

Mairéad Farrell  
Dail Eireann  
Leinster House  
Kildare Street  
Dublin 2

7<sup>th</sup> May 2025

**REF PQ: 22263/25**

Dear Ms Farrell,

We were asked to comment on a Parliamentary Question directed to the Minister for Health on the estimated number of staff hours used for initial assessments at the National Gender Service.

Provision of any clinical intervention (including gender affirming hormone therapy and surgical intervention) is based on a fundamental clinical principle that to recommend any clinical intervention the apparent benefits should exceed any apparent risks.

The operational model of care at the National Gender Service is based on a comprehensive multidisciplinary assessment that takes into account all aspects of a person's health and wellbeing over their lifetime, rather than focusing only on gender and gender dysphoria. This assessment results in a formulation of risk and benefit that informs a recommendation on clinical interventions such as hormone therapy or surgery. An outline of the assessment process is available on our website [www.nationalgenderserviceireland.com](http://www.nationalgenderserviceireland.com)

While gender is one important aspect of the risk/benefit assessment, we also explore non-gender aspects like social health and occupational function. This is because the most common complications of medical transition are a decline in social function, a decline in general wellbeing, and a deterioration in mental health. To reduce the risk of these complications, we must understand a person as a whole person in a social context.

We do not recommend prescribing gender affirming hormone therapy in the absence of a comprehensive holistic multidisciplinary assessment, or if after such an assessment, the apparent risks exceed the apparent benefits.

We don't measure or record the length of time or staff hours used for initial assessments. The assessment process including the initial assessment which are undertaken by staff, and plan for these to last for up to three hours. The reports are then written and brought to the multidisciplinary team meeting for discussion. The initial assessment and compiling of the reports would minimally take a day and a half to complete. However, on a case-by-case basis and for the benefit of understanding the patient, initial assessments can sometimes need to be completed over several meetings, such as two or three which in turn increases the number of staff hours.

Yours Sincerely,

Dr Yagoub Gader,

*Consultant Endocrinologist, St Columcilles Hospital Loughlinstown*