH analogues are not only prescribed to transgender and gender-diverse people. They were originally developed to treat precocious puberty. This condition occurs when a child's body begins developing secondary sexual characteristics earlier than the typical age range, usually before age 8 in girls and before age 9 in boys. Freedom of information requests have indicated that at no time has the safety of prescribing GnRH analogues to this cohort been discussed. Surely if the lack of evidence on their safety is concerning enough to implement an immediate ban for transgender and gender-diverse people then it should be concerning enough to at least raise questions about their use in the treatment of precocious puberty, unless the motivation behind the ban is nonclinical in nature.

GnRH analogues are not the only medication prescribed that lacks comprehensive studies into their effect on those under 18s. [Prescriptions of antipsychotics to children and teenagers in England doubled between 2000 and 2019, “despite a lack of safety data to support their use in the under 18s.”](#) Yet, unlike GnRH analogues, there has been no campaign to ban their prescription.

Other, subsequent, independent Evidence Checks such as [the recent one commissioned by the New South Wales Government](#) acknowledge the lack of evidence, but found that [the use of puberty suppression is “still safe, effective and reversible”.](#)

Other reviews such as the King's College London review from 2016¹ have noted the “limited number of studies” but found prescribing GnRH analogues “sufficiently safe, and preventive treatment for gender dysphoria in childhood and adolescence” and that “the existing literature supports puberty suppression”.

When taken together, it appears to us that the ban on prescriptions of GnRH analogues to under-18s is not clinically, but ideologically driven, and subsequent evidence has not been taken into account.

We therefore ask that the Scottish Government ask the NHS Greater Glasgow and Clyde and NHS Lothian health boards to consider the advice of WPATH, Yale University, the BMA, organisations that work with transgender and gender-diverse people, and the recent New South Wales Government report, when making the clinical decision about the lives of young people.

In the same way that the criminalisation of abortion in the US, doesn't stop abortions, just stops safe abortions, the criminalisation of GnRH analogues will not stop transgender and gender-diverse people from taking them, it will just stop their use being safely monitored by health-care professionals. Most trans people are aware of

¹ Costa, R., Carmichael, P. and Colizzi, M. (2016). To treat or not to treat: puberty suppression in childhood-onset gender dysphoria. *Nature Reviews Urology*, 13(8), pp.456–462.

how to get hold of hormones and puberty blockers², but the vast majority would prefer to do so safely, with the support and oversight of the NHS.

The community as a whole has lost faith in all politicians and the state. We believe you would like nothing more than for us all to cease to exist. Please prove us wrong.

² Aberdeen Greens back council candidate suggesting trans people hand out advice for 'less dodgy' HTR. Scottish Daily Express. <https://www.scottishdailyexpress.co.uk/news/politics/aberdeen-greens-back-council-candidate-26822475>