[Your name and address, if including]

[DATE]

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Via US Mail and Email

Dear Dr. Moira Szilagyi and Dr. Sandy Chung,

[Insert your brief story (example: I am a parent of a female child who for two years believed that she was a boy. All of the medical providers, inclusive of our pediatrician, affirmed her gender identity. She came by her belief after a sex education program that said that she could be born in the wrong body, and joining online groups pushing the gender narrative. We ignored all of the doctors and therapists and worked on resolving her depression. We also took her phone. Slowly, she returned to herself and now is well-adjusted young woman with all of her body parts intact and no synthetic hormones in her body. Had we followed the advice of any of our medical providers, we would have an irreversibility harmed young girl, who would truly have a valid reason to be distressed about her body.)]

If the American Academy of Pediatrics’ true mission is to “champion optimal physical, mental and social health and well-being of all infants, children, adolescents and young adults,” I am confounded by its singular treatment for gender confused children and youth, namely social transition (adopting the child’s delusional belief that he or she is the opposite sex) and medical transition (irreversible puberty blockers, cross-sex hormones and surgeries) in lieu of treating the child’s underlying self-loathing or confusion, or first addressing any mental health comorbidities or developmental issues. I am perplexed by its utter rejection of the independent systematic evidence reviews conducted by public health agencies in [Finland](https://segm.org/sites/default/files/Finnish_Guidelines_2020_Minors_Unofficial%2520Translation.pdf), [Sweden](https://segm.org/sites/default/files/Karolinska%20_Policy_Statement_English.pdf), and the [UK](https://cass.independent-review.uk/publications/interim-report/).

The AAP has an opportunity to return to evidence-based medicine, instead of following the unintelligible and unsupported WPATH guidelines. The misnamed “Standards of Care” 8 are filled with statements such as, “…a systematic review regarding outcomes of treatments in adolescents is not possible,” “…the number of studies is low,” “…there are few outcome studies that follow youth into adulthood,” and “At present, no clinical cohort studies have reported on profiles of adolescents who regret their initial decision or detransition after irreversible affirming treatment.” How can the AAP blindly align with WPATH, an advocacy group whose advice even the 9th circuit rejects as standards? Those who developed WPATH’s recommendations include non-medical professionals and not a single independent doctor. Most notably, contributors to the adolescent section includes Susie Green, the CEO of Mermaids, now under investigation for sending breast binders to children against parents’ wishes and dispensing medical advice without a license. Why is a purported prestigious society like the AAP following WPATH, an entity that utilizes the Delphi method — the “[lowest level of evidence for making causal inferences and are thus subordinate to meta-analysis, intervention studies and correlation studies](https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7536299/pdf/fpubh-08-00457.pdf).” — to obtain consensus and that has adopted the concept of “eunuch” — a gender identity centered around surgical removal of male genitals — as suitable for minors? This is the antithesis of the AAP’s mission.

The “Dutch model” is based on a mere 55 children, ignored the death of the one child from surgical complications, and has never been repeated. This unconfirmed model is the foundation for all childhood, adolescent, and young adult gender interventions ascribed to by WPATH and now the AAP.

Five pediatricians submitted [Resolution #27](https://genspect.org/wp-content/uploads/AAP_Resolution_27_2022.pdf) to implore the AAP to conduct a comprehensive, systematic review of the available evidence to update the AAP’s 2018 position on care. AAP leadership barred its members from commenting on Resolution #27, based upon an unconvincing excuse that a new rule required a sponsor for the Resolution before it would be circulated to the membership. Although I am not surprised no sponsor was obtained given the swift vitriol one receives when questioning gender treatments, I was nonetheless disappointed. It is a pediatrician’s edict to protect children and provide only evidence-based, beneficial treatments. Despite the AAP’s own members’ displeasure in the suppressing of discourse, the AAP continues to ignore the breadth of scientific literature that outlines the lack of supportive data for these treatments.

I entreat the AAP to conduct an independent systematic review of the science. If the AAP continues to promote harms on children and young adults, it will bear the indelible mark of a society that could have prevented a cataclysmic medical scandal that victimized children and youth. The AAP can change course, rather than leading the sterilization of a generation, as well as contributing to what lies ahead — a marked increase in suicides as these children mature and suffer horrific regret.

I agree wholeheartedly with the AAP’s request that Attorney General Merrick Garland investigate the campaign of “toxic misinformation” about the actual science and harms to children with the affirmative care. I relish an independent review of whether hospitals and clinics have been obtaining the proper informed consent of children before they irreversibly harm them. Any investigation into violation of medical protocols will be extremely helpful for the prosecution in medical malpractice cases.

Respectfully,

NAME

[Please include party affiliation and state.]

cc: Charliejacobs@protonmail.com