

## Shared Care Interim Guidance: Leeds GIS Specialist Recommendation Guidance

### Medications for Gender Dysphoria in Adults:

We have recommended starting your patient on cross sex hormone treatment in the context of gender dysphoria. The patient has been appropriately counselled and provided full written consent to hormone treatment. We will continue to see the patient and review their changes, blood test results, blood pressure and weight. The GP will be asked to prescribe and forward results on to the Gender team consistent with appendix J of the NHSE service specification: [https://www.engage.england.nhs.uk/survey/gender-identity-services-for-adults/user\\_uploads/specialised-gender-dysphoria-service-specifications.pdf](https://www.engage.england.nhs.uk/survey/gender-identity-services-for-adults/user_uploads/specialised-gender-dysphoria-service-specifications.pdf)

Once the hormones are stable the patient will be discharged to the GP.

This guidance is to be used in conjunction with hormone guidance which can be found on the LYPFT Gender Identity Service Website:

<https://www.leedsandyorkpft.nhs.uk/our-services/gender-identity-service/>

### Medications for specialist recommendation:

Items recommended by a specialist offer a valuable alternative/addition to the patients' treatment. These are considered suitable for GP prescribing following specialist recommendation. Dosing will be in line with the BNF/SPC or outlined in the letter from the specialist and some standard/routine monitoring may be required.

This medication is suitable for prescribing in primary care after specialist assessment and recommendation. We have recommended that your patient, who has completed their specialist assessment, is started on the selected medicine and that it is appropriate to prescribe in the context of gender dysphoria. This is a brief prescribing guidance document as significant additional information regarding follow up or prescribing is necessary for primary care clinicians taking prescribing responsibility for this medicine. This will be detailed in the clinical letters regarding each individual patient.



## Hormones:

### Transwomen:

- Transdermal Estradiol Gel: Oestrogel pump pack/Sandrena
- Transdermal Estradiol patch: Estradot/Evorel/Estraderm/Femseven/Progynova
- Transdermal Spray: Lenzetto
- Oral or Sublingual Estradiol: Elleste Solo/Progynova/Zumenon/Bedol
- GnRH agonist: Leuprorelin/Triptorelin/Nase
- Other oral Antiandrogens: Spironolactone/Finasteride/Cyproterone acetate

### Transmen:

- Injectable Testosterone: Sustanon/Testosterone Enanthate/Nebido
- Testosterone Gel: Testogel pump/sachets/ Tostran/Testim

Further information and our full consent forms can be found here:

<https://www.leedsandyorkpft.nhs.uk/our-services/gender-identity-service/>

under 'consent forms for hormone treatment'.

**Indication:** Hormones for gender dysphoria. This is a licensed drug used for an unlicensed indication, this Indication is fully supported by The World Professional Association for Transgender Health (WPATH) and the patient has given informed consent.

**Monitoring:** During the stabilisation period, patients will attend the GP for the following blood tests (usually 3-6 monthly) as advised by the specialist. The results will be required for all hormone appointments at the clinic with the specialist. These can be sent with the patient to the appointment or email them to the gender service at [gid.lypft@nhs.net](mailto:gid.lypft@nhs.net)

**Follow up:** The hormone prescriber will review the patient every 3-6 months and advice on further changes if needed. Once stabilised the patient is discharged to the GP and has blood tests every 6 months for the first year and then annually.

In case of shortages and conversion to alternatives please see additional resources on our website.

## Responsibilities:

### Tertiary care clinician responsibilities:

- Ensure current diagnosis of condition and the treatment options have been discussed and understood by the patient and their carers (where appropriate).
- To assess the suitability of the patient for this treatment.
- To discuss the benefits and side effects of treatment with the patient/carer and where applicable the need for long term monitoring.
- Ensure that use of the treatment has been agreed with and by the patient (and carer where appropriate).
- Checking for allergies, interactions and contra-indications
- Liaise with the patient's General Practitioner (GP)/Primary Care Prescriber regarding prescribing and monitoring of the medicine.
- To advise the GP/Primary Care Prescriber on the dose to be prescribed.
- Being explicit for effectiveness and safety purposes when the medicine should be prescribed by brand.

- Advise when therapy may be reduced and stopped assuming no relapse in patient's condition. Review periods to be agreed.
- Ensure this is also known, understood and agreed with the patient (and where appropriate their carers).
- Responding to issues raised by GP/Primary Care Prescriber and informing the patient (and carers) of any changes to advice shared or agreements made.

### GP responsibilities:

- Checking for allergies, interactions and contra-indications on initiation and when changing treatment
- Prescribing the medicine after receiving request from tertiary care clinician.
- Monitoring the patient's overall health and wellbeing, observing patient for evidence of adverse drug reactions and liaising with tertiary care clinician if necessary. Routine disease monitoring should continue alongside appropriate screening programmes.
- Ensuring advice is sought from the secondary care clinician if there is any significant change in the patient's physical health status that may affect prescribing or appropriateness of the medication.
- Reducing/stopping treatment in line with secondary care clinician's original request.

### Patient/carer responsibilities:

- To be responsible for taking this medication as prescribed.
- To understand the potential for adverse events and report these to the GP.
- To check with the community pharmacist that there are no interactions with this medication, when buying any over the counter medicines or herbal/homoeopathic products.
- To check with dentists or other specialists who may prescribe medicines that there are no interactions with this medication.
- To contact the GP, Specialist or Medicines Information patient helpline if further information or advice is needed about this medication.

### Specialist Contact Information:

Leeds and York Partnership Foundation Trust  
 Gender Identity Service  
 The Newsam Centre Seacroft Hospital York Road Leeds LS14 6WB  
 Tel: 0113 85 56346 Email: [gid.lypft@nhs.net](mailto:gid.lypft@nhs.net)

### Signatures:



**Dr Victoria Millson Brown** MBBS MRCP  
**Consultant Endocrinologist**

Leeds GIS

**Dr Ruth Bond** MBChB BSc MRCP DFFP DRCOG MRCGP  
**GP with Special Interest in Gender Dysphoria**

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