

Dear Representative Craven and Members of the House Judiciary Committee,

I am submitting this letter in **strong support of HB 6171** and I urge you to consider supporting this as well. I am an Obstetrician/Gynecologist practicing at Women & Infants Hospital since I began my residency training in 2006. I have a particular focus on LGBTQ health care, and perform surgery for many transgender and gender diverse members of the Rhode Island community. When I perform these surgeries, they are on consenting individuals who understand the implications of the surgery they are choosing.

As an Ob/Gyn I am no stranger to advocating against legislation that interferes with my ability to provide necessary medical care (you have heard and read testimony I have written for many years supportive of the Reproductive Privacy Act and against countless anti-abortion bills). HB 6171, however is different. This bill allows patients to have autonomy over their own bodies, not having surgeries performed on them before they can assent and consent. This bill is necessary to protect a small, vulnerable group of Rhode Islanders.

This bill does **not** impact a physician's ability to provide necessary care. It simply prohibits surgeries that can be safely delayed until the patient is old enough and able to consent to these procedures, including clitoral reductions, vaginoplasties, gonadectomies, and urethral lengthening procedures. This bill would not prevent these procedures if they were required for urgent medical purposes. Body altering surgical decisions must be made by the impacted person, not being forced to grow up knowing these decisions were made for them and their bodies were altered by medical professionals and family members.

Documented risks of these procedures include scarring, incontinence, sterilization, chronic pain and nerve damage, loss of future sexual function, post-traumatic stress disorder, incorrect sex assignment, and heightened risks of anesthesia in early childhood. Complications may require multiple follow-up surgeries, or may need to be redone to account for body changes associated with puberty. Deferring surgical decisions until after age 12 allows time for the individual to consider whether surgery is right for them in the first place and reduces some of these risks. Additionally, many people with variations in their sex characteristics will not ultimately want or need the irreversible surgeries covered by HB 6171, so performing them at a young age increases the odds that an individual will suffer needless harm and distress.

We learn more every day in medicine, and as we evolve we need to change our practices. Boston Children's Hospital recently made the decision to end the practice of performing clitoral reductions and vaginoplasties on young children, following the decision by Lurie Children's Hospital to issue a complete moratorium on intersex surgeries. The American Medical Association Board of Trustees also recommends a delay of all procedures *unless they are necessary to address a life-threatening risk*. Legislation protecting against harmful surgical interventions have been introduced in California, Connecticut and New York as well.

HB 6171 ensures that the patient is able to participate in the doctor/patient relationship and is an active participant in making decisions that affect their body. People whose bodies are different from what society expects should have the same bodily autonomy, dignity, and respect all other Rhode Islanders are afforded. I urge you to support HB 6171.

Sincerely,



Beth Cronin, MD  
Clinical Associate Professor of Obstetrics and Gynecology  
Warren Alpert Medical School of Brown University