

CPGs for Gender Related Health Collaboration Café

Client Situation Assessment

Gabriel Contreras, a 31-year-old transgender male, visits the clinic to discuss alternatives for starting hormone therapy as part of his gender-affirming care. He has been living in keeping with his male gender identification for the past five years and is now ready to begin hormone therapy to enhance the development of masculine physical characteristics. Gabriel is in good health overall. His physical examination results are within normal ranges, with steady vital signs and no significant abnormalities. He has no significant medical history, uses no prescription or over-the-counter medications, and has no known drug sensitivities. When considering treatment options, Gabriel displays a preference for a topical testosterone form over injections or other methods of delivery. In terms of lifestyle, he says he never smokes and only drinks alcohol once or twice a month.

Clinical Practice Guideline Assessment

The World Professional Association for Transgender Health (WPATH) Standards of Care, Version 8, recognize testosterone therapy as the primary medical treatment for transgender men seeking masculinization (Coleman et al., 2022). These guidelines promote an individual approach to hormone therapy that takes into account the patient's goals, preferences, and health risks. Transdermal testosterone, available in gels, creams, or patches, is a suitable and successful alternative for persons like Gabriel who prefer topical therapy when no contraindications present (Majumder, 2022). Therapy usually starts with a lower dose and is gradually increased, with the goal of producing testosterone levels within the normal male physiological range (320-1000