



STATS FOR
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High drop-out rates mean reported detransition rates are misleading.

An ethics-focused meta-study of psychosocial outcomes of “gender reassignment” [1] found that 20-60% of participants were lost to follow up. Remaining research participants were more likely to report satisfaction with interventions, so reported rates of regret/desistance/detransition in such studies may be highly misleading.

Box 3. Representative examples of “lost to follow-up” rates in gender-reassignment outcome studies

- Smith et al. report that sex reassignment is effective, based on a study of 162 adults who had undergone SRS.¹³ They were able to obtain follow-up data from only 126 (78%) of subjects because a significant number were “untraceable” or had moved abroad.
- De Cuypere et al. report that sex reassignment surgery is an effective treatment for transsexuals.¹² Of 107 patients who had undergone SRS between 1986 and 2001, 30 (28%) could not be contacted and 15 (14%) refused to participate.
- Johannson et al. reported good outcomes for SRS.¹³ Of 60 patients who had undergone SRS, 42 (70%) agreed to participate in the follow up research. Of the non-participants, 1 had died of complications of SRS, 8 could not be contacted and 9 refused to participate.
- Salvador et al. reported that SRS has a positive effect on psychosocial functioning.¹⁶ Only 55 of the 69 patients (80%) could be contacted as 17 were lost to follow-up
- Van de Grift et al. reported 94–96% of patients are satisfied with SRS and have good quality of life.¹⁷ A total of 546 patients with Gender Dysphoria who had applied for SRS at clinics in Amsterdam, Hamburg and Ghent were contacted to complete an online survey. Only 201 (37%) responded and completed the survey.

REFERENCES

[1] D'Angelo R. Psychiatry's ethical involvement in gender-affirming care. *Australasian Psychiatry*. 2018 Oct;26(5):460-463. doi: 10.1177/1039856218775216. Epub 2018 May 21. PMID: 29783857.