



Self medication is common in patients who face long delays in accessing NHS services in the UK.

Abstract

- Gender variant patients in the UK can face long delays in accessing specialist gender services and once seen, face further lengthy assessment processes before accessing treatment.
- Bridging prescriptions allow GPs to temporarily prescribe gender affirming hormones while waiting for specialist services.
- In a previous study we have shown that the GPs of 90.5% of patients investigated were unable to prescribe bridging hormones due to lack of willingness, funding, training and education.
- The greatest cause of concern for 64% of 556 patients surveyed, was access to prescriptions for hormones.

Introduction

- It is widely known that many patients turn to unregulated sources of medication in order to start their medical transition due to lack of access to safe and timely medical care.

Methods and Materials

- We conducted a survey of 907 patients with gender dysphoria, who accessed the services of GenderGP.
- We examined the incidence and indications for self-medication in patients seeking help through our service.

Results

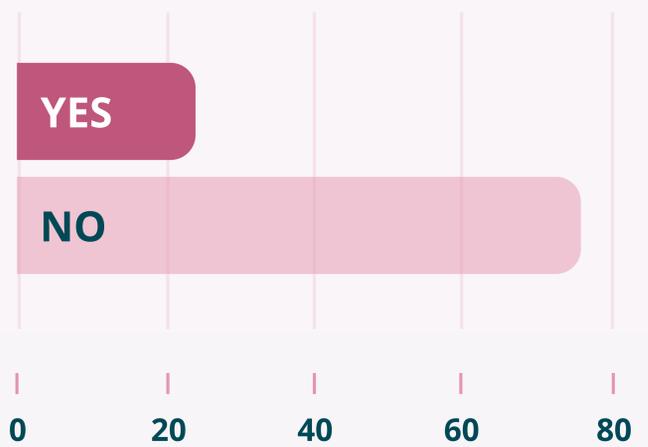
Of the 907 patients, 204 (22.5%) admitted to having self medicated.

- Reasons given for self medication included;
 - Restricted access to NHS services (61%)
 - Convenience (24%)
 - Treatment refused by the Gender Identity Clinics (15%)
- AMAB patients were significantly more likely to self medicate (73.5% vs 26.5%) with 150 accessing oestrogen and only 41 accessing testosterone.
- Other drugs accessed included, finasteride/ dutasteride (42), Spironolactone (45), cyproterone acetate (16) and GnRHs (7)
- No patient had undergone blood monitoring although 14 patients had requested blood monitoring through their GP but had been declined.

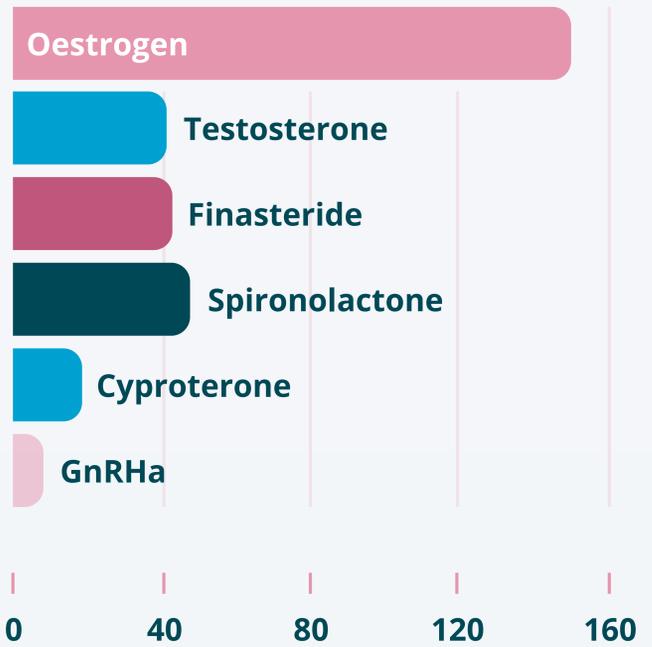
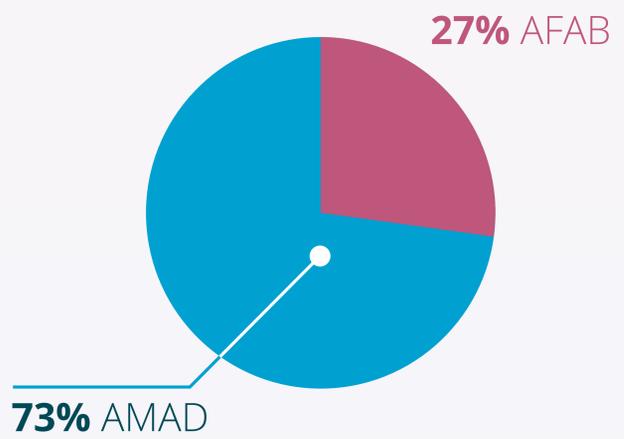
Authors: [HW & MJ Webberley](#)



Incidence of Self-Medication



Gender Assigned at Birth



Conclusion

A significant number of GD patients in the UK (22.5%) self medicate with drugs bought without a prescription from the internet and the majority of these patients are AMAB.

Impaired access to NHS services was the commonest reason given.

In no patient had there been safe monitoring with blood tests despite patients requesting it. This is of particular concern with drugs such as spironolactone and cyproterone.

It is of particular concern that (15%) had gone on to self medicate having been turned down for treatment by the Gender Identity Clinics.

Contacts

GenderGP
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References

The incidence of self-medication in patients accessing GenderGP - a private online gender healthcare service in the UK