

Roberta DiMezza

From: Wheeler, Carol <CAWheeler@Wihri.org>
Sent: Monday, April 12, 2021 4:05 PM
To: House Judiciary Committee
Subject: HB 6171 written testimony

Follow Up Flag: Follow up
Flag Status: Completed

April 12, 2021

I am a pediatric and adolescent gynecologist and reproductive endocrinologist practicing in Rhode Island for over 30 years. The field of pediatric and adolescent gynecology (PAG) is a relatively new area of specialization in the field of obstetrics and gynecology. I have watched the field of PAG grow and mature as our understanding of the management of intersex disorders has increased. Allowing the child/adolescent to participate in decision making about their pelvic anatomy should be the standard of care based on the literature in 2021. Parents need to know that not rushing in to make decisions is in fact the right thing to do.

As a reproductive endocrinologist and fertility specialist, I have seen women in my office as young adults who are unable to lead full reproductive lives due to surgeries performed in the past that now render them infertile. They struggle with the impact those procedures have had on them. The data is now clear that if gender assignment surgery or cosmetic procedures can be delayed until the patient can participate in the decision the individual will ultimately be far better served.

Prohibiting clitoral reduction or genital surgery that has been based on cultural traditions is critical. These can lead to long term effects and challenges with both conception and childbearing as well as significant pain and urinary difficulties. The child/woman needs to have control over what is important to her regarding her genitals.

I see young women in my office requesting labiaplasty because they feel like they are not “perfect” like the ones portrayed in the media. I show them images of diverse and beautiful external female anatomy. They push me to operate and I say “no” unless they truly have pathological findings. I know some of those girls go elsewhere to have surgery and are urged by society and adults to do so. This should not happen. They need to have time to be fully informed to make these decisions and not be rushed to surgery.

I support HB 6171 and goal of patient-centered care and I urge you to support it as well. Allowing each family and patient’s autonomy to make life altering decisions is critical and what this bill aims to do.

I thank you for your time and appreciate your attention to this group of patients whose voices are not always heard.

Sincerely,

Carol Wheeler, M.D.

Professor of Obstetrics and Gynecology (Clinician Educator),

The Warren Alpert Medical School of Brown University
Providence Rhode Island

This e-mail and any files transmitted with it are confidential and intended solely for the use of the individual or entity to whom they are addressed. If you are not the intended recipient, you are hereby notified that any disclosure, copying, distribution or taking of any action in reliance on the information contained in this e-mail is prohibited. If you have received this e-mail in error, please notify sender by reply e-mail and delete this message and any attachment(s) immediately. Thank you for your consideration in this matter.