

European Association of Urology – press release

**[First accurate data showing that male to female transgender surgery can lead to a better life](#)**

**Embargo until: Sat 17th March at 00.01 CET (Copenhagen)**

Scientists have developed a transgender-specific questionnaire, which confirms for the first time that gender surgery significantly improves quality of life for the majority of patients. The study shows that 80% of male-to-female patients perceived themselves as women post-surgery. However, the quality of life of transgender individuals is still significantly lower than the general population.

Many transgender individuals request gender reassignment surgery, but until now there only existed information on general aspects of health related quality of life (QoL) and non-validated questionnaires about improvement of QoL. A team at the University hospital in Essen, Germany, led by Dr. Jochen Hess, followed 156 patients for a median of more than 6 years after surgery. They developed and validated the new Essen Transgender Quality of Life Inventory, which is the first methodology to specifically consider transgender QoL. They found that there was a high overall level of satisfaction with the outcomes of surgery. When comparing the QoL of the last four weeks with the QoL during the time of publicly identifying as transgendered there was a highly significant increase on all subscales of the ETL as well as for the global score indicating a large improvement of QoL in the course of the transitioning process.

*Doctor Hess commented*

*“The good news is that we found that around three-quarters of patients showed a better quality of life after surgery. 80% perceived themselves to be women, and another 16% felt that they were ‘rather female’. 3 women in 4 were able to have orgasms after reassignment surgery.*

*It’s very important that we have good data on Quality of Life in transgender people. They generally suffer from a worse QoL than non-transgender population, with higher rates of stress and mental illness, so it’s good that surgery can change this, but also that we can now show that it has a positive effect. Until now we have been using general methods to understand quality of life in transgender individuals, but this new method means that we can address well-being in greater depth.”*

Recent data<sup>1</sup> estimates that 1.4 million adults in the USA identify as transgender, which is about 0.6% of the population. Comparable European figures are not available, but there is wide variation between reported prevalence in individual European countries. Transgender individuals have seen greater visibility in recent years due to the openness of personalities such as Caitlin Jenner, Chelsea Manning, and Andreja Pejic.

The team notes that there are limitations to the study: there was a high drop-out rate, and the results are from a single centre (NOTE: please see information in ‘Notes for Editors’, which contains more information on the drop-out rate).

*“Nevertheless, we now have the first specific validated tool for measuring QoL in transgender patients, we hope that this means that we can go forward to gather better information to help us improve treatment,” said Dr. Hess.*

Commenting, Prof Professor Piet Hoebeke (Ghent University Hospital, Belgium) said:

*“As patients develop a better understanding and higher acceptance of transgender surgery, more will seek gender confirming surgery. Despite this observation many doctors are still not convinced that this is a medical condition for which surgery can be offered as a valuable treatment. We need studies like this one to convince the medical world that these patients can get a better QOL with treatment.”*

Professor Jens Sønksen (University of Copenhagen) commented

*“This study suffered from a high drop-out rate, which needs to be considered alongside the main data. Nevertheless, this is a large important study, one of the largest clinical transsexual surveys ever attempted, and the fact that has been performed using a specific validated questionnaire is significant. This is probably the best view of quality of life in after sex-reassignment that we have.”*

Neither Professor Hoebeke nor Professor Sønksen were involved in this work, these are independent comments.

This study was funded by institutional financial means.

1 <https://www.nytimes.com/2016/07/01/health/transgender-population.html>

**ENDS**

### **Notes for editors**

**PLEASE MENTION THE EUROPEAN ASSOCIATION OF UROLOGY CONGRESS IN ANY STORY RESULTING FROM THIS PRESS RELEASE**

The 33rd European Association of Urology conference takes place in Copenhagen from 16<sup>th</sup> to 20<sup>th</sup> March. This is the largest and most important urology congress in Europe, with up to 14,000 expected to attend. Conference website <http://eau18.uroweb.org/>

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**Abstract: Satisfaction, quality of life and psychosocial resources of male to female transgender after gender reassignment surgery**

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### **Introduction & Objectives**

While many transgender individuals find comfort with their gender identity, role and expression without surgery, for many others gender reassignment surgery (GRS) is essential and medically necessary to alleviate their gender dysphoria. We report on our results on satisfaction, quality of life (QoL) and psychosocial resources after surgery.

## Materials & Methods

Of a total number of 610 male to female transgender who underwent GRS at the Department of Urology, University Hospital Essen between 1995 and 2015 a final sample of 156 individuals with a mean age of 49.45 years (SD=11.05, range: 22-77 years) could be surveyed. The mean time since GRS was 6.61 years (SD=4.99 years, range: 6 months-21.25 years). Satisfaction was queried with open questions regarding aspects of general, optical and functional contentedness. Psychosocial resources and QoL were assessed on the basis of standardised questionnaires (ERI, SOC-13, F-SozU, SF-12, SCL-27). Furthermore we validated the Essen Transgender Quality of Life Inventory (ETLI), a new inventory for trans\*-specific QoL. Questions of ERI and ETLI referred to two points in time of the same individual allowing for assessment of intrapersonal dynamics.

## Results

In total 71% and 65.3% of the respondents indicated to be (very) satisfied with the optical and functional results respectively. In total, 76.2% affirmed the ability to have orgasms. Since the GRS there was a (strong) enhancement of general life satisfaction in 75% and of satisfaction with the outer appearance as a woman in 67.1%. In total 80.1% perceived themselves as women, while 16% perceived themselves as rather female. There was a significant improvement of the ERI global resource score ( $p<0.001$ ) within the individual transition process. However compared to a non-transgender control group ERI global resources score ( $p<0.001$ ) and physical ( $p=0.12$ ) and mental ( $p<0.001$ ) general health related QoL were still lower in our transgender cohort. Trans\*-specific QoL improved in all subscales significantly (each  $p<0.001$ ) within the individual transition process.

## Conclusions

We could detect a distinct improvement of general and trans\*-specific QoL and psychosocial resources in our transgender cohort within transition process. However transgender individuals have a lower QoL and have less of at least some psychosocial resources compared to non-transgender individuals.

Note: Here is a summary explaining which patients dropped out of the study.

