

Estrogen/Testosterone-Blocker Consent Template

Estrogen and testosterone-blockers are used to reduce testosterone-related features and induce estrogen-related features in order to help you to feel more at ease in your body.

Informed consent is used to make sure you know what to expect from gender-affirming hormone therapy including physical and emotional changes, side effects and potential risks. The full medical effects and safety are not fully known and some potential risks are serious and possibly fatal. These risks must be weighed against the benefits that gender-affirming hormone therapy can have on your health and quality of life. Benefits may include increased comfort in your body, decreased discomfort related to gender, improved mental health and stability in work, school and relationships. Each person responds differently to gender-affirming hormone therapy and the amount of change varies from person to person.

Estrogen is available in several forms. Most people use pills due to lower cost but transdermal forms may lower the cardiovascular risks associated with estrogen.

Effects and expected time course of estrogen-based hormones

Changes in the body may take several months to become noticeable and usually take up to 3 to 5 years to be complete or stabilize.

Changes that are PERMANENT and will not go away completely, even if you decide to stop gender-affirming hormone therapy:

- Breast growth and development
- External gonads will get smaller and softer
- External gonads will produce less sperm, and you may become infertile (unable to get someone pregnant); how long this takes to happen and become permanent varies greatly from person to person



Changes that are NOT PERMANENT and will likely reverse if gender-affirming hormone therapy is stopped:

- Loss of muscle mass and decreased strength, particularly in the upper body
- Weight gain. If you gain weight, this will tend to happen in the buttocks, hips and thighs, rather than the abdomen and mid-section.
- Skin may become softer and acne may decrease
- Facial and body hair will get softer and lighter and grow more slowly; usually, this effect is not sufficient, and people may choose to have other treatments (electrolysis or laser therapy) to remove unwanted hair
- Hair loss of the scalp may slow down or stop, but hair will generally not regrow
- Reduced sex drive
- Decreased strength of physical arousal / hardening or stiffening of erectile tissue. Ejaculation will become thinner and watery and there will be less of it.
- Changes in mood or thinking may occur; you may find that you have increased emotional reactions to things, however most people find that their mental health improves after starting gender-affirming hormone therapy. The effects of hormones on the brain are not fully understood.

Gender-affirming hormone therapy will not change the bone structure of the face or body; your Adam's apple will not shrink; the pitch of your voice will not automatically change. If necessary, other treatments are available to help with these things.

Effect	Expected Onset ^a	Expected Maximum Effect ^a
Body fat redistribution	3-6 months	2-3 years
Breast growth	3-6 months	1-2 years
Decreased libido	1-3 months	3-6 months
Decreased muscle mass/strength	3-6 months	1-2 years ^b
Decreased sperm production	Unknown	> 3 years



Decreased spontaneous erections	1-3 months	3-6 months
Decreased testicular volume	3-6 months	2-3 years
Scalp hair loss stops, no regrowth	1-3 months	Variable
Softening of skin/decreased oiliness	3-6 months	Unknown
Thinned/slowed growth of body/facial hair	6-12 months	> 3 years ^c

- A. These are the average expected onset and maximum effect timelines, however, each ultimately varies for each individual.
- B. Significantly depends on amount of exercise
- C. Complete removal of unwanted facial and body hair requires electrolysis, laser treatment, or both.

Adapted from: Hembree et al. 2017, The Endocrine Treatment of Gender Dysphoric/ Gender Incongruent Persons: An Endocrine Society Guideline.

Potential Risk on Testosterone-Based GAHT

Potential Risk	Risk Level
Increased risk of blood clots, pulmonary embolism (blood clot in the lung), stroke or heart attack Gall stones	Likely increased risk
Changes to cholesterol which may increase risk for pancreatitis, heart attack or stroke Liver inflammation Nausea Headaches	Possible increased risk



Diabetes
Heart and circulation problems
(cardiovascular disease)
Changes to kidney function (if using spironolactone)
Increased potassium which can lead to heart arrhythmias (irregular heart beat) if using spironolactone
Increased blood pressure
Breast cancer
Increased prolactin and possibility of benign pituitary tumours

Possible increased risk if you have additional risk factors

Risks for some of these conditions may be affected by:

- Pre-existing physical or mental health conditions
- Family history of physical or mental health conditions
- Cigarette smoking or other substance use
- Nutrition, exercise, stress

_____ (name of care provider) has discussed with me the nature and purpose of gender-affirming hormone therapy; the benefits and risks, including the possibility that gender-affirming hormone therapy may not accomplish the changes I want; the possible or likely consequences of gender-affirming hormone therapy; and other alternative diagnostic or treatment options.

- I have read and understand the above information regarding hormone therapy, and accept the risks involved
- I have had enough opportunity to discuss my health, goals and treatment options with my care provider, and all of my questions have been answered to my satisfaction
- I believe I have adequate knowledge on which to base informed consent to receive hormone therapy
- I authorize and give my informed consent to receive hormone therapy

Patient signature	Provider signature
Date	

