



Oifig an Phríomhoifigigh Oibrioichtaí
Feidhmeannacht na Seirbhísí Sláinte
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12th May 2022

Mr. David Cullinane TD
Dáil Eireann
Leinster House
Kildare Street
Dublin 2

By email to: david.cullinane@oireachtas.ie

Ref: PQ 20034/22: To ask the Minister for Health the steps that he will take to develop dedicated and resourced clinical pathways for healthcare needs of intersex persons in Ireland; if he will develop a strategy in this regard through engagement with intersex persons and representative organisations; and if he will make a statement on the matter

Ref: PQ 20035/22

To ask the Minister for Health his plans to expand awareness and supports for intersex persons; the steps that he has taken since becoming Minister; his plans for the future; and if he will make a statement on the matter

Dear Deputy Cullinane,

The Health Service Executive (HSE) has been requested to reply directly to you in the context of the above related Parliamentary Questions which you submitted to the Minister for response.

The term intersex is used differently by different people. In clinical practice, it was a term previously used to describe what are now termed disorders or differences of sexual development (DSD). DSD covers a wide range of clinical conditions with a wide range of needs, all of which are very different to each other. Someone with androgen insensitivity syndrome has very different needs to congenital adrenal hyperplasia for example.

People with DSD, when diagnosed, will be referred to their local Endocrinology Department. At present, most Endocrinology Departments around the country see people with DSDs on a regular basis.

For every DSD there will be specific needs. Some will be associated with intellectual disability that require multidisciplinary support, some with mental health issues that require liaison psychiatry support and some with complications that require specific specialist medical or surgical support. The needs vary significantly between different DSDs and so the concept of a single DSD service is unlikely to be feasible. At present, most people with DSDs are managed by their local Endocrinology Outpatient Department with input from other clinical services as needed. If someone with a diagnosis of DSD needs clinical support, then they should be directed to their Endocrinologist or local Endocrinology Department.

Expanding awareness and supports for intersex persons depends on the group identified. It should be noted that for many of these conditions there are international societies or groups that offer information and support for each specific group. The Endocrine Society website is a good starting point for people seeking clinical resources and advice. The person themselves can talk to their Endocrinologist about support groups in their area or region specific to their DSD or intersex condition.

I trust that this information is of assistance to you.

Yours sincerely,


Anne O'Connor
Chief Operations Officer