



133 Molesworth Street
PO Box 5013
Wellington 6140
New Zealand
T+64 4 496 2000

21 April 2023

Daniel Richards

By email: fyi-request-22237-bdd7648e@requests.fyi.org.nz
Ref: H2023022494

Tēnā koe Daniel

Response to your request for official information

Thank you for your request under the Official Information Act 1982 (the Act) to Manatū Hauora (the Ministry of Health) on 24 March 2023 for information regarding transgender health advice. You requested:

“...all communications in relation to the Ministry of Health decision to remove the transgender health advice from the Ministry of Health website.”

Manatū Hauora has identified four documents in scope of your request which are itemised in Appendix 1 of this letter and copies of the documents are enclosed. Where information is withheld under section 9 of the Act, I have considered the countervailing public interest in releasing information and consider that it does not outweigh the need to withhold at this time.

I trust this information fulfils your request. Under section 28(3) of the Act, you have the right to ask the Ombudsman to review any decisions made under this request. The Ombudsman may be contacted by email at: info@ombudsman.parliament.nz or by calling 0800 802 602.

Please note that this response, with your personal details removed, may be published on the Manatū Hauora website at: www.health.govt.nz/about-ministry/information-releases/responses-official-information-act-requests.

Nāku noa, nā



Dr Joe Bourne
Chief Medical Officer
Manatū Hauora – Ministry of Health

Appendix 1: List of documents for release

#	Date	Document details	Decision on release
1	10 October 2022	H2022012382 Response	Some information withheld under section 9(2)(a) of the Act, to protect the privacy of natural persons. Some information deemed out of scope of your request.
2	13 October 2022	H2022013005 Response	Some information withheld under section 9(2)(a) of the Act.
3	19 December 2022	H2022014878 Response	Some information withheld under the following sections of the Act: <ul style="list-style-type: none">• section 9(2)(a);• section 9(2)(g)(i) to maintain the effective conduct of public affairs through the free and frank expression of opinions by or between or to Ministers and officers and employees of any public service agency. Some information deemed out of scope of your request.
4	6 – 10 March 2023	Email: Media enquiry Puberty blockers evidence brief 6 March 2023	Some information withheld under section 9(2)(a) of the Act.



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10 October 2022

s 9(2)(a)

By email: s 9(2)(a)
Ref: H2022012382

Tēnā koe s 9(2)(a)

Response to your request for official information

Thank you for your request under the Official Information Act 1982 (the Act) to Manatū Hauora (the Ministry of Health) on 10 September 2022 regarding puberty blockers. Each part of your request is responded to below.

all communications, policy documents and advice regarding the updates to the webpage and to similar webpages

Seven email chains have been identified for release within the scope of your request. These are itemised in Appendix 1 to this letter, which outlines the grounds under which I have decided to withhold information. Where information is withheld under section 9 of the Act, I have considered the countervailing public interest in release in making this decision and consider that it does not outweigh the need to withhold at this time. By way of context, some of these emails relate to the drafting of correspondence on the use of puberty blockers in young people. Information deemed out of scope of your request has been excluded.

the terms of reference for the evidence brief, timeframes, and the composition of the evidence brief team

The terms of reference, timeframe, and team composition for the evidence brief have not been formally established. However, some information is available in the correspondence attached.

any drafts of updates or evidence brief

Drafts of updates to the webpage can be found in the correspondence attached. No drafts of the evidence brief currently exist, therefore this part of your request is refused under section 18(e) of the Act.

Under section 28(3) of the Act, you have the right to ask the Ombudsman to review any decisions made under this request. The Ombudsman may be contacted by email at: info@ombudsman.parliament.nz or by calling 0800 802 602.

Please note that this response, with your personal details removed, may be published on the Manatū Hauorā website at: www.health.govt.nz/about-ministry/information-releases/responses-official-information-act-requests.

Nāku noa, nā



Dr Joe Bourne
Chief Medical Officer
Manatū Hau Ora – Ministry of Health

RELEASED UNDER THE OFFICIAL INFORMATION ACT 1982

Appendix 1: List of documents for release

#	Date	Document details	Decision on release
1	18 August – 5 September 2022	Email correspondence	Some information withheld under section 9(2)(a) of the Act, to protect the privacy of natural persons. Some information has been identified as out of scope of your request and removed accordingly.
2	22 August 2022		Some information withheld under section 9(2)(a) of the Act.
3			
4	23 August – 5 September 2022		
5	5-6 September 2022		Some information withheld under section 9(2)(a) of the Act.
6	7-12 September 2022		Some information identified as out of scope of your request and removed accordingly.
7	13-16 September 2022		Some information withheld under section 9(2)(a) of the Act.

From: Timothy Jelleyman <Timothy.Jelleyman@health.govt.nz>
Sent: Wednesday, 14 September 2022 12:51 pm
To: Jenna Osborne-Taylor; Sayali Pendharkar
Cc: Office of the Chief Clinical Officers; Sarah Upston
Subject: RE: Review of lines on puberty blockers on MoH website

Thanks Jenna.

Great point about the intended audience – public-facing.

We should probably then look at reducing the clinical detail in the text here in that case.

I have discussed with Joe Bourne, CMO, here in OCCO and have agreed the following plan:

- Short term - Webpage lines adjustment – in particular to remove the statement that these are ‘safe and reversible’ while further due diligence on evidence proceeds.
- Medium term – evidence work by Evidence, Research and Innovation - this is the stage at which wider engagement with any changes will add value, and we have been offered some names of experts, whom could be consulted at this stage

Kia ora Sayali,

I suggest for this short-term lines adjustment we go for a reduced statement on the site while we wait for the evidence process and subsequent engagement to happen. If we do that, then we can defer the input of Medsafe team at this point.

e.g.

Puberty blockers

For young people where these feelings continue into puberty or emerge during puberty, particularly if associated with distress, it is important to see a health professional. Puberty blockers are a medication that can be used to halt the progress of potentially unwanted puberty-related physical changes.

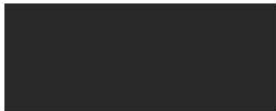
Blockers are sometimes used, with the guidance of a clinician who specialises in their use, from early puberty through to later adolescence to allow time to fully explore gender health options.

Service providers that can help access and provide more information about blockers include:

- paediatric services
 - youth health services
 - endocrinologists
 - primary health care teams.
-

Dr Tim Jelleyman
Chief Clinical Advisor, Child and Youth Health
Office of Chief Clinical Officers
S9(2)(a)

timothy.jelleyman@health.govt.nz
Manatū Hauora, 133 Molesworth Street
Thorndon, Wellington 6011
Auckland based. Regular MoH days: Mon – Wed;
Clinical days at Waitemāta : Thurs, Fri.
Text me if your email needs priority attention.



From: Jenna Osborne-Taylor <Jenna.Osborne-Taylor@health.govt.nz>
Sent: Wednesday, 14 September 2022 10:48 am
To: Timothy Jelleyman <Timothy.Jelleyman@health.govt.nz>; Sayali Pendharkar-Orpe <Sayali.Pendharkar@health.govt.nz>
Cc: Office of the Chief Clinical Officers <occo@health.govt.nz>
Subject: RE: Review of lines on puberty blockers on MoH website

Thanks Tim.

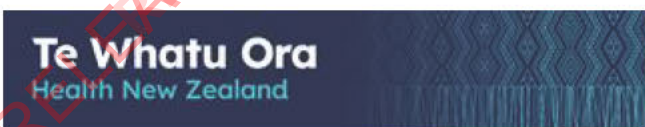
We are mindful that this is a public-facing page and therefore shouldn't contain clinical detail as such, but should refer off to relevant pages that contain more clinical detail if possible. Equally, we feel it's important that the clinicians are heard and we're all on the same page about the intent and the level of detail required.

Tricky priorities to balance! Over to you.

Ngā mihi nui

Jenna Osborne-Taylor (she/her/ia)
Senior Advisor | Kaitohutohu Matua
Primary Care
Primary Health Care System Improvement and Innovation / Commissioning

īmēra: jenna.osborne-taylor@health.govt.nz
133 Molesworth Street, Thorndon, Wellington | PO Box 5013, Wellington 6140



Te Whatu Ora – Health New Zealand
TeWhatuOra.govt.nz

I work remotely - please include virtual options for hui/meetings. My standard hours of work are 7.00am to 3.00pm.

From: Timothy Jelleyman <Timothy.Jelleyman@health.govt.nz>
Sent: Wednesday, 14 September 2022 8:28 am

To: Jenna Osborne-Taylor <Jenna.Osborne-Taylor@health.govt.nz>; Sayali Pendharkar-Orpe <Sayali.Pendharkar@health.govt.nz>
Cc: Office of the Chief Clinical Officers <occo@health.govt.nz>
Subject: RE: Review of lines on puberty blockers on MoH website

Kia ora Jenna,

Thank you for your further consideration of this mahi. Through paediatric networks I personally know **S9(2)(a)** and **S9(2)(a)**. They would each bring sound advice to this discussion and from a position of experience.

Regarding process, I will first discuss with Anne Stewart (manager OCCO) and Joe Bourne (CMO) before progressing the wider discussions.

Ngā mihi
Tim

Dr Tim Jelleyman
Chief Clinical Advisor, Child and Youth Health
Office of Chief Clinical Officers
S9(2)(a)
timothy.jelleyman@health.govt.nz
Manatū Hauora, 133 Molesworth Street
Thorndon, Wellington 6011
Auckland based. Regular MoH days: Mon – Wed;
Clinical days at Waitemāta : Thurs, Fri.
Text me if your email needs priority attention.



From: Jenna Osborne-Taylor <Jenna.Osborne-Taylor@health.govt.nz>
Sent: Wednesday, 14 September 2022 7:25 am
To: Timothy Jelleyman <Timothy.Jelleyman@health.govt.nz>; Sayali Pendharkar-Orpe <Sayali.Pendharkar@health.govt.nz>
Cc: Office of the Chief Clinical Officers <occo@health.govt.nz>
Subject: RE: Review of lines on puberty blockers on MoH website

Mōrena Tim

My colleague at PATHA has requested that – if at all possible – a clinician who works in the field of gender-affirming care (specifically with young people) be involved in the re writing of this page. We have no objections to this request, however we are keen to get the wording updated as quickly as possible while accommodating this.

If you can delay working on this for another 10 days or so, **S9(2)(a)** (a paediatrician at Counties Manukau District) has been put forward as the best person to work with. Her email is: **S9(2)(a)**. If you need to progress more urgently, than the best person is **S9(2)(a)**'s clinical lead, **S9(2)(a)**.

Additionally, several people from PATHA are attending WPATH in Montreal next week and would be very valuable when reviewing the evidence base due to both their clinical experience, and their involvement in international conversations on the matter. Their concern is that there are some scientific papers out there that aren't done well and this might not be immediately apparent to someone who isn't working in the field.

Thanks so much for your consideration, and if you'd like me to organise a hui to allow everyone to meet I'm very happy to do so.

Ngā mihi nui

Jenna Osborne-Taylor (she/her/ia)

Senior Advisor | Kaitohutohu Matua

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Īmēra: jenna.osborne-taylor@health.govt.nz

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Te Whatu Ora – Health New Zealand

TeWhatuOra.govt.nz

I work remotely - please include virtual options for hui/meetings. My standard hours of work are 7.00am to 3.00pm.

From: Timothy Jelleyman <Timothy.Jelleyman@health.govt.nz>

Sent: Tuesday, 13 September 2022 1:53 pm

To: Sayali Pendharkar-Orpe <Sayali.Pendharkar@health.govt.nz>; Jenna Osborne-Taylor <Jenna.Osborne-Taylor@health.govt.nz>

Cc: Office of the Chief Clinical Officers <occo@health.govt.nz>; Sarah Upston <Sarah.Upston@health.govt.nz>

Subject: RE: Review of lines on puberty blockers on MoH website

Yes please.

Do you have a contact?

Dr Tim Jelleyman

Chief Clinical Advisor, Child and Youth Health

Office of Chief Clinical Officers

S9(2)(a)

timothy.jelleyman@health.govt.nz

Manatū Hauora, 133 Molesworth Street

Thorndon, Wellington 6011

Auckland based. Regular MoH days: Mon – Wed;

Clinical days at Waitemāta: Thurs, Fri.

Text me if your email needs priority attention.



From: Sayali Pendharkar-Orpe <Sayali.Pendharkar@health.govt.nz>

Sent: Tuesday, 13 September 2022 1:48 pm

To: Timothy Jelleyman <Timothy.Jelleyman@health.govt.nz>; Jenna Osborne-Taylor <Jenna.Osborne-Taylor@health.govt.nz>

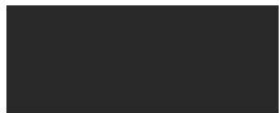
Cc: Office of the Chief Clinical Officers <occo@health.govt.nz>; Sarah Upston <Sarah.Upston@health.govt.nz>
Subject: RE: Review of lines on puberty blockers on MoH website

Thanks, all. I wonder Tim whether it would be good to have Medsafe look at the revised content.

Ngā mihi nui

Sayali

Dr Sayali Pendharkar, PhD (she/her)
Deputy Chief Science Advisor
Office of the Chief Science Advisor
Evidence, Research and Innovation
Phone: S9(2)(a) [REDACTED]
Email: sayali.pendharkar@health.govt.nz
Manatū Hauora, 133 Molesworth Street
Thorndon, Wellington 6011



From: Timothy Jelleyman <Timothy.Jelleyman@health.govt.nz>
Sent: Tuesday, 13 September 2022 12:05 pm
To: Jenna Osborne-Taylor <Jenna.Osborne-Taylor@health.govt.nz>
Cc: Office of the Chief Clinical Officers <occo@health.govt.nz>; Sarah Upston <Sarah.Upston@health.govt.nz>; Sayali Pendharkar-Orpe <Sayali.Pendharkar@health.govt.nz>
Subject: RE: Review of lines on puberty blockers on MoH website

Thank you Jenna for getting in touch, and your email is very timely. I have just been working with Sayali – Science Advisor from Evidence, Research and Innovation (Manatū Hauora) – on some rewording. ERI will lead the evidence brief referred to, planned to complete over summer months. A subsequent systematic review is also being proposed (but not confirmed/funded yet, so not referred to in our correspondence). I would be grateful for your team’s eye over this before we get this to web people. Getting this to web team soon would be great so we can address the immediate concern with more due diligence to follow. (There is a broader question about where this public facing information sits in the new reformed health system, but at this point of time it is right that we qualify the statement that is currently causing some appropriate concern.)

Ngā mihi
Tim.

[Transgender New Zealanders: Children and young people | Ministry of Health NZ](#)

Proposed wording adjustment:

Puberty blockers

For young people where these feelings continue into puberty or emerge during puberty, particularly if associated with distress, it is important to see a health professional. Puberty blockers are a medication that can be used to halt the progress of potentially unwanted puberty-related physical changes. of an unwanted puberty.

Blockers are a safe and fully reversible medicine that may be used from early puberty through to later adolescence to help ease distress and allow time to fully explore gender health options. While this is not an exhaustive list of medications that may be prescribed (off-label) as puberty blockers, some that are commonly prescribed for adolescents (aged less than 18 years) are:

- Leuprorelin
- Goserelin

It is important to note that any off-label prescription remains at the discretion of the managing clinician. 'Off label' means these medications are either being prescribed for a different age group to those in the standard prescription group AND/OR for a different condition than what the medication has been approved for.

Although common side effects of these drugs (eg,...) are well known, high-quality, robust research is still required to confirm the long-term effects and reversibility of these blockers particularly in the younger age groups. This makes specialist clinical advice and oversight critical.

Service providers that can help access and provide more information about blockers include:

- paediatric services
- youth health services
- endocrinologists
- primary health care teams.

Dr Tim Jelleyman

Chief Clinical Advisor, Child and Youth Health

Office of Chief Clinical Officers

S9(2)(a)

timothy.jelleyman@health.govt.nz

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Clinical days at Waitemāta : Thurs, Fri.

Text me if your email needs priority attention.



From: Jenna Osborne-Taylor <Jenna.Osborne-Taylor@health.govt.nz>

Sent: Tuesday, 13 September 2022 11:39 am

To: Timothy Jelleyman <Timothy.Jelleyman@health.govt.nz>

Cc: Office of the Chief Clinical Officers <occo@health.govt.nz>; Sarah Upston <Sarah.Upston@health.govt.nz>

Subject: Review of lines on puberty blockers on MoH website

Kia ora Tim

I hope you're well.

I'm hoping you might be able to assist me.

I understand that you recently signed out a DREP on the topic of puberty blockers (see email trail below) where the writer specifically referenced a line from the Ministry of Health's webpage on transgender healthcare [here](#).

In addition to the DREP we received, we have also been made aware that our colleagues at RNZCGP and in primary care settings are receiving a growing number of queries relating to the highlighted section of the guidance specifically:

Blockers are a safe and fully reversible medicine that may be used from early puberty through to later adolescence to help ease distress and allow time to fully explore gender health options.

After discussing with Dr Betty et al, I was hoping it might be possible to get this section of the website revised in the hopes it creates fewer queries. While the statement is no doubt true, as I'm sure you're aware there are both members of the public and medical professionals who disagree.

We will be working towards putting together a joint statement on the efficacy and safety of puberty blockers to use as a standardised response for such queries.

Please also note that we have been alerted by our colleagues at PATHA that this line being used negatively in the media – see here: <https://www.nzherald.co.nz/lifestyle/identity-crisis-have-we-gone-too-far-in-letting-kids-change-their-gender/TT4LEA5FS7JYWFYWCCBAEB6JM/>

Please let me know if you're not the correct person to assist and I will redirect my query accordingly.

Ngā mihi nui

Jenna Osborne-Taylor (she/her/ia)

Senior Advisor | Kaitohutohu Matua

Primary Care

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īmēra: jenna.osborne-taylor@health.govt.nz

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Te Whatu Ora – Health New Zealand

TeWhatuOra.govt.nz

I work remotely - please include virtual options for hui/meetings. My standard hours of work are 7.00am to 3.00pm.

From: Steve Barnes <Steve.Barnes@health.govt.nz>

Sent: Thursday, 8 September 2022 12:22 pm

To: Jenna Osborne-Taylor <Jenna.Osborne-Taylor@health.govt.nz>

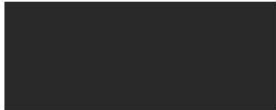
Subject: RE: DREP for review/input: Puberty blockers use with children - due 24/08 (H2022010137) CRM:0123118

Kia ora Jenna,

I'm not totally sure but I see that Tim Jellyman signed off the letter so I'd suggest starting with him. If that doesn't work I know there's a generic OCCO email address: occo@health.govt.nz.

Steve

Steve Barnes (he/him)
Group Manager
Family and Community Health Policy
Strategy, Policy and Legislation
Mobile: S9(2)(a)
steve.barnes@health.govt.nz
Manatū Hauora, 133 Molesworth Street
Thorndon, Wellington 6011



From: Jenna Osborne-Taylor <Jenna.Osborne-Taylor@health.govt.nz>
Sent: Thursday, 8 September 2022 11:09 am
To: Steve Barnes <Steve.Barnes@health.govt.nz>
Subject: RE: DREP for review/input: Puberty blockers use with children - due 24/08 (H2022010137) CRM:0123118

Kia ora Steve

I hope you're well.

Apologies for bothering you – I've just been in a meeting with Dr Bryan Betty and others around a joint attack regarding the number of queries the College (and we) are receiving relating to puberty blockers. These queries specifically mention the line about puberty blockers on the MoH website.

I see from the final response to this DREP that OCCO have said that they're undertaking a review of the information we have publicly available on puberty blockers. Do you know who in OCCO I could contact about this? Would they be the people to contact about getting this line edited?

Thanks so much in advance for your help.

Ngā mihi nui

Jenna Osborne-Taylor (she/her/ia)
Senior Advisor | Kaitohutohu Matua
Primary Care
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I work remotely - please include virtual options for hui/meetings. My standard hours of work are 7.00am to 3.00pm.

From: Jenna Osborne-Taylor <Jenna.Osborne-Taylor@health.govt.nz>

Sent: Tuesday, 23 August 2022 8:11 am

To: Primary Community and Rural Office <PCROffice@health.govt.nz>; Sarah Upston <Sarah.Upston@health.govt.nz>; Steve Barnes <Steve.Barnes@health.govt.nz>

Cc: Tee Wyatt <Tahndae.Wyatt@health.govt.nz>; Sharn Brassington-Crow <Sharn.Crow@health.govt.nz>; Edie Taylor <Edie.Taylor@health.govt.nz>

Subject: RE: DREP for review/input: Puberty blockers use with children - due 24/08 (H2022010137) CRM:0123118

Tēnā koutou

I've had a read of the correspondence, and I'm inclined to say this doesn't sit with Primary Care, either. I suggest a hybrid of Medsafe and Policy.

The website the writer has linked to on MOH's website is 'owned' by policy (Steve Barnes' team), the majority of their letter relates to Medsafe, and primary care isn't mentioned at all.

PATHA's Guidelines for Gender Affirming Care does cover off Puberty suppression using GnRH agonists and we (MOH / Te Whatu Ora) do endorse these guidelines. @Steve Barnes would you have anything to add on this matter?

However from Primary Care's point of view, other than saying that we're working to improve access to primary care for transgender people (which misses the point of the writer's concerns) I'm not sure what we can say to address the writer's main points.

Ngā mihi nui

Jenna Osborne-Taylor (she/her/ia)

Senior Advisor | Kaitohutohu Matua

Primary Care

Primary Health Care System Improvement and Innovation / Commissioning

īmēra: jenna.osborne-taylor@health.govt.nz

133 Molesworth Street, Thorndon, Wellington | P O Box 5013, Wellington 6140



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I work remotely - please include virtual options for hui/meetings. My standard hours of work are 7.00am to 3.00pm.

Out of Scope



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From: Robyn Carey
Sent: Monday, 22 August 2022 3:58 pm
To: Edie Taylor
Subject: Re: Can we find out who wrote this webpage?

Well, maybe that gives us more license to change it!

From: Edie Taylor <Edie.Taylor@health.govt.nz>
Sent: Monday, August 22, 2022 3:55:41 PM
To: Robyn Carey <Robyn.Carey@health.govt.nz>
Subject: RE: Can we find out who wrote this webpage?

Hi Robyn

I've asked the webteam – must be before almost everyone in the team's time here!

Ngā mihi

Edie Taylor (she/her)
Senior Advisor | Office of the Chief Clinical Officers
System Performance & Monitoring
Manatū Hauora, 133 Molesworth Street
Thorndon, Wellington 6011



From: Robyn Carey <Robyn.Carey@health.govt.nz>
Sent: Monday, 22 August 2022 3:33 pm
To: Edie Taylor <Edie.Taylor@health.govt.nz>
Subject: Can we find out who wrote this webpage?

Hi Edie,

Is it possible to get some of the history behind the creation of this webpage please? If we can determine the authors, we will be able to get their side of the story around 'safe and reversible'.

<https://www.health.govt.nz/your-health/healthy-living/transgender-new-zealanders/transgender-new-zealanders-children-and-young-people>

Certainly the Swedish update is not in favour of using hormonal treatments in adolescents (I've not looked up the rest of the references yet).

Thanks

Dr Robyn Carey

Chief Medical Officer

robyn.carey@health.govt.nz

Mobile: S9(2)(a)

Manatū Hauora, 133 Molesworth Street Thorndon, Wellington 6011



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From: Robyn Carey
Sent: Monday, 22 August 2022 4:57 pm
To: Edie Taylor
Subject: RE: Webpage on Transgender New Zealanders: Children and young people

Thanks very much Edie, I think it might be time for a refresh of the page.

We'll wait for S&I and MedSafe info.

Thanks again

Ngā mihi
Dr Robyn Carey
Chief Medical Officer
robyn.carey@health.govt.nz
Mobile: S9(2)(a)
Manatū Hauora, 133 Molesworth Street Thorndon, Wellington 6011



From: Edie Taylor <Edie.Taylor@health.govt.nz>
Sent: Monday, 22 August 2022 4:16 pm
To: Robyn Carey <Robyn.Carey@health.govt.nz>
Subject: FW: Webpage on Transgender New Zealanders: Children and young people

From: Cara Pollock <Cara@xx> > **On Behalf Of** WebTeam
Sent: Monday, 22 August 2022 4:10 pm
To: Edie Taylor <xx@xx>
Subject: Re: Webpage on Transgender New Zealanders: Children and young people

Kia ora Edie

So it looks like the only change that has been made to that page since it was first published in 2017 was the addition of the link to the guidelines on the right-hand side. I can't actually find a record of who requested the link be added, although I found an earlier request from David St George (who was in the Office of the Chief Medical Officer at the time) asking for it on some of the other transgender health pages. I suspect it was either someone in the OCCO or possibly the system flow team who asked for it to be added to the Children and young people page as well.

The page was originally developed by a working group -- the contact we had was someone in the Youth Health, Child and Family Programmes team, but I think it was owned by the Office of the Chief Medical Officer overall.

Hope that helps.

Ngā mihi,
Cara

From: Edie Taylor <Edie.t@xxx>
Sent: 22 August 2022 3:42 PM
To: WebTeam <webteam@health.govt.nz>
Subject: Webpage on Transgender New Zealanders: Children and young people

Kia ora team

Is it possible to find out who owns this page and to have a copy of the version history?

<https://www.health.govt.nz/your-health/healthy-living/transgender-new-zealanders/transgender-new-zealanders-children-and-young-people>

We are trying to determine who the original authors of the page were and who did the last update in 2020.

Ngā mihi

Edie Taylor (she/her)
Senior Advisor | Office of the Chief Clinical Officers
System Performance & Monitoring
Manatū Hauora, 133 Molesworth Street
Thorndon, Wellington 6011



From: Sayali Pendharkar
Sent: Monday, 5 September 2022 4:17 pm
To: Timothy Jelleyman; Edie Taylor
Cc: Sharn Brassington-Crow
Subject: Re: Rapid evidence assessments and puberty blockers meds research

Thanks, Eddie. I had let Sharn know I will be sending comments through today. I was dragged into a few urgent things Thursday/Friday.

Tim, would be good to quickly catch up tomorrow. I can do 12 noon if that suits.

Ngā Mohican nui
 Sayali

From: Timothy Jelleyman <Timothy.Jellexxx@xxxxxx.xxxx.nz>
Sent: Monday, September 5, 2022 4:13:20 PM
To: Edie Taylor <Edie.Taylor@health.govt.nz>; Sayali Pendharkar <Sayali.Pendxxxxxx@xxxxxx.xxxx.nz>
Cc: Sharn Brassington-Crow <Sharn.Crow@health.govt.nz>
Subject: RE: Rapid evidence assessments and puberty blockers meds research

Thanks Edie

Kia ora Sayali – I am happy to discuss at any point and help clarify scope if there is any question about that. (In Wellington office tomorrow so brief conversation very easy to fit in if you are about.)

Ngā mihi
 Tim.

Dr Tim Jelleyman

Chief Clinical Advisor, Child and Youth Health
 Office of Chief Clinical Officers

S9(2)(a)

timothy.jellexxx@xxxxxx.xxxx.xx

Manatū Hauora, 133 Molesworth Street
 Thorndon, Wellington 6011

Auckland based. Regular MoH days: Mon – Wed;

Clinical days at Waitemāta : Thurs, Fri.

Text me if your email needs priority attention.



From: Edie Taylor <Edie.Taylor@health.govt.nz>
Sent: Monday, 5 September 2022 4:04 pm
To: Sayali Pendharkar <Sayali.Pendharkxx@xxxxxx.xxvt.nz>
Cc: Timothy Jelleyman <Timothy.Jelleyman@health.govt.nz>; Sharn Brassington-Crow <Sharn.Crow@health.govt.nz>
Subject: FW: Rapid evidence assessments and puberty blockers meds research

Kia ora Sayali

Just following this up – are you able to let me know when we can expect this?

Many thanks.

Ngā mihi
Edie

Edie Taylor (she/her)
Senior Advisor | Office of the Chief Clinical Officers
System Performance & Monitoring
Manatū Hauora, 133 Molesworth Street
Thorndon, Wellington 6011



From: Robyn Carey <Robyn.Carey@health.govt.nz>
Sent: Monday, 5 September 2022 2:55 pm
To: Edie Taylor <Edie.Taylor@health.govt.nz>
Subject: RE: Rapid evidence assessments and puberty blockers meds research

Hi Edie,

Just checking what's happening with this?

I thought we were coordinating the response? Have we heard from Evidence, Research and Innovation yet about their research into this area.

Tim Jelleyman was going to review the webpages and he would be a good person to review any response we write.

Many thanks.

Ngā mihi
Dr Robyn Carey
Chief Medical Officer
robyn.carey@health.govt.nz
Mobile: S9(2)(a)
Manatū Hauora, 133 Molesworth Street Thorndon, Wellington 6011



From: Edie Taylor <Edie.Taylor@health.govt.nz>
Sent: Wednesday, 24 August 2022 9:29 am
To: Sayali Pendharkar <Sayali.Pendharkar@health.govt.nz>; Robyn Carey <Robyn.Carey@health.govt.nz>
Cc: Ian Town <Ian.Town@health.govt.nz>; Katrina McLaren <Katrina.McLaren@health.govt.nz>; Sharn Brassington-Crow <Sharn.Crow@health.govt.nz>
Subject: RE: Rapid evidence assessments and puberty blockers meds research

Thanks all. I have requested we get some additional time for the response.

I have also asked Sharn who is coordinating this response to pass on any comment from Medsafe to you as well Sayali. To keep everything together I have also attached the comments from Primary and Community Care and Policy.

Ngā mihi
Edie

Edie Taylor (she/her)
Senior Advisor | Office of the Chief Clinical Officers
System Performance & Monitoring
Manatū Hauora, 133 Molesworth Street
Thorndon, Wellington 6011



From: Sayali Pendharkar <Sayali.Pendharkar@health.govt.nz>
Sent: Wednesday, 24 August 2022 9:16 am
To: Robyn Carey <Robyn.Carey@health.govt.nz>
Cc: Ian Town <Ian.Town@health.govt.nz>; Edie Taylor <Edie.Taylor@health.govt.nz>; Katrina McLaren <Katrina.McLaren@health.govt.nz>
Subject: RE: Rapid evidence assessments and puberty blockers meds research

That would be great.

Thank You,

Kind Regards,
Sayali

Ngā mihi nui

Sayali

Dr Sayali Pendharkar, PhD (she/her)
Deputy Chief Science Advisor
Office of the Chief Science Advisor
Evidence, Research and Innovation
Email: sayali.pendharkar@health.govt.nz
Manatū Hauora, 133 Molesworth Street
Thorndon, Wellington 6011



From: Robyn Carey <Robyn.Carey@health.govt.nz>
Sent: Wednesday, 24 August 2022 9:12 am
To: Sayali Pendharkar <Sayali.Pendharkar@health.govt.nz>
Cc: Ian Town <Ian.Town@health.govt.nz>; Edie Taylor <Edie.Taylor@health.govt.nz>; Katrina McLaren <Katrina.McLaren@health.govt.nz>
Subject: RE: Rapid evidence assessments and puberty blockers meds research

Kia ora,

I'm not here tomorrow or Friday, so will see if we can get the deadline pushed out until later next week.

Many thanks.

Ngā mihi
Dr Robyn Carey
Chief Medical Officer
robyn.carey@health.govt.nz
Mobile: S9(2)(a)
Manatū Hauora, 133 Molesworth Street Thorndon, Wellington 6011



From: Sayali Pendharkar <Sayali.Pendharkar@health.govt.nz>
Sent: Wednesday, 24 August 2022 9:04 am
To: Robyn Carey <Robyn.Carey@health.govt.nz>

Cc: Ian Town <Ian.Town@health.govt.nz>

Subject: RE: Rapid evidence assessments and puberty blockers meds research

Kia ora Robyn,

Sure, happy to help with this. I will have a look at the correspondence. I see it is due today, but if possible could it please be pushed out to Friday this week? It will give me some time to review the evidence and the draft, noting that we need to address consumer concerns in the response.

Ngā mihi nui

Sayali

Dr Sayali Pendharkar, PhD (she/her)
Deputy Chief Science Advisor
Office of the Chief Science Advisor
Evidence, Research and Innovation
Email: sayali.pendharkar@health.govt.nz
Manatū Hauora, 133 Molesworth Street
Thorndon, Wellington 6011



From: Robyn Carey <Robyn.Carey@health.govt.nz>

Sent: Wednesday, 24 August 2022 7:47 am

To: Sayali Pendharkar <Sayali.Pendharkar@health.govt.nz>

Cc: Ian Town <Ian.Town@health.govt.nz>

Subject: RE: Rapid evidence assessments and puberty blockers meds research

Kia ora,

Many thanks Sayali. It has come to our attention via consumer correspondence that the following webpage may need refreshing, in particular this sentence: **Blockers are a safe and fully reversible medicine that may be used from early puberty through to later adolescence to help ease distress and allow time to fully explore gender health options.** <https://www.health.govt.nz/your-health/healthy-living/transgender-new-zealanders/transgender-new-zealanders-children-and-young-people#:~:text=Puberty%20blockers&text=Blockers%20are%20a%20safe%20and,fully%20explor%20gender%20health%20options>.

It appears that some governments are changing their position on this matter to varying extents.

Although we have not been able to track down the author of this webpage, it seems that OCCO owned the page and that it was developed via a working party. I am hoping that we can refresh the page based on evidence and international trends, hence the request for help from Evidence, Research and Innovation.

I will forward you the correspondence separately.

Many thanks

Ngā mihi

Dr Robyn Carey

Chief Medical Officer

robyn.carey@health.govt.nz

Mobile: S9(2)(a)

Manatū Hauora, 133 Molesworth Street Thorndon, Wellington 6011



From: Sayali Pendharkar <Sayali.Pendharkar@health.govt.nz>

Sent: Tuesday, 23 August 2022 11:54 am

To: Robyn Carey <Robyn.Carey@health.govt.nz>

Cc: Ian Town <Ian.Town@health.govt.nz>

Subject: Rapid evidence assessments and puberty blockers meds research

Kia ora Robyn,

Dean (Rutherford) advised that you were in touch about Puberty blocker meds research specifically, and whether we could do rapid evidence assessments generally? Ian (Town) is currently on leave and I am picking this up on his behalf.

If you would prefer to discuss over Teams/in person, please let me know.

I look forward to hearing from you.

Ngā mihi nui

Sayali

Dr Sayali Pendharkar, PhD (she/her)

Deputy Chief Science Advisor

Office of the Chief Science Advisor

Evidence, Research and Innovation

Email: sayali.pendharkar@health.govt.nz

Manatū Hauora, 133 Molesworth Street

Thorndon, Wellington 6011



From: Sayali Pendharkar
Sent: Tuesday, 6 September 2022 2:34 pm
To: Timothy Jelleyman; Sharn Brassington-Crow; Robyn Carey; Edie Taylor
Subject: RE: DREP for puberty blocker meds and rapid evidence assessment

Follow Up Flag: Follow up
Flag Status: Completed

Thank you, Tim. That covers everything 😊

[@Sharn Brassington-Crow](#) thank you for coordinating this.

Best Regards,

Sayali

From: Timothy Jelleyman <Timothy.Jelleyman@health.govt.nz>
Sent: Tuesday, 6 September 2022 2:21 pm
To: Sharn Brassington-Crow <Sharn.Crow@health.govt.nz>; Robyn Carey <Robyn.Carey@health.govt.nz>; Sayali Pendharkar <Sayali.Pendharkar@health.govt.nz>; Edie Taylor <Edie.Taylor@health.govt.nz>
Subject: RE: DREP for puberty blocker meds and rapid evidence assessment

Thanks Sharn – to update, I have just met with Sayali.

In discussion with Sayali we proposed the following next steps:

- Adjust line in website in a way that acknowledges
- Develop Evidence brief in next 5 – 6 months
- Systematic Review/meta-analysis – propose this to be procured and follow

In the letter we should note we are amending the website information to reflect limits of evidence on reversibility and that further work to develop an evidence brief is planned. I will prioritise reviewing the letter shortly. (We will defer mention of any proposed Systematic Review as yet to be established).

The process to adjust website needs to be set in motion.

(Sayali – have I summarised correctly?)

Ngā mihi
Tim

Dr Tim Jelleyman

Chief Clinical Advisor, Child and Youth Health

Office of Chief Clinical Officers

S9(2)(a)

timothy.jelleyman@health.govt.nz

Manatū Hauora, 133 Molesworth Street

Thorndon, Wellington 6011

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Clinical days at Waitemāta : Thurs, Fri.

Text me if your email needs priority attention.



From: Sharn Brassington-Crow <Sharn.Crow@health.govt.nz>

Sent: Tuesday, 6 September 2022 2:07 pm

To: Robyn Carey <Robyn.Carey@health.govt.nz>; Sayali Pendharkar <Sayali.Pendharkar@health.govt.nz>; Edie Taylor <Edie.Taylor@health.govt.nz>

Cc: Timothy Jelleyman <Timothy.Jelleyman@health.govt.nz>

Subject: RE: DREP for puberty blocker meds and rapid evidence assessment

Kia ora koutou,

Thank you Robyn and Sayali for the help with this direct reply/on this topic.

I note the comments on action required following OCCO decisions.

I have slightly updated the below DREP, and updated the signatory to be Tim. Likely this will need further updating following discussions today, but otherwise will hand this over to Edie/OCCO ODDG for review/changes.

[FW 2130-2022 Fwd Enquiry regarding MOH guidance on puberty blockers 4F5E2C92F819ED11B83E00224811D365](#)

Ngā mihi,

Sharn Brassington-Crow ([he/him](#))

Advisor/Kaitohutohu | Ministerial Correspondence

Government Services | Government & Executive Services

Manatū Hauora

sharn.crow@health.govt.nz

133 Molesworth Street Thorndon, Wellington 6011



From: Robyn Carey <Robyn.Carey@health.govt.nz>
Sent: Tuesday, 6 September 2022 7:51 am
To: Sayali Pendharkar <Sayali.Pendharkar@health.govt.nz>
Cc: Timothy Jelleyman <Timothy.Jelleyman@health.govt.nz>; Ian Town <Ian.Town@health.govt.nz>; Dean Rutherford <Dean.Rutherford@health.govt.nz>; Edie Taylor <Edie.Taylor@health.govt.nz>; Sharn Brassington-Crow <Sharn.Crow@health.govt.nz>
Subject: RE: DREP for puberty blocker meds and rapid evidence assessment

Kia ora Sayali,

I agree with your comments, both in the email and in the DREP.

I understand you and Tim are meeting later today.

Tim and I are comfortable that this goes out in Tim's name, both for continuity with the CMO switch and as OCCO's resident paediatrician. I will of course update Joe Bourne during our overlap period next week.

Ngā mihi

Dr Robyn Carey

Chief Medical Officer

robyn.carey@health.govt.nz

Mobile: S9(2)(a)

Manatū Hauora, 133 Molesworth Street Thorndon, Wellington 6011



From: Sayali Pendharkar <Sayali.Pendharkar@health.govt.nz>
Sent: Monday, 5 September 2022 10:46 pm
To: Sharn Brassington-Crow <Sharn.Crow@health.govt.nz>
Cc: Timothy Jelleyman <Timothy.Jelleyman@health.govt.nz>; Ian Town <Ian.Town@health.govt.nz>; Dean Rutherford <Dean.Rutherford@health.govt.nz>; Edie Taylor <Edie.Taylor@health.govt.nz>; Robyn Carey <Robyn.Carey@health.govt.nz>
Subject: DREP for puberty blocker meds and rapid evidence assessment

Kia ora Sharn,

Please find attached my comments on the puberty blockers DREP. I agree with Robyn – we can better address the concerns raised by S9(2)(a), and update the information on Ministry's website focusing on latest evidence and international trends. I am also catching up with Tim tomorrow for his advice on what else we may need to consider here.

Additional thoughts below:

- We should undertake a formal systematic review and meta-analysis on evidence-to-date on puberty blockers similar to UK, Sweden, Finland

- Consider a wider conversation around using (more likely starting to collect) data from existing longitudinal studies in NZ (incl. health survey?)
- Conversation with PATHA to update their guidelines (dated 2018) particularly in light of the NICE Review...

By way of next steps I suggest the following:

- An evidence brief on puberty blockers to publish on Ministry's website
 - Office of the CSA will be getting an intern over November to February who could do this as part of their project
- Update Ministry webpage to remove the comment on safety and reversibility of puberty blockers, add in key references, list some of the commonly used off-label drugs

Keen to hear any thoughts/feedback on points above.

Ngā mihi nui

Sayali

Dr Sayali Pendharkar, PhD (she/her)

Deputy Chief Science Advisor

Office of the Chief Science Advisor

Evidence, Research and Innovation

Phone: S9(2)(a)

Email: sayali.pendharkar@health.govt.nz

Manatū Hauora, 133 Molesworth Street

Thorndon, Wellington 6011



From: Sayali Pendharkar-Orpe
Sent: Monday, 12 September 2022 1:46 pm
To: Timothy Jelleyman
Cc: Office of the Chief Clinical Officers; Edie Taylor; Sharn Brassington-Crow
Subject: RE: Response for final sign-out - H2022010137

Categories: Tracked To Dynamics 365

Kia ora Tim,

Yes, ERI will lead the Evidence Brief piece. This will of course be done in close collaboration with you, and anybody else from OCCO that may need to be involved 😊

Ngā mihi nui

Sayali

Dr Sayali Pendharkar, PhD (she/her)
 Deputy Chief Science Advisor
 Office of the Chief Science Advisor
 Evidence, Research and Innovation
 Phone: S9(2)(a) [REDACTED]
 Email: sayali.pendharkar@health.govt.nz
 Manatū Hauora, 133 Molesworth Street
 Thorndon, Wellington 6011



From: Timothy Jelleyman <Timothy.Jelleyman@health.govt.nz>
Sent: Wednesday, 7 September 2022 2:59 pm
To: Office of the Chief Clinical Officers <occo@health.govt.nz>; Sayali Pendharkar <Sayali.Pendharkar@health.govt.nz>
Cc: Sharn Brassington-Crow <Sharn.Crow@health.govt.nz>; Edie Taylor <Edie.Taylor@health.govt.nz>
Subject: RE: Response for final sign-out - H2022010137

Good point. I have not been clear enough.

The bit we have committed to do quickly is re-phrase the MoH webpage (which I can lead under OCCO to put via the webpage management comms team), and then to develop an evidence brief to inform the MoH position – a slower piece of work under Evidence, Research and Innovation which I have discussed with Sayali – *Sayali, am I correct that ERI would lead this Evidence Brief piece?*

Maybe 'guidance' is the wrong word as I can see you are reading as referring to the referenced guidelines – which is the externally written document.

Alternative suggested wording for that paragraph/line: 'I can advise you that Manatū Hauora (the Ministry of Health) are in the process of revising the webpage in a way that acknowledges the current limits of available evidence. ...'

Dr Tim Jelleyman
Chief Clinical Advisor, Child and Youth Health
Office of Chief Clinical Officers
S9(2)(a)

timothy.jelleyman@health.govt.nz
Manatū Hauora, 133 Molesworth Street
Thorndon, Wellington 6011
Auckland based. Regular MoH days: Mon – Wed;
Clinical days at Waitemāta : Thurs, Fri.
Text me if your email needs priority attention.



From: Edith Bennett <Edith.Bennett@health.govt.nz> On Behalf Of Office of the Chief Clinical Officers
Sent: Wednesday, 7 September 2022 1:44 pm
To: Timothy Jelleyman <Timothy.Jelleyman@health.govt.nz>
Cc: Sharn Brassington-Crow <Sharn.Crow@health.govt.nz>; Edie Taylor <Edie.Taylor@health.govt.nz>
Subject: Re: Response for final sign-out - H2022010137

Kia ora Tim

Thank you for preparing the letter Sharn has included below.

Just one point from us before this goes out - can you please confirm there is an agreed work programme in place to make puberty blocker guidance clearer and who is leading this?

If this hasn't been finalised, I would advise that we omit this from the letter. Noting the current guidance is not Ministry developed, just endorsed.

Thank you!

Edith

Office of the Chief Clinical Officers

occo@health.govt.nz

Manatū Hauora, 133 Molesworth Street
Thorndon, Wellington 6011



RELEASED UNDER THE OFFICIAL INFORMATION ACT 1982

From: Sayali Pendharkar-Orpe
Sent: Friday, 16 September 2022 10:49 am
To: Edie Taylor; Timothy Jelleyman
Subject: RE: Puberty blockers - update on webpage

Categories: Tracked To Dynamics 365

Excellent – thanks, Edie 😊

Ngā mihi nui

Sayali

Dr Sayali Pendharkar, PhD (she/her)
Deputy Chief Science Advisor
Office of the Chief Science Advisor
Evidence, Research and Innovation
Phone: S9(2)(a)
Email: sayali.pendharkar@health.govt.nz
Manatū Hauora, 133 Molesworth Street
Thorndon, Wellington 6011



From: Edie Taylor <Edie.Taylor@health.govt.nz>
Sent: Friday, 16 September 2022 10:48 am
To: Timothy Jelleyman <Timothy.Jelleyman@health.govt.nz>; Sayali Pendharkar-Orpe <Sayali.Pendharkar@health.govt.nz>
Subject: RE: Puberty blockers - update on webpage

Updated - <https://www.health.govt.nz/your-health/healthy-living/transgender-new-zealanders/transgender-new-zealanders-children-and-young-people>

Ngā mihi
Edie

Edie Taylor (she/her)
Senior Advisor | Office of the Chief Clinical Officers
System Performance & Monitoring
Manatū Hauora, 133 Molesworth Street
Thorndon, Wellington 6011



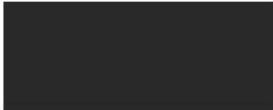


From: Edie Taylor
 Sent: Friday, 16 September 2022 10:30 am
 To: Timothy Jelleyman <Timothy.Jelleyman@health.govt.nz>; Sayali Pendharkar-Orpe <Sayali.Pendharkar@health.govt.nz>
 Subject: RE: Puberty blockers - update on webpage

Have sent through to the webteam to update – thanks both!

Ngā mihi

Edie Taylor (she/her)
 Senior Advisor | Office of the Chief Clinical Officers
 System Performance & Monitoring
 Manatū Hauora, 133 Molesworth Street
 Thorndon, Wellington 6011



From: Timothy Jelleyman <Timothy.Jelleyman@health.govt.nz>
 Sent: Thursday, 15 September 2022 9:02 pm
 To: Sayali Pendharkar-Orpe <Sayali.Pendharkar@health.govt.nz>; Edie Taylor <Edie.Taylor@health.govt.nz>
 Subject: RE: Puberty blockers - update on webpage

Thank you Sayali for that edit.
 Medsafe team (Derek) were also happy with the cut down wording without specific drug name mentioned.
 I will ask Edie Taylor in OCCO to progress the recommended wording to web team.

Kia ora Edie,
 If you are able to, would you progress this through web team?
 The final recommendation to go to web team is, as an update to the Puberty Blockers section of the page, :

[Transgender New Zealanders: Children and young people | Ministry of Health NZ](#)

Proposed wording adjustment:

Puberty blockers

For young people where these feelings continue into puberty or emerge during puberty, particularly if associated with distress, it is important to see a health professional. Puberty blockers are a medication that can be used to halt the progress of potentially unwanted puberty-related physical changes.

Blockers are sometimes used from early puberty through to later adolescence to allow time to fully explore gender health options. This is done under the guidance of a clinician who specialises in their use.

Service providers that can help access and provide more information about blockers include:

- paediatric services
- youth health services
- endocrinologists
- primary health care teams.

Dr Tim Jelleyman

Chief Clinical Advisor, Child and Youth Health
Office of Chief Clinical Officers

S9(2)(a)

timothy.jelleyman@health.govt.nz

Manatū Hauora, 133 Molesworth Street
Thorndon, Wellington 6011

Auckland based. Regular MoH days: Mon – Wed;
Clinical days at Waitemāta : Thurs, Fri.
Text me if your email needs priority attention.



From: Sayali Pendharkar-Orpe <Sayali.Pendharkar@health.govt.nz>
Sent: Wednesday, 14 September 2022 6:23 pm
To: Timothy Jelleyman <Timothy.Jelleyman@health.govt.nz>
Subject: RE: Puberty blockers - update on webpage

Hi Tim,

No problem at all. I think given Medsafe's response, I agree with you that we proceed with publishing the version you have shared below. One minor suggestion is splitting the 2nd paragraph into 2 sentences – have edited below.

Also, as I think you or Anne suggested, a meeting in the coming weeks would be useful to discuss the general logistics of such pieces of work :)

Kind Regards,

Sayali

Dr Sayali Pendharkar, PhD (she/her)
 Deputy Chief Science Advisor
 Office of the Chief Science Advisor
 Evidence, Research and Innovation
 Phone: S9(2)(a)
 Email: sayali.pendharkar@health.govt.nz
 Manatū Hauora, 133 Molesworth Street
 Thorndon, Wellington 6011



From: Timothy Jelleyman <Timothy.Jelleyman@health.govt.nz>
Sent: Wednesday, 14 September 2022 5:45 pm
To: Sayali Pendharkar-Orpe <Sayali.Pendharkar@health.govt.nz>
Subject: FW: Puberty blockers - update on webpage

Kia ora Sayali – sorry about all the mail traffic; here is the detail from Medsafe.

This also pushes me towards the simpler cut back version without any names of the drugs. What do you think?

e.g.

Puberty blockers

For young people where these feelings continue into puberty or emerge during puberty, particularly if associated with distress, it is important to see a health professional. Puberty blockers are a medication that can be used to halt the progress of potentially unwanted puberty-related physical changes.

Blockers are sometimes used from early puberty through to later adolescence to allow time to fully explore gender health options. This is done under the guidance of a clinician who specialises in their use.

Service providers that can help access and provide more information about blockers include:

- paediatric services
- youth health services
- endocrinologists
- primary health care teams.

Dr Tim Jelleyman
 Chief Clinical Advisor, Child and Youth Health
 Office of Chief Clinical Officers
 S9(2)(a)

timothy.jelleyman@health.govt.nz

Manatū Hauora, 133 Molesworth Street
 Thorndon, Wellington 6011

Auckland based. Regular MoH days: Mon – Wed;

Clinical days at Waitemāta : Thurs, Fri.

Text me if your email needs priority attention.



From: Derek Fitzgerald <derek.fitzgerald@health.govt.nz>
Sent: Wednesday, 14 September 2022 5:01 pm
To: Timothy Jelleyman <Timothy.Jelleyman@health.govt.nz>
Cc: Maria Storey <Maria.Storey@health.govt.nz>; Catherine Marnane <Catherine.Marnane@health.govt.nz>
Subject: RE: Puberty blockers - update on webpage

Thanks

From a regulatory point of view, providing information that an approved medicine can be used for an unapproved indication breaches section 20 of the Medicines Act 1981. This is because advertising (providing information about) an unapproved indication would make the medicine unapproved. In terms of section 20, providing information about an unapproved indication can be interpreted as advertising the availability of an unapproved medicine which is not permitted. The Act does not differentiate between the parties that could be providing such information. For instance, should the company marketing the medicine make such a claim, this would be a clear breach of the legislation, whereas an opinion piece by clinicians who were providing information about options is less likely to be a breach, or would be regarded as a lower level breach. If the Ministry advocated that certain medicines be used off-label, this could come in for criticism as a potential breach of the legislation. Important to note that where potentially controversial matters are concerned, there may be extra scrutiny of the legality of the Ministry's actions. You may wish to obtain a legal opinion on the information the Ministry publishes / wishes to publish on this.

Regards

Derek Fitzgerald
 Manager, Compliance Management Branch, Medsafe
 +64 (0)4 819 6866

From: Catherine Marnane <Catherine.Marnane@health.govt.nz>
Sent: Wednesday, 14 September 2022 9:05 am
To: Timothy Jelleyman <Timothy.Jelleyman@health.govt.nz>
Cc: Maria Storey <Maria.Storey@health.govt.nz>; Derek Fitzgerald <derek.fitzgerald@health.govt.nz>
Subject: RE: Puberty blockers - update on webpage

Kia ora Tim

Thank you for your email. Yes this page has created a number of queries over the years -I have been around for a long time!

I have forwarded your query to Maria Story, Acting Manager, Clinical Risk Management re the safety aspects. I have also included Derek Fitzgerald, Manager Compliance as I think it wise that he take a look at the wording related to prescribing an unapproved product.

Maria and Derek. Would you mind getting back to Tim with any comments you have.

Ngā mihi

Catherine

From: Timothy Jelleyman <Timothy.Jelleyman@health.govt.nz>
Sent: Tuesday, 13 September 2022 3:56 pm
To: Catherine Marnane <Catherine.Marnane@health.govt.nz>
Cc: Office of the Chief Clinical Officers <occo@health.govt.nz>; Edie Taylor <Edie.Taylor@health.govt.nz>; Sayali Pendharkar-Orpe <Sayali.Pendharkar@health.govt.nz>
Subject: Puberty blockers - update on webpage

Tēnā koe Catherine,

We have had a number of recent enquiries about one of the Manatū Hauora webpages, and specifically the information relating to puberty blockers.

There is a plan to review evidence, with Evidence, Research and Innovation leading work an Evidence Brief in the first instance. In the meantime we need to note some qualifications to the existing webpage reference to the safety and reversibility of Puberty Blockers in younger people (<18yrs), and here is a working draft of that.

For this we are requesting Medsafe team review and advise any further adjustments to this interim wording. You were suggested as a contact in Medsafe.

Ngā mihi

Tim.

[Transgender New Zealanders: Children and young people | Ministry of Health NZ](#)

Proposed wording adjustment:

Puberty blockers

For young people where these feelings continue into puberty or emerge during puberty, particularly if associated with distress, it is important to see a health professional. Puberty blockers are a medication that can be used to halt the progress of potentially unwanted puberty-related physical changes of an unwanted puberty.

Blockers are a safe and fully reversible medicine that may be used from early puberty through to later adolescence to help ease distress and allow time to fully explore gender health options. While this is not an exhaustive list of medications that may be prescribed (off-label) as puberty blockers, some that are commonly prescribed for adolescents (aged less than 18 years) are:

- Leuprorelin
- Goserelin

It is important to note that any off-label prescription remains at the discretion of the managing clinician. 'Off label' means these medications are either being prescribed for a different age group to those in the standard prescription group AND/OR for a different condition than what the medication has been approved for.

Although common side effects of these drugs (eg,...) are well known, high-quality, robust research is still required to confirm the long-term effects and reversibility of these blockers particularly in the younger age groups. This makes specialist clinical advice and oversight critical.

Service providers that can help access and provide more information about blockers include:

- paediatric services
- youth health services
- endocrinologists
- primary health care teams.

Dr Tim Jelleyman

Chief Clinical Advisor, Child and Youth Health
Office of Chief Clinical Officers

S9(2)(a)

timothy.jelleyman@health.govt.nz

Manatū Hauora, 133 Molesworth Street
Thorndon, Wellington 6011

Auckland based. Regular MoH days: Mon – Wed;
Clinical days at Waitemāta : Thurs, Fri.

Text me if your email needs priority attention.



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133 Molesworth Street
PO Box 5013
Wellington 6140
New Zealand
T+64 4 496 2000

13 October 2022

s 9(2)(a)

By email: s 9(2)(a)
Ref: H2022013005

Tēnā koe s 9(2)(a)

Response to your request for official information

Thank you for your request under the Official Information Act 1982 (the Act) to Manatū Hauora (the Ministry of Health) on 19 September 2022 regarding information on the Manatū Hauora website relating to puberty blockers. Please find a response to each part of your request below.

- 1) *Internal communications relating to this change in the information present on this page of the website.*

Seven email chains have been identified within the scope of this part of your request. These are itemised in Appendix 1 of this letter, which outlines the grounds under which I have decided to withhold information. Where information is withheld under section 9 of the Act, I have considered the countervailing public interest in release in making this decision and consider that it does not outweigh the need to withhold at this time. By way of context, some of these emails relate to the drafting of correspondence on the use of puberty blockers in young people. Information deemed out of scope of your request has been excluded.

- 2) *Any external communications relating to this change, for example, any consultation made with other government organisations, political figures, medicine professional groups, medical industry associations, transgender community organisations or other relevant groups if there has been any discussion of this information change with people outside the Ministry of Health.*

This part of your request is refused under section 18(g)(i) of the Act as the information requested is not held by Manatū Hauora and there are no grounds for believing it is held by another agency subject to the Act.

Manatū Hauora is in the process of responding to concerns raised regarding its website information, and as a temporary measure has reduced the website content while an evidence brief to support this area is planned over the next few months. The updated evidence will be provided to Te Whatu Ora Health New Zealand (the operational component of the health system) to inform clinical guidance and consumer information.

It is important to note that treating clinicians are responsible for considering the appropriateness of a particular treatment for an individual patient. The use of any medicine or treatment is a matter for discussion between a treating clinician and their patient.

It is important that health services meet the needs of all New Zealanders, with inclusiveness and dignity for all. We are committed to providing better access, support and safe treatment for rainbow communities through our health system and ensuring the system is responsive to the needs of transgender, intersex, and gender-diverse people.

I trust this information fulfils your request. Under section 28(3) of the Act, you have the right to ask the Ombudsman to review any decisions made under this request. The Ombudsman may be contacted by email at: info@ombudsman.parliament.nz or by calling 0800 802 602.

Please note that this response, with your personal details removed, may be published on the Manatu Hauorā website at: www.health.govt.nz/about-ministry/information-releases/responses-official-information-act-requests.

Nāku noa, nā



Dr Joe Bourne
Chief Medical Officer
Manatū Hauora – Ministry of Health

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Appendix 1: List of documents for release

#	Date	Title	Decision on release
1	18 August 2022 – 5 September 2022	Email correspondence: Review of lines on puberty blockers on MoH website	Some information withheld under section 9(2)(a) of the Act, to protect the privacy of natural persons. Some information has been identified as out of scope of your request and removed accordingly.
2	22 August 2022	Email Correspondence: Can we find out who wrote this webpage?	Some information withheld under section 9(2)(a) of the Act.
3		Email Correspondence: Webpage on Transgender New Zealanders: Children and young people	
4	23 August 2022 – 5 September 2022	Email Correspondence: Rapid evidence assessments and puberty blockers meds research	Some information withheld under section 9(2)(a) of the Act.
5	5 September 2022 - 6 September 2022	Email Correspondence: DREP for puberty blocker meds and rapid evidence assessment	
6	7 September 2022 -12 September 2022	Email Correspondence: Response for final sign-out H2022010237	Some information identified as out of scope of your request and removed accordingly.
7	13 September 2022 - 16 September 2022	Email Correspondence: Puberty blockers – update on webpage	Some information withheld under section 9(2)(a) of the Act.

From: Timothy Jelleyman <Timothy.Jelleyman@health.govt.nz>
Sent: Wednesday, 14 September 2022 12:51 pm
To: Jenna Osborne-Taylor; Sayali Pendharkar
Cc: Office of the Chief Clinical Officers; Sarah Upston
Subject: RE: Review of lines on puberty blockers on MoH website

Thanks Jenna.

Great point about the intended audience – public-facing.

We should probably then look at reducing the clinical detail in the text here in that case.

I have discussed with Joe Bourne, CMO, here in OCCO and have agreed the following plan:

- Short term - Webpage lines adjustment – in particular to remove the statement that these are ‘safe and reversible’ while further due diligence on evidence proceeds.
- Medium term – evidence work by Evidence, Research and Innovation - this is the stage at which wider engagement with any changes will add value, and we have been offered some names of experts, whom could be consulted at this stage

Kia ora Sayali,

I suggest for this short-term lines adjustment we go for a reduced statement on the site while we wait for the evidence process and subsequent engagement to happen. If we do *ha*, then we can defer the input of Medsafe team at this point.

e.g.

Puberty blockers

For young people where these feelings continue into puberty or emerge during puberty, particularly if associated with distress, it is important to see a health professional. Puberty blockers are a medication that can be used to halt the progress of potentially unwanted puberty-related physical changes.

Blockers are sometimes used, with the guidance of a clinician who specialises in their use, from early puberty through to later adolescence to allow time to fully explore gender health options.

Service providers that can help access and provide more information about blockers include:

- paediatric services
 - youth health services
 - endocrinologists
 - primary health care teams.
-

Dr Tim Jelleyman
Chief Clinical Advisor, Child and Youth Health
Office of Chief Clinical Officers

S9(2)(a)

timothy.jelleyman@health.govt.nz

Manatū Hauora, 133 Molesworth Street
Thorndon, Wellington 6011

Auckland based. Regular MoH days: Mon – Wed;

Clinical days at Waitemāta : Thurs, Fri.

Text me if your email needs priority attention.



From: Jenna Osborne-Taylor <Jenna.Osborne-Taylor@health.govt.nz>
Sent: Wednesday, 14 September 2022 10:48 am
To: Timothy Jelleyman <Timothy.Jelleyman@health.govt.nz>; Sayali Pendharkar-Orpe <Sayali.Pendharkar@health.govt.nz>
Cc: Office of the Chief Clinical Officers <occo@health.govt.nz>
Subject: RE: Review of lines on puberty blockers on MoH website

Thanks Tim.

We are mindful that this is a public-facing page and therefore shouldn't contain clinical detail as such, but should refer off to relevant pages that contain more clinical detail if possible. Equally, we feel it's important that the clinicians are heard and we're all on the same page about the intent and the level of detail required.

Tricky priorities to balance! Over to you.

Ngā mihi nui

Jenna Osborne-Taylor (she/her/ia)

Senior Advisor | Kaitiaki Matua

Primary Care

Primary Health Care System Improvement and Innovation / Commissioning

īmēra: jenna.osborne-taylor@health.govt.nz

133 Molesworth Street, Thorndon, Wellington | PO Box 5013, Wellington 6140



Te Whatu Ora – Health New Zealand

TeWhatuOra.govt.nz

I work remotely - please include virtual options for hui/meetings. My standard hours of work are 7.00am to 3.00pm.

From: Timothy Jelleyman <Timothy.Jelleyman@health.govt.nz>

Sent: Wednesday, 14 September 2022 8:28 am

To: Jenna Osborne-Taylor <Jenna.Osborne-Taylor@health.govt.nz>; Sayali Pendharkar-Orpe <Sayali.Pendharkar@health.govt.nz>
 Cc: Office of the Chief Clinical Officers <occo@health.govt.nz>
 Subject: RE: Review of lines on puberty blockers on MoH website

Kia ora Jenna,

Thank you for your further consideration of this mahi. Through paediatric networks I personally know **S9(2)(a)** and **S9(2)(a)**. They would each bring sound advice to this discussion and from a position of experience.

Regarding process, I will first discuss with Anne Stewart (manager OCCO) and Joe Bourne (CMO) before progressing the wider discussions.

Ngā mihi

Tim

Dr Tim Jelleyman

Chief Clinical Advisor, Child and Youth Health

Office of Chief Clinical Officers

S9(2)(a)

timothy.jelleyman@health.govt.nz

Manatū Hauora, 133 Molesworth Street

Thorndon, Wellington 6011

Auckland based. Regular MoH days: Mon – Wed;

Clinical days at Waitemāta : Thurs, Fri.

Text me if your email needs priority attention.



From: Jenna Osborne-Taylor <Jenna.Osborne-Taylor@health.govt.nz>

Sent: Wednesday, 14 September 2022 7:25 am

To: Timothy Jelleyman <Timothy.Jelleyman@health.govt.nz>; Sayali Pendharkar-Orpe <Sayali.Pendharkar@health.govt.nz>

Cc: Office of the Chief Clinical Officers <occo@health.govt.nz>

Subject: RE: Review of lines on puberty blockers on MoH website

Mōrena Tim

My colleague at PATHA has requested that – if at all possible – a clinician who works in the field of gender-affirming care (specifically with young people) be involved in the re writing of this page. We have no objections to this request, however we are keen to get the wording updated as quickly as possible while accommodating this.

If you can delay working on this for another 10 days or so, **S9(2)(a)** (a paediatrician at Counties Manukau District) has been put forward as the best person to work with. Her email is:

S9(2)(a). If you need to progress more urgently, than the best person is **S9(2)(a)**'s clinical lead, **S9(2)(a)**.

Additionally, several people from PATHA are attending WPATH in Montreal next week and would be very valuable when reviewing the evidence base due to both their clinical experience, and their involvement in international conversations on the matter. Their concern is that there are some scientific papers out there that aren't done well and this might not be immediately apparent to someone who isn't working in the field.

Thanks so much for your consideration, and if you'd like me to organise a hui to allow everyone to meet I'm very happy to do so.

Ngā mihi nui

Jenna Osborne-Taylor (she/her/ia)

Senior Advisor | Kaitohutohu Matua

Primary Care

Primary Health Care System Improvement and Innovation / Commissioning

Īmēra: jenna.osborne-taylor@health.govt.nz

133 Molesworth Street, Thorndon, Wellington | PO Box 5013, Wellington 6140



Te Whatu Ora – Health New Zealand

TeWhatuOra.govt.nz

I work remotely - please include virtual options for hui/meetings. My standard hours of work are 7.00am to 3.00pm.

From: Timothy Jelleyman <Timothy.Jelleyman@health.govt.nz>

Sent: Tuesday, 13 September 2022 1:53 pm

To: Sayali Pendharkar-Orpe <Sayali.Pendharkar@health.govt.nz>; Jenna Osborne-Taylor <Jenna.Osborne-Taylor@health.govt.nz>

Cc: Office of the Chief Clinical Officers <occo@health.govt.nz>; Sarah Upston <Sarah.Upston@health.govt.nz>

Subject: RE: Review of lines on puberty blockers on MoH website

Yes please.

Do you have a contact?

Dr Tim Jelleyman

Chief Clinical Advisor, Child and Youth Health

Office of Chief Clinical Officers

S9(2)(a)

timothy.jelleyman@health.govt.nz

Manatū Hauora, 133 Molesworth Street

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Text me if your email needs priority attention.



From: Sayali Pendharkar-Orpe <Sayali.Pendharkar@health.govt.nz>

Sent: Tuesday, 13 September 2022 1:48 pm

To: Timothy Jelleyman <Timothy.Jelleyman@health.govt.nz>; Jenna Osborne-Taylor <Jenna.Osborne-Taylor@health.govt.nz>

Cc: Office of the Chief Clinical Officers <occo@health.govt.nz>; Sarah Upston <Sarah.Upston@health.govt.nz>
Subject: RE: Review of lines on puberty blockers on MoH website

Thanks, all. I wonder Tim whether it would be good to have Medsafe look at the revised content.

Ngā mihi nui

Sayali

Dr Sayali Pendharkar, PhD (she/her)
Deputy Chief Science Advisor
Office of the Chief Science Advisor
Evidence, Research and Innovation
Phone: S9(2)(a) [REDACTED]
Email: sayali.pendharkar@health.govt.nz
Manatū Hauora, 133 Molesworth Street
Thorndon, Wellington 6011



From: Timothy Jelleyman <Timothy.Jelleyman@health.govt.nz>
Sent: Tuesday, 13 September 2022 12:05 pm
To: Jenna Osborne-Taylor <Jenna.Osborne-Taylor@health.govt.nz>
Cc: Office of the Chief Clinical Officers <occo@health.govt.nz>; Sarah Upston <Sarah.Upston@health.govt.nz>; Sayali Pendharkar-Orpe <Sayali.Pendharkar@health.govt.nz>
Subject: RE: Review of lines on puberty blockers on MoH website

Thank you Jenna for getting in touch, and your email is very timely.
I have just been working with Sayali – Science Advisor from Evidence, Research and Innovation (Manatū Hauora) – on some rewording. ERI will lead the evidence brief referred to, planned to complete over summer months. A subsequent systematic review is also being proposed (but not confirmed/funded yet, so not referred to in our correspondence).
I would be grateful for your team’s eye over this before we get this to web people. Getting this to web team soon would be great so we can address the immediate concern with more due diligence to follow.
(There is a broader question about where this public facing information sits in the new reformed health system, but at this point of time it is right that we qualify the statement that is currently causing some appropriate concern.)

Ngā mihi
Tim.

[Transgender New Zealanders: Children and young people | Ministry of Health NZ](#)

Proposed wording adjustment:

Puberty blockers

For young people where these feelings continue into puberty or emerge during puberty, particularly if associated with distress, it is important to see a health professional. Puberty blockers are a medication that can be used to halt the progress of potentially unwanted puberty-related physical changes. of an unwanted puberty.

Blockers are a safe and fully reversible medicine that may be used from early puberty through to later adolescence to help ease distress and allow time to fully explore gender health options. While this is not an exhaustive list of medications that may be prescribed (off-label) as puberty blockers, some that are commonly prescribed for adolescents (aged less than 18 years) are:

- Leuprorelin
- Goserelin

It is important to note that any off-label prescription remains at the discretion of the managing clinician. 'Off label' means these medications are either being prescribed for a different age group to those in the standard prescription group AND/OR for a different condition than what the medication has been approved for.

Although common side effects of these drugs (eg,...) are well known, high-quality, robust research is still required to confirm the long-term effects and reversibility of these blockers particularly in the younger age groups. This makes specialist clinical advice and oversight critical.

Service providers that can help access and provide more information about blockers include:

- paediatric services
- youth health services
- endocrinologists
- primary health care teams.

Dr Tim Jelleyman

Chief Clinical Advisor, Child and Youth Health

Office of Chief Clinical Officers

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Text me if your email needs priority attention.



From: Jenna Osborne-Taylor <Jenna.Osborne-Taylor@health.govt.nz>

Sent: Tuesday, 13 September 2022 11:39 am

To: Timothy Jelleyman <Timothy.Jelleyman@health.govt.nz>

Cc: Office of the Chief Clinical Officers <occo@health.govt.nz>; Sarah Upston <Sarah.Upston@health.govt.nz>

Subject: Review of lines on puberty blockers on MoH website

Kia ora Tim

I hope you're well.

I'm hoping you might be able to assist me.

I understand that you recently signed out a DREP on the topic of puberty blockers (see email trail below) where the writer specifically referenced a line from the Ministry of Health's webpage on transgender healthcare [here](#).

In addition to the DREP we received, we have also been made aware that our colleagues at RNZCGP and in primary care settings are receiving a growing number of queries relating to the highlighted section of the guidance specifically:

Blockers are a safe and fully reversible medicine that may be used from early puberty through to later adolescence to help ease distress and allow time to fully explore gender health options.

After discussing with Dr Betty et al, I was hoping it might be possible to get this section of the website revised in the hopes it creates fewer queries. While the statement is no doubt true, as I'm sure you're aware there are both members of the public and medical professionals who disagree.

We will be working towards putting together a joint statement on the efficacy and safety of puberty blockers to use as a standardised response for such queries.

Please also note that we have been alerted by our colleagues at PATHA that this line being used negatively in the media – see here: <https://www.nzherald.co.nz/lifestyle/identity-crisis-have-we-gone-too-far-in-letting-kids-change-their-gender/TT4LEA5FS7JYWFYWWCCBAEB6JM/>

Please let me know if you're not the correct person to assist and I will redirect my query accordingly.

Ngā mihi nui

Jenna Osborne-Taylor (she/her/ia)

Senior Advisor | Kaitohutohu Matua

Primary Care

Primary Health Care System Improvement and Innovation / Commissioning

Īmēra: jenna.osborne-taylor@health.govt.nz

133 Molesworth Street, Thorndon, Wellington | P O Box 5013, Wellington 6140



Te Whatu Ora – Health New Zealand

TeWhatuOra.govt.nz

I work remotely - please include virtual options for hui/meetings. My standard hours of work are 7.00am to 3.00pm.

From: Steve Barnes <Steve.Barnes@health.govt.nz>

Sent: Thursday, 8 September 2022 12:22 pm

To: Jenna Osborne-Taylor <Jenna.Osborne-Taylor@health.govt.nz>

Subject: RE: DREP for review/input: Puberty blockers use with children - due 24/08 (H2022010137) CRM:0123118

Kia ora Jenna,

I'm not totally sure but I see that Tim Jellyman signed off the letter so I'd suggest starting with him. If that doesn't work I know there's a generic OCCO email address: occo@health.govt.nz.

Steve

Steve Barnes (he/him)
Group Manager
Family and Community Health Policy
Strategy, Policy and Legislation
Mobile: S9(2)(a)
steve.barnes@health.govt.nz
Manatū Hauora, 133 Molesworth Street
Thorndon, Wellington 6011



From: Jenna Osborne-Taylor <Jenna.Osborne-Taylor@health.govt.nz>
Sent: Thursday, 8 September 2022 11:09 am
To: Steve Barnes <Steve.Barnes@health.govt.nz>
Subject: RE: DREP for review/input: Puberty blockers use with children - due 24/08 (H2022010137) CRM:0123118

Kia ora Steve

I hope you're well.

Apologies for bothering you – I've just been in a meeting with Dr Bryan Betty and others around a joint attack regarding the number of queries the College (and we) are receiving relating to puberty blockers. These queries specifically mention the line about puberty blockers on the MoH website.

I see from the final response to this DREP that OCCO have said that they're undertaking a review of the information we have publicly available on puberty blockers. Do you know who in OCCO I could contact about this? Would they be the people to contact about getting this line edited?

Thanks so much in advance for your help.

Ngā mihi nui

Jenna Osborne-Taylor (she/her/ia)
Senior Advisor | Kaitohutohu Matua
Primary Care
Primary Health Care System Improvement and Innovation / Commissioning

īmēra: jenna.osborne-taylor@health.govt.nz
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Out of Scope

From: Jenna Osborne-Taylor <Jenna.Osborne-Taylor@health.govt.nz>

Sent: Tuesday, 23 August 2022 8:11 am

To: Primary Community and Rural Office <PCROffice@health.govt.nz>; Sarah Upston <Sarah.Upston@health.govt.nz>; Steve Barnes <Steve.Barnes@health.govt.nz>

Cc: Tee Wyatt <Tahndae.Wyatt@health.govt.nz>; Sharn Brassington-Crow <Sharn.Crow@health.govt.nz>; Edie Taylor <Edie.Taylor@health.govt.nz>

Subject: RE: DREP for review/input: Puberty blockers use with children - due 24/08 (H2022010137) CRM:0123118

Tēnā koutou

I've had a read of the correspondence, and I'm inclined to say this doesn't sit with Primary Care, either. I suggest a hybrid of Medsafe and Policy.

The website the writer has linked to on MOH's website is 'owned' by policy (Steve Barnes' team), the majority of their letter relates to Medsafe, and primary care isn't mentioned at all.

PATHA's Guidelines for Gender Affirming Care does cover off Puberty suppression using GnRH agonists and we (MOH / Te Whatu Ora) do endorse these guidelines. @Steve Barnes would you have anything to add on this matter?

However from Primary Care's point of view, other than saying that we're working to improve access to primary care for transgender people (which misses the point of the writer's concerns) I'm not sure what we can say to address the writer's main points.

Ngā mihi nui

Jenna Osborne-Taylor (she/her/ia)

Senior Advisor | Kaitohutohu Matua

Primary Care

Primary Health Care System Improvement and Innovation / Commissioning

īmēra: jenna.osborne-taylor@health.govt.nz

133 Molesworth Street, Thorndon, Wellington | P O Box 5013, Wellington 6140

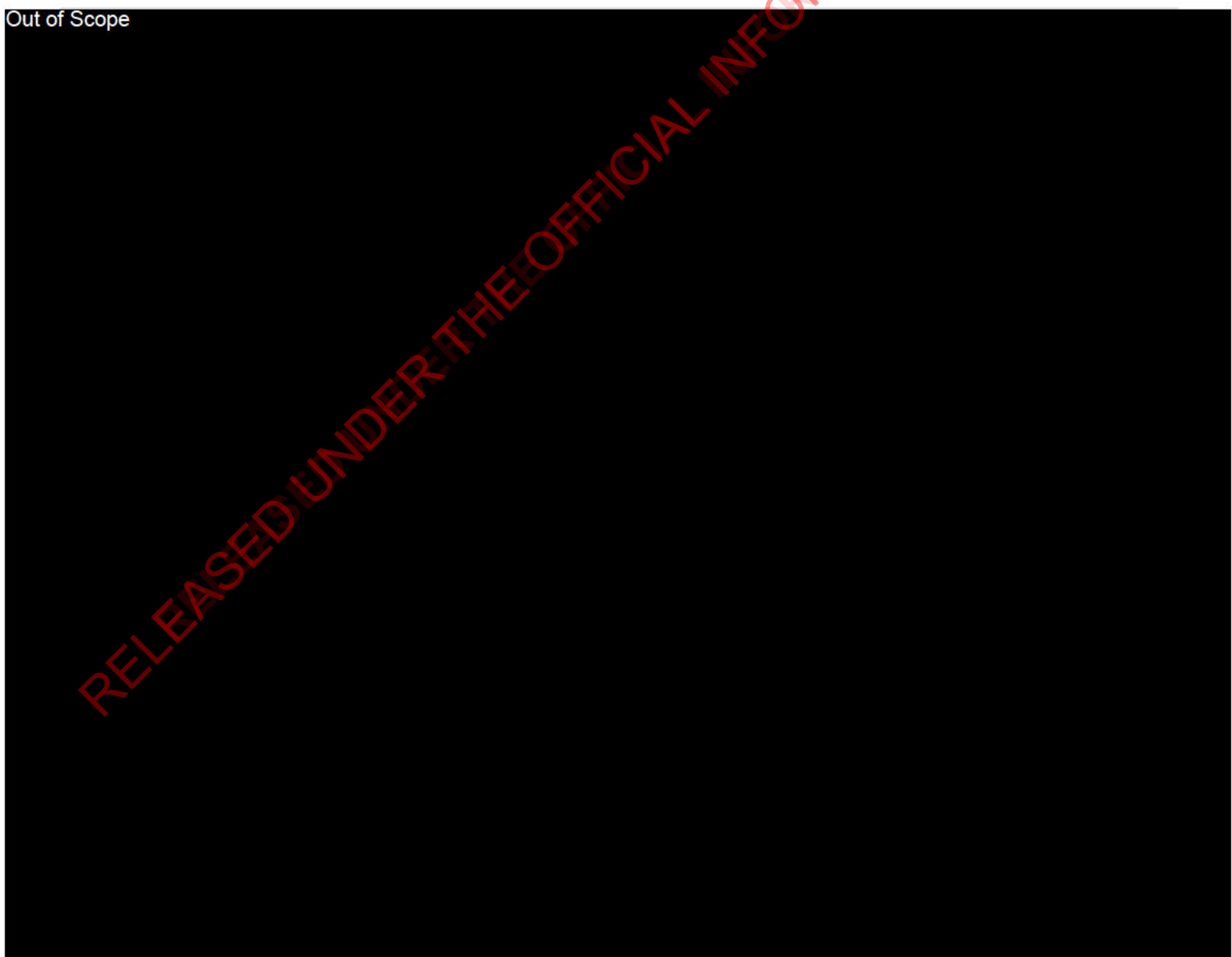


Te Whatu Ora – Health New Zealand

TeWhatuOra.govt.nz

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Out of Scope



From: Robyn Carey
Sent: Monday, 22 August 2022 3:58 pm
To: Edie Taylor
Subject: Re: Can we find out who wrote this webpage?

Well, maybe that gives us more license to change it!

From: Edie Taylor <Edie.Taylor@health.govt.nz>
Sent: Monday, August 22, 2022 3:55:41 PM
To: Robyn Carey <Robyn.Carey@health.govt.nz>
Subject: RE: Can we find out who wrote this webpage?

Hi Robyn

I've asked the webteam – must be before almost everyone in the team's time here!

Ngā mihi

Edie Taylor (she/her)
Senior Advisor | Office of the Chief Clinical Officers
System Performance & Monitoring
Manatū Hauora, 133 Molesworth Street
Thorndon, Wellington 6011



From: Robyn Carey <Robyn.Carey@health.govt.nz>
Sent: Monday, 22 August 2022 3:33 pm
To: Edie Taylor <Edie.Taylor@health.govt.nz>
Subject: Can we find out who wrote this webpage?

Hi Edie,

Is it possible to get some of the history behind the creation of this webpage please? If we can determine the authors, we will be able to get their side of the story around 'safe and reversible'.

<https://www.health.govt.nz/your-health/healthy-living/transgender-new-zealanders/transgender-new-zealanders-children-and-young-people>

Certainly the Swedish update is not in favour of using hormonal treatments in adolescents (I've not looked up the rest of the references yet).

Thanks

Dr Robyn Carey

Chief Medical Officer

robyn.carey@health.govt.nz

Mobile: S9(2)(a)

Manatū Hauora, 133 Molesworth Street Thorndon, Wellington 6011



RELEASED UNDER THE OFFICIAL INFORMATION ACT 1982

From: Robyn Carey
Sent: Monday, 22 August 2022 4:57 pm
To: Edie Taylor
Subject: RE: Webpage on Transgender New Zealanders: Children and young people

Thanks very much Edie, I think it might be time for a refresh of the page.

We'll wait for S&I and MedSafe info.

Thanks again

Ngā mihi
Dr Robyn Carey
Chief Medical Officer
robyn.carey@health.govt.nz
Mobile: S9(2)(a)
Manatū Hauora, 133 Molesworth Street Thorndon, Wellington 6011



From: Edie Taylor <Edie.Taylor@health.govt.nz>
Sent: Monday, 22 August 2022 4:16 pm
To: Robyn Carey <Robyn.Carey@health.govt.nz>
Subject: FW: Webpage on Transgender New Zealanders: Children and young people

From: Cara Pollock <@xxx> > **On Behalf Of** WebTeam
Sent: Monday, 22 August 2022 4:10 pm
To: Edie Taylor <Edie @xxx>
Subject: Re: Webpage on Transgender New Zealanders: Children and young people

Kia ora Edie,

So it looks like the only change that has been made to that page since it was first published in 2017 was the addition of the link to the guidelines on the right-hand side. I can't actually find a record of who requested the link be added, although I found an earlier request from David St George (who was in the Office of the Chief Medical Officer at the time) asking for it on some of the other transgender health pages. I suspect it was either someone in the OCCO or possibly the system flow team who asked for it to be added to the Children and young people page as well.

The page was originally developed by a working group -- the contact we had was someone in the Youth Health, Child and Family Programmes team, but I think it was owned by the Office of the Chief Medical Officer overall.

Hope that helps.

Ngā mihi,
Cara

From: Edie Taylor <Edie.t@xxx>
Sent: 22 August 2022 3:42 PM
To: WebTeam <webteam@health.govt.nz>
Subject: Webpage on Transgender New Zealanders: Children and young people

Kia ora team

Is it possible to find out who owns this page and to have a copy of the version history?

<https://www.health.govt.nz/your-health/healthy-living/transgender-new-zealanders/transgender-new-zealanders-children-and-young-people>

We are trying to determine who the original authors of the page were and who did the last update in 2020.

Ngā mihi

Edie Taylor (she/her)
Senior Advisor | Office of the Chief Clinical Officers
System Performance & Monitoring
Manatū Hauora, 133 Molesworth Street
Thorndon, Wellington 6011



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From: Sayali Pendharkar
Sent: Monday, 5 September 2022 4:17 pm
To: Timothy Jelleyman; Edie Taylor
Cc: Sharn Brassington-Crow
Subject: Re: Rapid evidence assessments and puberty blockers meds research

Thanks, Eddie. I had let Sharn know I will be sending comments through today. I was dragged into a few urgent things Thursday/Friday.

Tim, would be good to quickly catch up tomorrow. I can do 12 noon if that suits.

Ngā Mohican nui
 Sayali

From: Timothy Jelleyman <Timothy.Jellexxx@xxxxxx.xxxx.nz>
Sent: Monday, September 5, 2022 4:13:20 PM
To: Edie Taylor <Edie.Taylor@health.govt.nz>; Sayali Pendharkar <Sayali.Pendxxxxxx@xxxxxx.xxxx.nz>
Cc: Sharn Brassington-Crow <Sharn.Crow@health.govt.nz>
Subject: RE: Rapid evidence assessments and puberty blockers meds research

Thanks Edie

Kia ora Sayali – I am happy to discuss at any point and help clarify scope if there is any question about that. (In Wellington office tomorrow so brief conversation very easy to fit in if you are about.)

Ngā mihi
 Tim.

Dr Tim Jelleyman

Chief Clinical Advisor, Child and Youth Health
 Office of Chief Clinical Officers

S9(2)(a)

timothy.jellexxx@xxxxxx.xxxx.xx

Manatū Hauora, 133 Molesworth Street
 Thorndon, Wellington 6011

Auckland based. Regular MoH days Mon – Wed;
 Clinical days at Waitemāta : Thurs, Fri.
 Text me if your email needs priority attention.



From: Edie Taylor <Edie.Taylor@health.govt.nz>
Sent: Monday, 5 September 2022 4:04 pm
To: Sayali Pendharkar <Sayali.Pendharkxx@xxxxxx.xxvt.nz>
Cc: Timothy Jelleyman <Timothy.Jelleyman@health.govt.nz>; Sharn Brassington-Crow <Sharn.Crow@health.govt.nz>
Subject: FW: Rapid evidence assessments and puberty blockers meds research

Kia ora Sayali

Just following this up – are you able to let me know when we can expect this?

Many thanks.

Ngā mihi
Edie

Edie Taylor (she/her)
Senior Advisor | Office of the Chief Clinical Officers
System Performance & Monitoring
Manatū Hauora, 133 Molesworth Street
Thorndon, Wellington 6011



From: Robyn Carey <Robyn.Carey@health.govt.nz>
Sent: Monday, 5 September 2022 2:55 pm
To: Edie Taylor <Edie.Taylor@health.govt.nz>
Subject: RE: Rapid evidence assessments and puberty blockers meds research

Hi Edie,

Just checking what's happening with this?

I thought we were coordinating the response? Have we heard from Evidence, Research and Innovation yet about their research into this area.

Tim Jelleyman was going to review the webpages and he would be a good person to review any response we write.

Many thanks.

Ngā mihi
Dr Robyn Carey
Chief Medical Officer
robyn.carey@health.govt.nz
Mobile: S9(2)(a)
Manatū Hauora, 133 Molesworth Street Thorndon, Wellington 6011



From: Edie Taylor <Edie.Taylor@health.govt.nz>
Sent: Wednesday, 24 August 2022 9:29 am
To: Sayali Pendharkar <Sayali.Pendharkar@health.govt.nz>; Robyn Carey <Robyn.Carey@health.govt.nz>
Cc: Ian Town <Ian.Town@health.govt.nz>; Katrina McLaren <Katrina.McLaren@health.govt.nz>; Sharn Brassington-Crow <Sharn.Crow@health.govt.nz>
Subject: RE: Rapid evidence assessments and puberty blockers meds research

Thanks all. I have requested we get some additional time for the response.

I have also asked Sharn who is coordinating this response to pass on any comment from Medsafe to you as well Sayali. To keep everything together I have also attached the comments from Primary and Community Care and Policy.

Ngā mihi
Edie

Edie Taylor (she/her)
Senior Advisor | Office of the Chief Clinical Officers
System Performance & Monitoring
Manatū Hauora, 133 Molesworth Street
Thorndon, Wellington 6011



From: Sayali Pendharkar <Sayali.Pendharkar@health.govt.nz>
Sent: Wednesday, 24 August 2022 9:16 am
To: Robyn Carey <Robyn.Carey@health.govt.nz>
Cc: Ian Town <Ian.Town@health.govt.nz>; Edie Taylor <Edie.Taylor@health.govt.nz>; Katrina McLaren <Katrina.McLaren@health.govt.nz>
Subject: RE: Rapid evidence assessments and puberty blockers meds research

That would be great.

Thank You,

Kind Regards,
Sayali

Ngā mihi nui

Sayali

Dr Sayali Pendharkar, PhD (she/her)
Deputy Chief Science Advisor
Office of the Chief Science Advisor
Evidence, Research and Innovation
Email: sayali.pendharkar@health.govt.nz
Manatū Hauora, 133 Molesworth Street
Thorndon, Wellington 6011



From: Robyn Carey <Robyn.Carey@health.govt.nz>
Sent: Wednesday, 24 August 2022 9:12 am
To: Sayali Pendharkar <Sayali.Pendharkar@health.govt.nz>
Cc: Ian Town <Ian.Town@health.govt.nz>; Edie Taylor <Edie.Taylor@health.govt.nz>; Katrina McLaren <Katrina.McLaren@health.govt.nz>
Subject: RE: Rapid evidence assessments and puberty blockers meds research

Kia ora,

I'm not here tomorrow or Friday, so will see if we can get the deadline pushed out until later next week.

Many thanks.

Ngā mihi
Dr Robyn Carey
Chief Medical Officer
robyn.carey@health.govt.nz
Mobile: S9(2)(a)
Manatū Hauora, 133 Molesworth Street Thorndon, Wellington 6011



From: Sayali Pendharkar <Sayali.Pendharkar@health.govt.nz>
Sent: Wednesday, 24 August 2022 9:04 am
To: Robyn Carey <Robyn.Carey@health.govt.nz>

Cc: Ian Town <Ian.Town@health.govt.nz>

Subject: RE: Rapid evidence assessments and puberty blockers meds research

Kia ora Robyn,

Sure, happy to help with this. I will have a look at the correspondence. I see it is due today, but if possible could it please be pushed out to Friday this week? It will give me some time to review the evidence and the draft, noting that we need to address consumer concerns in the response.

Ngā mihi nui

Sayali

Dr Sayali Pendharkar, PhD (she/her)
Deputy Chief Science Advisor
Office of the Chief Science Advisor
Evidence, Research and Innovation
Email: sayali.pendharkar@health.govt.nz
Manatū Hauora, 133 Molesworth Street
Thorndon, Wellington 6011



From: Robyn Carey <Robyn.Carey@health.govt.nz>

Sent: Wednesday, 24 August 2022 7:47 am

To: Sayali Pendharkar <Sayali.Pendharkar@health.govt.nz>

Cc: Ian Town <Ian.Town@health.govt.nz>

Subject: RE: Rapid evidence assessments and puberty blockers meds research

Kia ora,

Many thanks Sayali. It has come to our attention via consumer correspondence that the following webpage may need refreshing, in particular this sentence: **Blockers are a safe and fully reversible medicine that may be used from early puberty through to later adolescence to help ease distress and allow time to fully explore gender health options.** <https://www.health.govt.nz/your-health/healthy-living/transgender-new-zealanders/transgender-new-zealanders-children-and-young-people#:~:text=Puberty%20blockers&text=Blockers%20are%20a%20safe%20and,fully%20explor e%20gender%20health%20options>.

It appears that some governments are changing their position on this matter to varying extents.

Although we have not been able to track down the author of this webpage, it seems that OCCO owned the page and that it was developed via a working party. I am hoping that we can refresh the page based on evidence and international trends, hence the request for help from Evidence, Research and Innovation.

I will forward you the correspondence separately.

Many thanks

Ngā mihi

Dr Robyn Carey

Chief Medical Officer

robyn.carey@health.govt.nz

Mobile: S9(2)(a)

Manatū Hauora, 133 Molesworth Street Thorndon, Wellington 6011



From: Sayali Pendharkar <Sayali.Pendharkar@health.govt.nz>

Sent: Tuesday, 23 August 2022 11:54 am

To: Robyn Carey <Robyn.Carey@health.govt.nz>

Cc: Ian Town <Ian.Town@health.govt.nz>

Subject: Rapid evidence assessments and puberty blockers meds research

Kia ora Robyn,

Dean (Rutherford) advised that you were in touch about Puberty blocker meds research specifically, and whether we could do rapid evidence assessments generally? Ian (Town) is currently on leave and I am picking this up on his behalf.

If you would prefer to discuss over Teams/in person, please let me know.

I look forward to hearing from you.

Ngā mihi nui

Sayali

Dr Sayali Pendharkar, PhD (she/her)

Deputy Chief Science Advisor

Office of the Chief Science Advisor

Evidence, Research and Innovation

Email: sayali.pendharkar@health.govt.nz

Manatū Hauora, 133 Molesworth Street

Thorndon, Wellington 6011



From: Sayali Pendharkar
Sent: Tuesday, 6 September 2022 2:34 pm
To: Timothy Jelleyman; Sharn Brassington-Crow; Robyn Carey; Edie Taylor
Subject: RE: DREP for puberty blocker meds and rapid evidence assessment

Follow Up Flag: Follow up
Flag Status: Completed

Thank you, Tim. That covers everything 😊

[@Sharn Brassington-Crow](#) thank you for coordinating this.

Best Regards,

Sayali

From: Timothy Jelleyman <Timothy.Jelleyman@health.govt.nz>
Sent: Tuesday, 6 September 2022 2:21 pm
To: Sharn Brassington-Crow <Sharn.Crow@health.govt.nz>; Robyn Carey <Robyn.Carey@health.govt.nz>; Sayali Pendharkar <Sayali.Pendharkar@health.govt.nz>; Edie Taylor <Edie.Taylor@health.govt.nz>
Subject: RE: DREP for puberty blocker meds and rapid evidence assessment

Thanks Sharn – to update, I have just met with Sayali.

In discussion with Sayali we proposed the following next steps:

- Adjust line in website in a way that acknowledges
- Develop Evidence brief in next 5 – 6 months
- Systematic Review/meta-analysis – propose this to be procured and follow

In the letter we should note we are amending the website information to reflect limits of evidence on reversibility and that further work to develop an evidence brief is planned. I will prioritise reviewing the letter shortly. (We will defer mention of any proposed Systematic Review as yet to be established).

The process to adjust website needs to be set in motion.

(Sayali – have I summarised correctly?)

Ngā mihi
Tim

Dr Tim Jelleyman

Chief Clinical Advisor, Child and Youth Health
Office of Chief Clinical Officers

S9(2)(a)

timothy.jelleyman@health.govt.nz

Manatū Hauora, 133 Molesworth Street
Thorndon, Wellington 6011

Auckland based. Regular MoH days: Mon – Wed;

Clinical days at Waitemāta : Thurs, Fri.

Text me if your email needs priority attention.



From: Sharn Brassington-Crow <Sharn.Crow@health.govt.nz>

Sent: Tuesday, 6 September 2022 2:07 pm

To: Robyn Carey <Robyn.Carey@health.govt.nz>; Sayali Pendharkar <Sayali.Pendharkar@health.govt.nz>; Edie Taylor <Edie.Taylor@health.govt.nz>

Cc: Timothy Jelleyman <Timothy.Jelleyman@health.govt.nz>

Subject: RE: DREP for puberty blocker meds and rapid evidence assessment

Kia ora koutou,

Thank you Robyn and Sayali for the help with this direct reply/on this topic.

I note the comments on action required following OCCO decisions.

I have slightly updated the below DREP, and updated the signatory to be Tim. Likely this will need further updating following discussions today, but otherwise will hand this over to Edie/OCCO ODDG for review/changes.

[FW 2130-2022 Fwd Enquiry regarding MOH guidance on puberty blockers 4F5E2C92F819ED11B83E00224811D365](#)

Ngā mihi,

Sharn Brassington-Crow ([he/him](#))

Advisor/Kaitohutohu | Ministerial Correspondence

Government Services | Government & Executive Services

Manatū Hauora

sharn.crow@health.govt.nz

133 Molesworth Street Thorndon, Wellington 6011



From: Robyn Carey <Robyn.Carey@health.govt.nz>
Sent: Tuesday, 6 September 2022 7:51 am
To: Sayali Pendharkar <Sayali.Pendharkar@health.govt.nz>
Cc: Timothy Jelleyman <Timothy.Jelleyman@health.govt.nz>; Ian Town <Ian.Town@health.govt.nz>; Dean Rutherford <Dean.Rutherford@health.govt.nz>; Edie Taylor <Edie.Taylor@health.govt.nz>; Sharn Brassington-Crow <Sharn.Crow@health.govt.nz>
Subject: RE: DREP for puberty blocker meds and rapid evidence assessment

Kia ora Sayali,

I agree with your comments, both in the email and in the DREP.

I understand you and Tim are meeting later today.

Tim and I are comfortable that this goes out in Tim's name, both for continuity with the CMO switch and as OCCO's resident paediatrician. I will of course update Joe Bourne during our overlap period next week.

Ngā mihi

Dr Robyn Carey

Chief Medical Officer

robyn.carey@health.govt.nz

Mobile: S9(2)(a)

Manatū Hauora, 133 Molesworth Street Thorndon, Wellington 6011



From: Sayali Pendharkar <Sayali.Pendharkar@health.govt.nz>
Sent: Monday, 5 September 2022 10:46 pm
To: Sharn Brassington-Crow <Sharn.Crow@health.govt.nz>
Cc: Timothy Jelleyman <Timothy.Jelleyman@health.govt.nz>; Ian Town <Ian.Town@health.govt.nz>; Dean Rutherford <Dean.Rutherford@health.govt.nz>; Edie Taylor <Edie.Taylor@health.govt.nz>; Robyn Carey <Robyn.Carey@health.govt.nz>
Subject: DREP for puberty blocker meds and rapid evidence assessment

Kia ora Sharn,

Please find attached my comments on the puberty blockers DREP. I agree with Robyn – we can better address the concerns raised by S9(2)(a), and update the information on Ministry's website focusing on latest evidence and international trends. I am also catching up with Tim tomorrow for his advice on what else we may need to consider here.

Additional thoughts below:

- We should undertake a formal systematic review and meta-analysis on evidence-to-date on puberty blockers similar to UK, Sweden, Finland

- Consider a wider conversation around using (more likely starting to collect) data from existing longitudinal studies in NZ (incl. health survey?)
- Conversation with PATHA to update their guidelines (dated 2018) particularly in light of the NICE Review...

By way of next steps I suggest the following:

- An evidence brief on puberty blockers to publish on Ministry's website
 - Office of the CSA will be getting an intern over November to February who could do this as part of their project
- Update Ministry webpage to remove the comment on safety and reversibility of puberty blockers, add in key references, list some of the commonly used off-label drugs

Keen to hear any thoughts/feedback on points above.

Ngā mihi nui

Sayali

Dr Sayali Pendharkar, PhD (she/her)

Deputy Chief Science Advisor

Office of the Chief Science Advisor

Evidence, Research and Innovation

Phone: S9(2)(a)

Email: sayali.pendharkar@health.govt.nz

Manatū Hauora, 133 Molesworth Street

Thorndon, Wellington 6011



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From: Sayali Pendharkar-Orpe
Sent: Monday, 12 September 2022 1:46 pm
To: Timothy Jelleyman
Cc: Office of the Chief Clinical Officers; Edie Taylor; Sharn Brassington-Crow
Subject: RE: Response for final sign-out - H2022010137

Categories: Tracked To Dynamics 365

Kia ora Tim,

Yes, ERI will lead the Evidence Brief piece. This will of course be done in close collaboration with you, and anybody else from OCCO that may need to be involved 😊

Ngā mihi nui

Sayali

Dr Sayali Pendharkar, PhD (she/her)
 Deputy Chief Science Advisor
 Office of the Chief Science Advisor
 Evidence, Research and Innovation
 Phone: S9(2)(a) [REDACTED]
 Email: sayali.pendharkar@health.govt.nz
 Manatū Hauora, 133 Molesworth Street
 Thorndon, Wellington 6011



From: Timothy Jelleyman <Timothy.Jelleyman@health.govt.nz>
Sent: Wednesday, 7 September 2022 2:59 pm
To: Office of the Chief Clinical Officers <occo@health.govt.nz>; Sayali Pendharkar <Sayali.Pendharkar@health.govt.nz>
Cc: Sharn Brassington-Crow <Sharn.Crow@health.govt.nz>; Edie Taylor <Edie.Taylor@health.govt.nz>
Subject: RE: Response for final sign-out - H2022010137

Good point. I have not been clear enough.

The bit we have committed to do quickly is re-phrase the MoH webpage (which I can lead under OCCO to put via the webpage management comms team), and then to develop an evidence brief to inform the MoH position – a slower piece of work under Evidence, Research and Innovation which I have discussed with Sayali – *Sayali, am I correct that ERI would lead this Evidence Brief piece?*

Maybe 'guidance' is the wrong word as I can see you are reading as referring to the referenced guidelines – which is the externally written document.

Alternative suggested wording for that paragraph/line: 'I can advise you that Manatū Hauora (the Ministry of Health) are in the process of revising the webpage in a way that acknowledges the current limits of available evidence. ...'

Dr Tim Jelleyman
Chief Clinical Advisor, Child and Youth Health
Office of Chief Clinical Officers
S9(2)(a)

timothy.jelleyman@health.govt.nz
Manatū Hauora, 133 Molesworth Street
Thorndon, Wellington 6011
Auckland based. Regular MoH days: Mon – Wed;
Clinical days at Waitemāta : Thurs, Fri.
Text me if your email needs priority attention.



From: Edith Bennett <Edith.Bennett@health.govt.nz> On Behalf Of Office of the Chief Clinical Officers
Sent: Wednesday, 7 September 2022 1:44 pm
To: Timothy Jelleyman <Timothy.Jelleyman@health.govt.nz>
Cc: Sharn Brassington-Crow <Sharn.Crow@health.govt.nz>; Edie Taylor <Edie.Taylor@health.govt.nz>
Subject: Re: Response for final sign-out - H2022010137

Kia ora Tim

Thank you for preparing the letter Sharn has included below.

Just one point from us before this goes out - can you please confirm there is an agreed work programme in place to make puberty blocker guidance clearer and who is leading this?

If this hasn't been finalised, I would advise that we omit this from the letter. Noting the current guidance is not Ministry developed, just endorsed.

Thank you!

Edith

Office of the Chief Clinical Officers

occo@health.govt.nz

Manatū Hauora, 133 Molesworth Street
Thorndon, Wellington 6011



From: Sayali Pendharkar-Orpe
Sent: Friday, 16 September 2022 10:49 am
To: Edie Taylor; Timothy Jelleyman
Subject: RE: Puberty blockers - update on webpage

Categories: Tracked To Dynamics 365

Excellent – thanks, Edie 😊

Ngā mihi nui

Sayali

Dr Sayali Pendharkar, PhD (she/her)
Deputy Chief Science Advisor
Office of the Chief Science Advisor
Evidence, Research and Innovation
Phone: S9(2)(a)
Email: sayali.pendharkar@health.govt.nz
Manatū Hauora, 133 Molesworth Street
Thorndon, Wellington 6011



From: Edie Taylor <Edie.Taylor@health.govt.nz>
Sent: Friday, 16 September 2022 10:48 am
To: Timothy Jelleyman <Timothy.Jelleyman@health.govt.nz>; Sayali Pendharkar-Orpe <Sayali.Pendharkar@health.govt.nz>
Subject: RE: Puberty blockers - update on webpage

Updated - <https://www.health.govt.nz/your-health/healthy-living/transgender-new-zealanders/transgender-new-zealanders-children-and-young-people>

Ngā mihi
Edie

Edie Taylor (she/her)
Senior Advisor | Office of the Chief Clinical Officers
System Performance & Monitoring
Manatū Hauora, 133 Molesworth Street
Thorndon, Wellington 6011





From: Edie Taylor
 Sent: Friday, 16 September 2022 10:30 am
 To: Timothy Jelleyman <Timothy.Jelleyman@health.govt.nz>; Sayali Pendharkar-Orpe <Sayali.Pendharkar@health.govt.nz>
 Subject: RE: Puberty blockers - update on webpage

Have sent through to the webteam to update – thanks both!

Ngā mihi

Edie Taylor (she/her)
 Senior Advisor | Office of the Chief Clinical Officers
 System Performance & Monitoring
 Manatū Hauora, 133 Molesworth Street
 Thorndon, Wellington 6011



From: Timothy Jelleyman <Timothy.Jelleyman@health.govt.nz>
 Sent: Thursday, 15 September 2022 9:02 pm
 To: Sayali Pendharkar-Orpe <Sayali.Pendharkar@health.govt.nz>; Edie Taylor <Edie.Taylor@health.govt.nz>
 Subject: RE: Puberty blockers - update on webpage

Thank you Sayali for that edit.
 Medsafe team (Derek) were also happy with the cut down wording without specific drug name mentioned.
 I will ask Edie Taylor in OCCO to progress the recommended wording to web team.

Kia ora Edie,
 If you are able to, would you progress this through web team?
 The final recommendation to go to web team is, as an update to the Puberty Blockers section of the page, :

[Transgender New Zealanders: Children and young people | Ministry of Health NZ](#)

Proposed wording adjustment:

Puberty blockers

For young people where these feelings continue into puberty or emerge during puberty, particularly if associated with distress, it is important to see a health professional. Puberty blockers are a medication that can be used to halt the progress of potentially unwanted puberty-related physical changes.

Blockers are sometimes used from early puberty through to later adolescence to allow time to fully explore gender health options. This is done under the guidance of a clinician who specialises in their use.

Service providers that can help access and provide more information about blockers include:

- paediatric services
- youth health services
- endocrinologists
- primary health care teams.

Dr Tim Jelleyman

Chief Clinical Advisor, Child and Youth Health
Office of Chief Clinical Officers

S9(2)(a)

timothy.jelleyman@health.govt.nz

Manatū Hauora, 133 Molesworth Street
Thorndon, Wellington 6011

Auckland based. Regular MoH days: Mon – Wed;

Clinical days at Waitemāta : Thurs, Fri.

Text me if your email needs priority attention.



From: Sayali Pendharkar-Orpe <Sayali.Pendharkar@health.govt.nz>

Sent: Wednesday, 14 September 2022 6:23 pm

To: Timothy Jelleyman <Timothy.Jelleyman@health.govt.nz>

Subject: RE: Puberty blockers - update on webpage

Hi Tim,

No problem at all. I think given Medsafe's response, I agree with you that we proceed with publishing the version you have shared below. One minor suggestion is splitting the 2nd paragraph into 2 sentences – have edited below.

Also, as I think you or Anne suggested, a meeting in the coming weeks would be useful to discuss the general logistics of such pieces of work :)

Kind Regards,

Sayali

Dr Sayali Pendharkar, PhD (she/her)
 Deputy Chief Science Advisor
 Office of the Chief Science Advisor
 Evidence, Research and Innovation
 Phone: S9(2)(a)
 Email: sayali.pendharkar@health.govt.nz
 Manatū Hauora, 133 Molesworth Street
 Thorndon, Wellington 6011



From: Timothy Jelleyman <Timothy.Jelleyman@health.govt.nz>
 Sent: Wednesday, 14 September 2022 5:45 pm
 To: Sayali Pendharkar-Orpe <Sayali.Pendharkar@health.govt.nz>
 Subject: FW: Puberty blockers - update on webpage

Kia ora Sayali – sorry about all the mail traffic; here is the detail from Medsafe.
 This also pushes me towards the simpler cut back version without any names of the drugs. What do you think?

e.g.

Puberty blockers

For young people where these feelings continue into puberty or emerge during puberty, particularly if associated with distress, it is important to see a health professional. Puberty blockers are a medication that can be used to halt the progress of potentially unwanted puberty-related physical changes.

Blockers are sometimes used from early puberty through to later adolescence to allow time to fully explore gender health options. This is done under the guidance of a clinician who specialises in their use.

Service providers that can help access and provide more information about blockers include:

- paediatric services
- youth health services
- endocrinologists
- primary health care teams.

Dr Tim Jelleyman
 Chief Clinical Advisor, Child and Youth Health
 Office of Chief Clinical Officers
 S9(2)(a)

timothy.jelleyman@health.govt.nz

Manatū Hauora, 133 Molesworth Street
 Thorndon, Wellington 6011

Auckland based. Regular MoH days: Mon – Wed;

Clinical days at Waitemāta : Thurs, Fri.

Text me if your email needs priority attention.



From: Derek Fitzgerald <derek.fitzgerald@health.govt.nz>
Sent: Wednesday, 14 September 2022 5:01 pm
To: Timothy Jelleyman <Timothy.Jelleyman@health.govt.nz>
Cc: Maria Storey <Maria.Storey@health.govt.nz>; Catherine Marnane <Catherine.Marnane@health.govt.nz>
Subject: RE: Puberty blockers - update on webpage

Thanks

From a regulatory point of view, providing information that an approved medicine can be used for an unapproved indication breaches section 20 of the Medicines Act 1981. This is because advertising (providing information about) an unapproved indication would make the medicine unapproved. In terms of section 20, providing information about an unapproved indication can be interpreted as advertising the availability of an unapproved medicine which is not permitted. The Act does not differentiate between the parties that could be providing such information. For instance, should the company marketing the medicine make such a claim, this would be a clear breach of the legislation, whereas an opinion piece by clinicians who were providing information about options is less likely to be a breach, or would be regarded as a lower level breach. If the Ministry advocated that certain medicines be used off-label, this could come in for criticism as a potential breach of the legislation. Important to note that where potentially controversial matters are concerned, there may be extra scrutiny of the legality of the Ministry's actions. You may wish to obtain a legal opinion on the information the Ministry publishes / wishes to publish on this.

Regards

Derek Fitzgerald
 Manager, Compliance Management Branch, Medsafe
 +64 (0)4 819 6866

From: Catherine Marnane <Catherine.Marnane@health.govt.nz>
Sent: Wednesday, 14 September 2022 9:05 am
To: Timothy Jelleyman <Timothy.Jelleyman@health.govt.nz>
Cc: Maria Storey <Maria.Storey@health.govt.nz>; Derek Fitzgerald <derek.fitzgerald@health.govt.nz>
Subject: RE: Puberty blockers - update on webpage

Kia ora Tim

Thank you for your email. Yes this page has created a number of queries over the years -I have been around for a long time!

I have forwarded your query to Maria Story, Acting Manager, Clinical Risk Management re the safety aspects. I have also included Derek Fitzgerald, Manager Compliance as I think it wise that he take a look at the wording related to prescribing an unapproved product.

Maria and Derek. Would you mind getting back to Tim with any comments you have.

Ngā mihi

Catherine

From: Timothy Jelleyman <Timothy.Jelleyman@health.govt.nz>
Sent: Tuesday, 13 September 2022 3:56 pm
To: Catherine Marnane <Catherine.Marnane@health.govt.nz>
Cc: Office of the Chief Clinical Officers <occo@health.govt.nz>; Edie Taylor <Edie.Taylor@health.govt.nz>; Sayali Pendharkar-Orpe <Sayali.Pendharkar@health.govt.nz>
Subject: Puberty blockers - update on webpage

Tēnā koe Catherine,

We have had a number of recent enquiries about one of the Manatū Hauora webpages, and specifically the information relating to puberty blockers.

There is a plan to review evidence, with Evidence, Research and Innovation leading work an Evidence Brief in the first instance. In the meantime we need to note some qualifications to the existing webpage reference to the safety and reversibility of Puberty Blockers in younger people (<18yrs), and here is a working draft of that.

For this we are requesting Medsafe team review and advise any further adjustments to this interim wording. You were suggested as a contact in Medsafe.

Ngā mihi

Tim.

[Transgender New Zealanders: Children and young people | Ministry of Health NZ](#)

Proposed wording adjustment:

Puberty blockers

For young people where these feelings continue into puberty or emerge during puberty, particularly if associated with distress, it is important to see a health professional. Puberty blockers are a medication that can be used to halt the progress of potentially unwanted puberty-related physical changes of an unwanted puberty.

Blockers are a safe and fully reversible medicine that may be used from early puberty through to later adolescence to help ease distress and allow time to fully explore gender health options. While this is not an exhaustive list of medications that may be prescribed (off-label) as puberty blockers, some that are commonly prescribed for adolescents (aged less than 18 years) are:

- Leuprorelin
- Goserelin

It is important to note that any off-label prescription remains at the discretion of the managing clinician. 'Off label' means these medications are either being prescribed for a different age group to those in the standard prescription group AND/OR for a different condition than what the medication has been approved for.

Although common side effects of these drugs (eg,...) are well known, high-quality, robust research is still required to confirm the long-term effects and reversibility of these blockers particularly in the younger age groups. This makes specialist clinical advice and oversight critical.

Service providers that can help access and provide more information about blockers include:

- paediatric services
- youth health services
- endocrinologists
- primary health care teams.

Dr Tim Jelleyman

Chief Clinical Advisor, Child and Youth Health
Office of Chief Clinical Officers

S9(2)(a)

timothy.jelleyman@health.govt.nz

Manatū Hauora, 133 Molesworth Street
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Auckland based. Regular MoH days: Mon – Wed;
Clinical days at Waitemāta : Thurs, Fri.

Text me if your email needs priority attention.



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133 Molesworth Street
PO Box 5013
Wellington 6140
New Zealand
T+64 4 496 2000

19 December 2022

s 9(2)(a)

By email: simon@fullyinformed.nz
Ref: s 9(2)(a)

Tēnā koe s 9(2)(a)

Response to your request for official information

Thank you for your follow up request under the Official Information Act 1982 (the Act) to Manatū Hauora (the Ministry of Health) on 16 October 2022 for information regarding puberty blockers. Please find a response to each part of your request below:

1. Additional documents not provided in H2022012382

I received a response to H2022012382 last week concerning the update to the MOH website on puberty blockers. In a chain of provided emails official refer to a) correspondence (presumably from a member of the public), and b) a "DREP".

1a) I request this original correspondence (which I believe should have fallen within the scope of my original request) and

1b) any other correspondence from members of the public (excluding myself and representatives of Fully Informed) on the topic of the safety and or reversibility of puberty blockers, within the last 6 months to MOH/Te Whatu Ora.

1c) responses from MOH/Te Whatu Ora officials to any of the above correspondence.

Manatū Hauora has identified six documents within scope of this part of your request. All documents are itemised in Appendix 1 and copies of the documents are enclosed. Where information is withheld, this is outlined in the Appendix and noted in the document itself. Where information is withheld under section 9 of the Act, I have considered the countervailing public interest in release in making this decision and consider that it does not outweigh the need to withhold at this time.

1d) I request clarification on what a "DREP" is.

"DREP" is an abbreviation of "direct reply". Direct replies are written responses to correspondence received by Manatū Hauora and Te Whatu Ora – Health New Zealand. This can also refer to written responses to correspondence received by the Ministers and delegated to the Ministry for a response.

*In an email dated Monday, 5 September 2022 10:46 pm with the subject line: DREP for puberty blocker meds and rapid evidence assessment Dr Pendarkhar writes:
"Please find attached my comments on the puberty blockers DREP"*

1e) I request these attached comments

Please refer to document 3 for a copy of Dr Pendharkar's comments. As a way of context, Dr Pendharkar's comments were provided as part of a peer-review process related to the drafting of a response to correspondence received by Manatū Hauora. Please refer to document 2 for a copy of the original correspondence, and document 4 for a copy of the finalised response from Manatū Hauora.

Officials refer to a systematic review on puberty blockers.

1f) I request all information on the status, timelines, procurement arrangements, parties involved, and scope of this systematic review.

The Ministry is currently developing an evidence brief with the aim of publishing on the Ministry website in the first half of 2023. As such please refer to this report once published at: www.health.govt.nz/.

2. Correspondence regarding news articles on puberty blockers.

In the last 2 months there have been a number of reports that mention puberty blockers in the New Zealand media. These are:

1. Newsroom: Parents of gender-questioning children in NZ being let down - Dr Sarah Donovan - 18 August

2. The Listener / NZ Herald: Identity crisis: Have we gone too far in letting kids change their gender? - Prof Charlotte Paul - 12 September (Herald)

3. Stuff: Puberty blockers still considered safe and reversible, health ministry says - s 9(2)(a) - 25 September

4. Radio NZ - Radio item - Number of children prescribed puberty blockers growing - s 9(2)(a) - 29 September

5. Radio NZ - Web - Puberty blocker use jumps as expert backs results - s 9(2)(a) - 29 September.

(Also syndicated to 1News web: NZ puberty blocker medication use rises, expert opinion mixed)

In addition, there was an in-depth report on MOH's position on puberty blockers:

6. Gender Clinic News: On the defensive - s 9(2)(a) - 23 September

2a) I request any MOH/Te Whatu Ora communications that reference or otherwise discuss these reports listed above (1-6) (excluding those provided in H2022012382).

Manatū Hauora has identified five documents within scope of this part of your request. All documents are itemised in Appendix 1 and copies of the documents are enclosed. Where information is withheld, this is outlined in the Appendix and noted in the document itself. Where information is withheld under section 9 of the Act, I have considered the countervailing public interest in release in making this decision and consider that it does not outweigh the need to withhold at this time.

A relevant OIA response also in scope of your request is published on the Ministry website here: www.health.govt.nz/system/files/documents/information-release/h2022013005_response.pdf.

3. Contractual details for "updated national guidelines for gender-affirming health care"

In a previous OIA request (23 May) to Hon Dr Ayesha Verrall (AVOIA25) my request included details of the budgeted "updated national guidelines for gender-affirming health care".

This part of your request is refused under section 18(g)(i) of the Act as the information requested is not held by Manatū Hauora and there are no grounds for believing it is held by another agency subject to the Act.

3a) I request all information related to the procurement, contract, workplan,

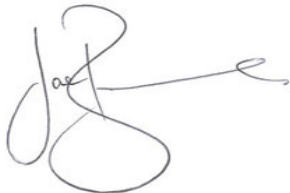
timeframes, terms of reference, current status, parties involved, and drafts of the guidelines update.

Information within scope of this part of your request is withheld in full under section 9(2)(f)(iv) of the Act to protect the constitutional conventions that protect the confidentiality of advice tendered by Ministers and officials.

Under section 28(3) of the Act, you have the right to ask the Ombudsman to review any decisions made under this request. The Ombudsman may be contacted by email at: info@ombudsman.parliament.nz or by calling 0800 802 602.

Please note that this response, with your personal details removed, may be published on the Manatū Hauora website at: www.health.govt.nz/about-ministry/information-releases/responses-official-information-act-requests.

Nāku noa, nā



Dr Joe Bourne
Chief Medical Officer

Appendix 1: List of documents for release

#	Date	Document details	Decision on release
1	12 August 2022	Correspondence: Information on puberty blocker drugs and gender conversion practices being carried out in NZ.	Some information withheld under section 9(2)(a) of the Act, to protect the privacy of natural persons.
2	12 August 2022	Correspondence: Puberty blockers for children.	
3	5 September 2022	Direct Reply: H2022010137 (DRAFT)	Some information withheld under section 9(2)(g)(i) of the Act to maintain the effective conduct of public affairs through the free and frank expression of opinions by or between or to Ministers and officers and employees of any public service agency. Some information deemed out of scope.
4	7 September 2022	Direct Reply: H2022010137	Some information withheld under section 9(2)(a) of the Act.
5	13 September 2022	Direct Reply: H2022010138	
6	19 September 2022	Correspondence: Information request regarding transgender healthcare information on website.	
7	19 September 2022	Correspondence: Re: Advice for puberty blockers media query please: s 9(2)(a) RNZ and Gender Clinic News – puberty blockers	
8	20 September 2022		
9	20 September 2022	Correspondence: Advice for media query please: s 9(2)(a) Gender Clinic News - youth gender dysphoria.	
10	21 September 2022		
11	23 September 2022	Correspondence: MoH media response – s 9(2)(a) , Stuff, Puberty blockers info on MOH site	

----- Original Message -----

From: Swasti Arya <swasti.arya@parliament.govt.nz>;
Received: Fri Aug 12 2022 16:50:33 GMT+1200 (New Zealand Standard Time)
To: Ministerials <ministerials@health.govt.nz>; Ministerials <ministerials@health.govt.nz>;
Subject: FW: (2138-2022)FW: INFORMATION ON PUBERTY BLOCKER DRUGS AND GENDER CONVERSION PRACTISES BEING CARRIED OUT IN NZ

Kia ora team,

Another one for you to progress as DREP please.

Ngā mihi,



Swasti Arya (she/her)
Private Secretary, Te Whatu Ora – Health New Zealand
Office of Hon Dr Ayesha Verrall | Associate Minister of Health
M: **S9(2)(a)**
Email: Swasti.Arya@parliament.govt.nz

From: **S9(2)(a)**
Sent: Thursday, 11 August 2022 10:11 PM
To: Hon Andrew Little <Andrew.Little@parliament.govt.nz>
Cc: Hon Dr Ayesha Verrall <Ayesha.Verrall@parliament.govt.nz>; Dr Shane Reti <Shane.Reti@parliament.govt.nz>; Dr Elizabeth Kerekere <Elizabeth.Kerekere@parliament.govt.nz>; David Seymour <David.Seymour@parliament.govt.nz>; Debbie.Ngarewa-Parker@parliament.govt.nz
Subject: INFORMATION ON PUBERTY BLOCKER DRUGS AND GENDER CONVERSION PRACTISES BEING CARRIED OUT IN NZ

To: Honourable Andrew Little, Minister of Health

On behalf of the LGB Alliance Aotearoa New Zealand, a group representing the Gay, Lesbian, and Bisexual community, I wish to express our concern over the use of puberty blockers being prescribed as a treatment for “gender” issues for children and youth under the age of 18.

Recently, the FDA has issued a label warning to be added regarding the risk of puberty blockers

“The Food and Drug Administration (FDA) has added a warning about the risk of pseudotumor cerebri (idiopathic intracranial hypertension) to the labeling for gonadotropin releasing hormone (GnRH) agonists that are approved for the treatment of central precocious puberty in pediatric patients. These products include Lupron Depot-Ped (leuprolide acetate), Fensolvi (leuprolide acetate), Synarel (nafarelin), Supprelin LA (histrelin) and Triptodur (triptorelin). The new warning includes recommendations to monitor patients taking GnRH agonists for signs and symptoms of pseudotumor cerebri, including headache, papilledema, blurred or loss of vision, diplopia, pain behind the eye or pain with eye movement, tinnitus, dizziness and nausea.”

[American Academy of Pediatrics July 1, 2022](#)

The world’s largest pediatric gender clinic, the Gender Identity Development Service (GIDS) at the Tavistock and Portman NHS Trust in the UK, is being shut down due to fears over patient safety. This announcement follows serious concerns regarding patient safety in recent years with regards to the gender affirmation model of care, including concerns raised by whistleblowers, patients and their parents, clinicians, and the UK Health Secretary.

The closure of GIDS by NHS England followed recommendations issued by Dr Hillary Cass who is chair of an Independent Review of GIDS commissioned by the NHS. Dr Cass has deemed the gender

affirmation model at GIDS as “not a safe or viable long-term option”. Given the particular uncertainties regarding long-term outcomes of medical intervention, and the broader knowledge gaps in this area, there is an imperative to build research capacity into the national network. This research capacity is needed to provide ongoing appraisal of new literature and rapid translation into clinical practice, to continue to identify areas of practice where further research is needed, and to develop a research portfolio that will inform policy on assessment, support and clinical care of children with gender dysphoria, from presentation through to appropriate social, psychological and medical management..

“Given the particular uncertainties regarding long-term outcomes of medical intervention, and the broader knowledge gaps in this area, there is an imperative to build research capacity into the national network. This research capacity is needed to provide ongoing appraisal of new literature and rapid translation into clinical practice, to continue to identify areas of practice where further research is needed, and to develop a research portfolio that will inform policy on assessment, support and clinical care of children with gender dysphoria, from presentation through to appropriate social, psychological and medical management.”

“A further concern is that adolescent sex hormone surges may trigger the opening of a critical period for experience-dependent rewiring of neural circuits underlying executive function⁶ (i.e., maturation of the part of the brain concerned with planning, decision making and judgement). If this is the case, brain maturation may be temporarily or permanently disrupted by puberty blockers, which could have significant impact on the ability to make complex risk-laden decisions, as well as possible longer-term neuropsychological consequences. To date, there has been very limited research on the short-, medium- or longer-term impact of puberty blockers on neurocognitive development. In light of these critically important unanswered questions, I would suggest that consideration is given to the rapid establishment of the necessary research infrastructure to prospectively enrol young people being considered for hormone treatment into a formal research programme with adequate follow up into adulthood, with a more immediate focus on the questions regarding puberty blockers. The appropriate research questions and protocols will need to be developed with input from a panel of academics, clinicians, service users and ethicists. Without an established research strategy and infrastructure, the outstanding questions will remain unanswered and the evidence gap will continue to be filled with polarised opinion and conjecture, which does little to help the children and young people, and their families and carers, who need support and information on which to make decisions.”

Dr Hillary Cass – Independent Review of Gender Identity Services for Children and Young People

Dr Cass found that GIDS had been captured by Rainbow agenda-driven political lobby groups to the point where vulnerable children and youths were being forced into affirmation and medical treatment which included puberty blockers, cross sex hormones and surgery, rather than an approach based on unbiased counselling.

A Dutch paper (1) notes that, for gender dysphoric children the more likely psychosexual outcome in adulthood is a homosexual orientation without gender dysphoria (i.e. transing the gay away). Evidence (2) suggests that many boys whose childhood gender dysphoria recedes with puberty will grow up to be bisexual or homosexual. Another study of males (3) indicates that bisexual/homosexual is far greater than base rates in the general male population, with 63.6% of boys with gender identity disorder being same-sex attracted. This suggests that a non-heterosexual orientation is particularly likely among gender dysphoric boys. One study (4) of detransitioners found that a large proportion of them believed, in hindsight, that they were suffering internalised homophobia. In a 20-year follow-up (5) of children, it was found that adult homosexuality was 8-15 times higher for participants with a gender variance.

1 Wallien, M.S. & Cohen-Kettenis P.T. (2008) Psychological Outcome of Gender Dysphoric Children. *J Am Acad Child Adolesc Psychiatry* 47 (12):1413-23

2 Kattiala-Heino, R., Bergman, H., Tyolajarvi, M., & Frisen, L., (2018) Gender Dysphoria in Adolescent: Current Perspectives. *Adolescent Health, Medicine & Therapeutics* 9, 31-41.

3 Singh, D. (2012). A follow-up study of boys with gender identity disorder. Doctoral thesis, University of Toronto.

4 Littman, L., (2021). Individuals Treated for Gender Dysphoria with Medical and/or Surgical Transition Who Subsequently Detransitioned: A Survey of 100 Detransitioners. *Arch Sex Behav*.

5 Steensma, T.D., van der Ende, J., Verhuist, F.C. & Cohen-Kettenis, P.T. (2013). Gender Variance in Childhood and Sexual Orientation in Adulthood: A Prospective Study. *J Sex Med* (11): 2723-2733.

Comments by clinicians at GIDS have been recorded saying “soon, there will be no gay children left” due to the excessive number of young people treated who would probably grow up to be LGB. We regard this as anti-homosexual conversion therapy by medical intervention. We are extremely concerned this has happened in the UK and would like confirmation that the same, or similar, is not happening here in New Zealand.

We request the following information for, and conformation of, that:

- the Ministry of Health guidelines in this respect be updated to warn of the risks of Lupron and other puberty blockers
- gender clinics in New Zealand be carefully investigated to ensure children are not being rushed into medicalisation prior to receiving in-depth, appropriate counselling
- records kept by New Zealand gender clinics are regularly audited

We look forward to hearing back from you and receiving the results of those investigations.

Kind regards,

S9(2)(a)

LGB Alliance Aotearoa New Zealand – Executive Committee Member

RELEASED UNDER THE OFFICIAL INFORMATION ACT 1982

Tēnā koe.

I write in relation to the Ministry of Health's advice that 'puberty blockers are considered to be safe and fully reversible' for use in adolescents. <https://www.health.govt.nz/your-health/healthy-living/transgender-new-zealanders/transgender-new-zealanders-children-and-young-people>

Questionable Guidance Document

I see that a previous OIA enquired about the clinical evidence on which the Ministry of Health bases this statement. The OIA response from the Ministry (at bottom of this letter) referenced a document authored by PATHA. A peer review of their guidance document reveals bias towards gender affirmation/medicalisation approach of gender dysphoric children. I write now because of the pending conversion therapy ban and its ambiguities, which might criminalise a parent for declining their child from access to puberty blockers.

The guidelines include the following uncited, and emotive statement, that '*withholding or delaying gender affirming treatment is not considered a neutral option, as this may cause harm by exacerbating any gender dysphoria or mental health problems. This is no different from harm that can be caused by withholding or delaying other medically necessary care.*' This is an alarmist and hyperbolic opinion. The guideline offers no reference of statistic in support of this statement.

The guideline then states '*gender affirming healthcare may include provision of puberty blockers in children and adolescents, and hormone therapy in older adolescents and adults*' and cites a single study in support of this claim. And yet, any peer review of the guidelines, in comparison to other systematic reviews such as those published by NICE in March 2021, demonstrate that it's not clear what (if any) benefit is offered by puberty blockers, and that the Ministry needs to conduct due diligence and review the evidence and the statement on the Ministry's website.

The NICE review I mention outlines a classic systematic approach and notes the paucity and low quality evidence available regarding the efficacy of puberty blockers for children and adolescents who exhibit symptoms of gender dysphoria. A summary report is available here:

https://segm.org/NICE_gender_medicine_systematic_review_finds_poor_quality_evidence

Meanwhile, the PATHA guideline states it '*was produced in collaboration with trans community members and after consultation with many services and health professionals throughout Aotearoa, New Zealand, who work professionally to advance healthcare for trans people*'. This doesn't hold up to methodological scrutiny as expected for a Ministry endorsed guideline/evidence base.

There is acknowledgement here in New Zealand that little is known about the efficacy or long term effects of puberty blockers for treating gender dysphoria in children. Otago University are calling for urgent funding for research to find the most effective interventions for children with gender dysphoria.

<https://www.otago.ac.nz/news/news/otago824539.html>

International Guidance

The Ministry OIA response also referenced page 18 of WPATH guidelines, which have a more balanced approach and stress that '*Before any physical interventions are considered for adolescents, extensive exploration of psychological, family, and social issues should be undertaken, as outlined above. The duration of this exploration may vary considerably depending on the complexity of the situation.*'

A recent interview with Dr. Marci Bowers, president elect of WPATH and Dr Erica Anderson, also on the WPATH board, highlighted they both had concerns with any urgency to medicalise adolescents with gender dysphoria. <https://bariweiss.substack.com/p/top-trans-doctors-blow-the-whistle> and Sweden's Karolinska

Hospital has moved away from the use of puberty blockers over 'concerns over medial harm and uncertain benefits' https://segm.org/Sweden_ends_use_of_Dutch_protocol.

Clarity of information on drugs used

The MOH website does not specify which drugs are used. I suggest you specify the range of drugs currently used for the purpose of puberty blocking of transgender youth in New Zealand. I also suggest, to avoid false reassurance, that you note that these drugs have not been approved for this purpose, but instead are being used off label. To do otherwise is deceptive by omission.

I have reviewed the medsafe guidelines for the various GnRH agonists drugs. I.e. Zoladex¹, Goserelin-Teva² and Lucrin.

According to medsafe, Zoladex/Goserelin should not be used in children. Yet, it is referenced by this guidance document which is also co-authored by one of the authors of your cited guidelines, Rachel Johnson and was peer reviewed by PATHA. https://www.nzdoctor.co.nz/sites/default/files/2021-06/HTT_Gender-affirming%20healthcare.pdf

Therefore, is the Ministry taking its guidance from those who are giving guidance that contradicts medsafe?

Medsafe states that Lucrin (aka leuprorelin acetate) is indicated for used in children with precocious puberty: <https://medsafe.govt.nz/consumers/cmi/l/lucrin-pds.pdf>. Lucrin is described by MIMs as Cancer Hormone Therapy / Trophic Hormones & Related Synthetic Drugs. There is no discussion of the treatment of adolescent gender dysphoria in the medsafe guidelines.

According to medsafe, bone mineral density changes can occur during any hypo-oestrogenic state. Bone mineral density loss **may** be reversible after withdrawal of leuprorelin acetate.

Pseudotumor cerebri (PTC) / idiopathic intracranial hypertension has been reported in paediatric patients receiving leuprorelin acetate but this is also not stated alongside the claim of 'safe and fully reversible'.

Furthermore, medsafe note '*psychiatric events have been reported in paediatric patients taking GnRH agonists. Post-marketing reports with this class of medicines include symptoms of emotional lability, such as crying, irritability, impatience, anger and aggression. A definitive cause and effect relationship between the treatment with GnRH agonists and the occurrence of these events has not been established. Monitor for development or worsening of psychiatric symptoms during treatment with leuprorelin acetate*'. While MIMs note the drug is associated with increased 'risk of diabetes and certain CV diseases' in adult males (granted, a different population group but not a disproven risk in children/adoloscents).

None of this is mentioned on the Ministry's website, despite it being a medsafe caution, despite the growing international scrutiny including the UK's Cass report, and despite the recognition that this population group characteristically has higher prevalence of mental health distress than their peers.

In summary, I ask that the Ministry of Health:

- conduct it's own independent review into the safety of puberty blockers without the conflict of interest of a quasi medical/lobby group
- review the content of your webpage, in particular- please list the range of GnRH agonists drugs currently being used off label in New Zealand for the purpose of puberty blocking for children with gender dysphoria (and note that it is off label use that is occurring)

¹ Medsafe guidance for Zoladex which notes it is not for use in children <https://medsafe.govt.nz/consumers/cmi/z/zoladex3.pdf>

² Medsafe guidance for Goserelin-Teva which notes it is not for use in children <https://www.medsafe.govt.nz/Profs/Datasheet/G/Goserelin108implant.pdf>

- remove the conclusive statement that they are 'safe and fully reversible'
- seek alternative viewpoints to ensure robust policies for transgender healthcare, particularly if you wish to expand the scope of practice from specialist services to primary care.

I am not opposed to transgender healthcare, I fully support appropriate **healthcare** for the appropriate people. For some this may include puberty blockers, cross sex hormones and surgery. But the Ministry must do its due diligence or risk impacting right 7 of the HDC Code; the right to an informed choice and give informed consent. I.e. If the Ministry endorses puberty blockers as safe and fully reversible³, and they are not, then this is a conflict to informed consent.

Can you please advise me of your response to my suggestions and concerns?

Ngā mihi

S9(2)(a)

Previous OIA

H202007421

Dear S9(2)(a)

Response to your request for official information

Thank you for your request under the Official Information Act 1982 (the Act) to the Ministry of Health (the Ministry) on 26 September 2020 for:

"On what clinical and evidential basis do you state (in reference to puberty blockers) that they are a "safe and fully reversible medicine" when the NHS guidance in the UK states that "Little is known about the long-term side effects of hormone or puberty blockers in children with gender dysphoria"

The Ministry refers to the *Guidelines for Gender Affirming Healthcare for Gender Diverse and Transgender Children, Young People and Adults in Aotearoa New Zealand* available on the University of Waikato's Research Commons' website:

<https://researchcommons.waikato.ac.nz/handle/10289/12160>. This guide for gender-affirming health care was developed by an independent group of health professionals and community stakeholders and states on page 29 that 'puberty blockers are considered to be fully reversible'. The Ministry also notes that Standards of Care developed by the World Professional Association for Transgender Health (WPATH) lists the use of GnRH analogues to suppress estrogen or testosterone production and consequently delay the physical changes of puberty as 'fully reversible intervention'. Please refer to page 18 at the following link:

<https://www.wpath.org/publications/soc>.

It is important to note that the Ministry's website is intended to provide general health advice. For the treatment of young transgender New Zealanders, it is the responsibility of the treating clinician to consider the appropriateness of a particular treatment for a particular patient, and to ensure that the patient is informed of the risks and benefits associated with that treatment. Informed consent should be obtained by the clinician from the patient before the choice is made

³ Noting: time is not reversible. Therefore time spent on blockers is time that disrupts the normal development of a child, and the sociological and psychological development that occurs with it.

to prescribe the medicine.

I trust this information fulfils your request. Under section 28(3) of the Act you have the right to ask the Ombudsman to review any decisions made under this request.

Please note that this response, with your personal details removed, may be published on the Ministry website.

Yours sincerely

Dr Andrew Simpson

Chief Medical Officer

RELEASED UNDER THE OFFICIAL INFORMATION Act 1982

133 Molesworth Street
PO Box 5013
Wellington 6140
New Zealand

T+64 4 496 2000

13 September 2022

S9(2)(a)

Ref. H2022010138

Tēnā koe S9(2)
(a)

Thank you for your email of 11 August 2022 to the Minister of Health, Hon Andrew Little, about the availability of puberty blockers for those under 18 years old. Your correspondence was referred to the Associate Minister of Health, Hon Ayesha Verrall, as the matters you raise fall within her portfolio responsibilities. The Minister has asked that I respond to you directly.

I note your comments on information provided by Manatū Hauora (the Ministry of Health) and that this doesn't accurately represent current evidence for use of puberty blockers. I can confirm that Manatū Hauora is in the process of revising its webpage in a way that acknowledges the current limits of available evidence. Additionally, work on an evidence brief is planned to support this area over the next few months. Updated information will be found on the Manatū Hauora website in the future at: www.health.govt.nz/your-health/healthy-living/transgender-new-zealanders/transgender-new-zealanders-children-and-young-people.

It is important to note that Manatū Hauora intends to provide general health advice on its website. Treating clinicians are responsible for considering the appropriateness of a particular treatment for an individual patient. The use of any medicine or treatment is a matter for discussion between a treating clinician and their patient.

It is important that health services meet the needs of all New Zealanders, with inclusiveness and dignity for all. We are committed to providing better access, support and safe treatment for rainbow communities through our health system and ensuring the system is responsive to the needs of transgender, intersex, and gender-diverse people.



Dr Timothy Jelleyman
Chief Clinical Advisor, Child and Youth Health Office of Chief Clinical Officers

cc Dr Robyn Carey
Chief Medical Officer



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S9(2)(a)

Ref. H2022010137

Tēnā koe S9

Thank you for your email of 12 August 2022 to the Associate Minister of Health, Hon Dr Ayesha Verrall, about guidance on puberty blockers. The Minister has asked that I respond to you directly. I appreciate you taking the time to write.

I acknowledge your interest in gender affirming healthcare for children and young people. I can see this is an issue you feel strongly about, and I would like to thank you for your advocacy.

As noted on Manatū Hauora's website and commented on by you, puberty blockers are a safe and fully reversible medicine that may be used from early puberty through to later adolescence to help ease distress and allow time to explore gender health options fully. It is important to note that the Gender Affirming (genital) Surgery Service is limited to those 18 years or older. You can find the Ministry's healthcare advice for transgender children and young people in Aotearoa here: www.health.govt.nz/your-health/healthy-living/transgender-new-zealanders/transgender-new-zealanders-children-and-young-people.

I am advised that this information remains appropriate and is further supported by the Guidelines for Gender Affirming Healthcare for Gender Diverse and Transgender Children, Young People and Adults in Aotearoa New Zealand, which is available here: researchcommons.waikato.ac.nz/handle/10289/13101. This is also supported by the Standards of Care developed by the World Professional Association for Transgender Health, which can be found here: www.wpath.org/publications/soc.

It is important to note that the Ministry intends to provide general health advice on its website. Treating clinicians are responsible for considering the appropriateness of a particular treatment for an individual patient. The use of any medicine or treatment is a matter for discussion between a treating clinician and their patient. When an approved medicine is prescribed for a different use or condition, patient age, dose or route, it is considered to be an off-label use. I note that Section 25 of the Medicines Act 1981 allows for such off-label prescribing.

I note that Te Whatu Ora is responsible for assessing the health needs of their populations and making decisions about the services they provide, including the clinical management of individual people. The Pharmaceutical Management Agency (Pharmac) is the New Zealand government agency that decides which medicines to publicly fund in New Zealand. Medsafe is the authority responsible for the regulation of medicines in New Zealand, this includes making sure medicines meet safety, quality and performance standards and monitoring reactions to medicines.

As you may be aware, Section 36 of the Care of Children Act 2004 outlines requirements for a child's consent to medical treatment or procedure. It is important to ensure that patients are fully

Commented [SP1]: Long-term effects are unknown particularly cardiovascular, bone density, etc.

Commented [SP2]: S9(2)(g)(i)

Commented [SP3]: In light of the NICE Review and independent Cass Report, Sweden, Finland, Canada have revised their guidelines/advice referring to puberty blockers as experimental drugs

Commented [SP4R3]: Sweden updated its policy in 2021 – hormonal therapy will not be initiated in gender dysphoric individuals aged under 16

Commented [SP5]: Might be good to list commonly prescribed off-label medicines for this

informed of their options (including any benefits, risks and alternatives) to enable them to make an informed choice and give informed consent. The Code of Health and Disability Services Consumers' Rights establishes the rights of all patients to be fully informed, to make an informed choice, and to give informed consent. The Code notes that every consumer must be presumed competent to make an informed choice and give informed consent, unless there are reasonable grounds for believing that the consumer is not competent.

It is important that health services meet the needs of all New Zealanders, with inclusiveness and dignity for all. Distress that can be caused by gender incongruence can be effectively reduced when access to timely, gender-affirming health care is available. I note that each person's gender expression (how they present to the world) is unique, and individual transition goals may include different aspects of social, medical or surgical care. We are committed to providing better access, support and treatment for rainbow communities through our health system and ensuring the system is responsive to the needs of transgender, intersex, and gender-diverse people.

Thank you again for taking the time to write. I hope this information is useful, and I wish you well.

Nāku noa, nā

Dr Robyn Carey
Chief Medical Officer

Commented [SBC6]: From H2022003725, may need altering to this writers' concerns but covers most of their comments

Commented [SP7]: S9(2)(g)(i)

Commented [SP8R7]: More information needs to be made available on Ministry website – an evidence-brief/systematic review (and meta-analyses) would be useful.

RELEASED UNDER THE OFFICIAL INFORMATION Act 1982

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S9(2)(a)

Ref. H2022010137

Tēnā koe S9(2)(a)

Thank you for your email of 12 August 2022 to the Associate Minister of Health, Hon Dr Ayesha Verrall, about guidance on puberty blockers. The Minister has asked that I respond to you directly. I appreciate you taking the time to write.

I acknowledge your interest in gender affirming healthcare for children and young people and your concern that information provided doesn't accurately represent current evidence. I can see this is an issue you feel strongly about, and I would like to thank you for your advocacy.

I can advise you that Manatū Hauora (the Ministry of Health) are in the process of making puberty blocker guidance on their website clearer. Updated guidance will be better aligned with current limits of available evidence. Additionally, work on an evidence brief is planned to support this over the next few months. Updated information will be found on the Manatū Hauora website in the future at: www.health.govt.nz/your-health/healthy-living/transgender-new-zealanders/transgender-new-zealanders-children-and-young-people.

It is important to note that Manatū Hauora intends to provide general health advice on its website. Treating clinicians are responsible for considering the appropriateness of a particular treatment for an individual patient. The use of any medicine or treatment is a matter for discussion between a treating clinician and their patient. When an approved medicine is prescribed for a different use or condition, patient age, dose or route, it is considered to be an off-label use. I note that Section 25 of the Medicines Act 1981 allows for such off-label prescribing.

As you may be aware, Section 36 of the Care of Children Act 2004 outlines requirements for a child's consent to medical treatment or procedure. It is important to ensure that patients are fully informed of their options (including any benefits, risks and alternatives) to enable them to make an informed choice and give informed consent. The Code of Health and Disability Services Consumers' Rights establishes the rights of all patients to be fully informed, to make an informed choice, and to give informed consent. The Code notes that every consumer must be presumed competent to make an informed choice and give informed consent, unless there are reasonable grounds for believing that the consumer is not competent.

It is important that health services meet the needs of all New Zealanders, with inclusiveness and dignity for all. We are committed to providing better access, support and treatment for rainbow communities through our health system and ensuring the system is responsive to the needs of transgender, intersex, and gender-diverse people.

Thank you again for taking the time to write. I hope this information is useful, and I wish you well.

Nāku noa, nā

A handwritten signature in blue ink, appearing to read "T. Jelleyman".

Dr Timothy Jelleyman
Chief Clinical Advisor, Child and Youth Health
Office of Chief Clinical Officers

cc Dr Robyn Carey
Chief Medical Officer

RELEASED UNDER THE OFFICIAL INFORMATION ACT 1982

----- Original Message -----

From: S9(2)(a)

Received: Mon Sep 19 2022 20:02:50 GMT+1200 (New Zealand Standard Time)

To: OIA Requests <oiagr@health.govt.nz>; OIA <oiagr@health.govt.nz>;

Subject: Information request regarding transgender healthcare information on website

To the OIA team, Ministry of Health,

On 16 September 2022, a page on your website relating to information on transgender children and young people: <https://www.health.govt.nz/your-health/healthy-living/transgender-new-zealanders/transgender-new-zealanders-children-and-young-people> .

The updated changed the following text from:

"Blockers are a safe and fully reversible medicine that may be used from early puberty through to later adolescence to help ease distress and allow time to fully explore gender health options."

to the following:

"Blockers are sometimes used from early puberty through to later adolescence to allow time to fully explore gender health options. This is done under the guidance of a clinician who specialises in their use."

This is a significant change in the information that is presented, notably that the claim that blockers are a safe and fully reversible medicine has been removed.

As a result, I would like to request under the Official Information Act the following information:

1) Internal communications relating to this change in the information present on this page of the website.

2) Any external communications relating to this change, for example, any consultation made with other government organisations, political figures, medicine professional groups, medical industry associations, transgender community organisations or other relevant groups if there has been any discussion of this information change with people outside the Ministry of Health.

To clarify this request and keep it narrow to aid you in finding information, I am seeking only information relating to the decision to change the medical advice presented on the website. I am not seeking any e-mails relating to e.g. internal communications team or website team signoff to put it on the website if they aren't relevant to the medical/policy decision-making. Basically, I'm trying to find out the reasoning for this change, as it is not present on the website.

Thank you for your consideration of this request. Please feel free to contact me if you have any questions or clarifications or need further information.

Kind regards,

S9(2)(a)

From: Steve Barnes
Sent: Monday, 19 September 2022 7:11 pm
To: Edie Taylor; Timothy Jelleyman; Danya Levy; Sayali Pendharkar; Jo Elvidge; Jenna Osborne-Taylor
Subject: Re: Advice for puberty blockers media query please: s 9(2)(a) RNZ and Gender Clinic News - puberty blockers

Kia ora tātou,

I can't speak to any of the clinical info but I can confirm that when my team was working on trans health issues last year PATHA advised us that they'd be updating their guidelines following SOC8. I haven't heard otherwise so it's most likely still the plan.

Steve

Steve Barnes
 Group Manager, Family and Community Health Policy
 System Strategy and Policy
 Ministry of Health
 Mobile: s9(2)(a)
<http://www.health.govt.nz>

From: Edie Taylor <Edie.Taylor@health.govt.nz>
Sent: Monday, September 19, 2022 6:20:10 PM
To: Timothy Jelleyman <Timothy.Jelleyman@health.govt.nz>; Danya Levy <Danxx.xxxx@xxxxxx.xxxx.xx>; Sayali Pendharkar <xxxxxx.xxxxxxxxxx@xxxxxx.xxxx.xx>; Jo Elvidge <Jx.xxxxxxx@xxxxxx.xxxx.nz>; Jenna Osborne-Taylor <Jenna.Osborne-Taylor@health.govt.nz>; Steve Barnes <Steve.Barnes@health.govt.nz>
Subject: RE: Advice for puberty blockers media query please: s 9(2)(a) RNZ and Gender Clinic News - puberty blockers

Kia ora koutou

Would it be possible to get a group review of these lines please? I am wanting to confirm that everything here is still in line with MOH positioning.

Please ensure that @Danya Levy is copied into any changes. Thanks all!

- *Transgender healthcare is a rapidly evolving interdisciplinary field. Manatū Hauora is in the process of adjusting lines in the webpage in a way that gives the opportunity to review and assess emerging information.
Work on an evidence brief is planned to support this area.*
- *Our approach to the provision of gender affirming health care will continue to be guided by health professionals and Rainbow communities, including the World Professional Association for Transgender Health (WPATH) Standards of Care Version 8 (SOC8). These updated guidelines provide updated assessment, support, and therapeutic approaches for transgender and non-binary people.*

From - https://www.health.govt.nz/system/files/documents/information-release/h202204014_response.pdf

- *In view of the increasing scientific evidence, WPATH commissioned a new version of the Standards of Care for the Health of Transgender and Gender Diverse People, Version 8 (SOC-8). The SOC-8 published on 6*

September 2022 is based on the best available scientific evidence and expert professional consensus in transgender health. SOC-8 is available at:

<https://www.tandfonline.com/doi/pdf/10.1080/26895269.2022.2100644>

- *Guidelines for Gender Affirming Healthcare (2018 - New Zealand) have been developed by the Professional Association for Transgender Health Aotearoa (PATHA). These are available at: <https://patha.nz/Guidelines> PATHA is expected to update its guidelines for Gender Affirming Health Care following the WPATH release of SOC8.*

Is somebody able to confirm this second sentence re. the PATHA update following SOC8 please?

- *We are committed to providing better access, support and safe treatment for rainbow communities through our health system and ensuring the system is responsive to the needs of transgender, intersex, and gender-diverse people.*
- *It is important to note that Manatū Hauora intends to provide general health advice on its website. Treating clinicians are responsible for considering the appropriateness of a particular treatment for an individual patient. The use of any medicine or treatment is a matter for discussion between a treating clinician and their patient.*

Ngā mihi

Edie Taylor (she/her)

Senior Advisor | Office of the Chief Clinical Officers
System Performance & Monitoring
Manatū Hauora, 133 Molesworth Street
Thorndon, Wellington 6011



From: Timothy Jelleyman <Timothy.Jellexxxx@xxxxxx.xxxx.nz>

Sent: Monday, 19 September 2022 5:20 pm

To: Danya Levy <Danya.ev@health.govt.nz>; Edie Taylor <Edie.xxxxxx@xxxxxx.xxxx.nz>

Cc: Sayali Pendharkar <Sayali.Pendharkar@health.govt.nz>

Subject: RE: Advice for puberty blockers media query please: s 9(2)(a) RNZ and Gender Clinic News - puberty blockers

Kia ora Edie – I would not be comfortable with presenting for an interview, so will decline that for my part. There is significant risk going out talking about this without the right expertise in the room.

This is a work in progress, and we could say that the Ministry of Health has received indication that the statement 'safe and reversible' needs looking into. Other jurisdictions such as Sweden and UK have also been grappling with this question recently.

We have also discussed with Medsafe team who support the approach with the adjusted wording and further due diligence on the matter.

There is a specific plan to look at the evidence and produce an Evidence Brief. As this will take some time to complete, probably not until first part of 2023, then in the meantime the MoH has taken the precaution of adjusting the webpage information while the background for any position is formally updated.

Happy to discuss further.

Danya – thanks for your offer of support.

Sayali, I have also copied you in for any comment at this point.

Ngā mihi
Tim.

Dr Tim Jelleyman

Chief Clinical Advisor, Child and Youth Health
Office of Chief Clinical Officers

S9(2)(a)

timothy.jellexxxx@xxxxxx.xxxx.xx

Manatū Hauora, 133 Molesworth Street
Thorndon, Wellington 6011

Auckland based. Regular MoH days: Mon – Wed;
Clinical days at Waitemāta : Thurs, Fri.
Text me if your email needs priority attention.



From: Danya Levy <Danya.Levy@health.govt.nz>

Sent: Monday, 19 September 2022 4:53 pm

To: Edie Taylor <xxxx.xxxxxx@xxxxxx.xxxx.xx>; Timothy Jelleyman <Timothy.Jelleyman@health.govt.nz>

Subject: RE: Advice for puberty blockers media query please: s 9(2)(a) RNZ and Gender Clinic News - puberty blockers

Thank you Edie and Tim. Please let me know if there's anything I can do to help.

From: Edie Taylor <Edie.xxxxxx@xxxxxx.xxxx.xx>

Sent: Monday, 19 September 2022 4:49 pm

To: Timothy Jelleyman <Timothy.Jelleyman@health.govt.nz>

Cc: Danya Levy <xxxx.xxxx@xxxxxx.xxxx.xx>

Subject: FW: Advice for puberty blockers media query please: s 9(2)(a) RNZ and Gender Clinic News - puberty blockers

Kia ora Tim

Please see below from Danya – should we get together to put together some lines for these queries?

Ngā mihi

Edie Taylor (she/her)

Senior Advisor | Office of the Chief Clinical Officers
System Performance & Monitoring
Manatū Hauora, 133 Molesworth Street
Thorndon, Wellington 6011



From: Danya Levy <Danya.Levy@health.govt.nz>

Sent: Monday, 19 September 2022 4:44 pm

To: Edie Taylor <xxxx.xxxxxx@xxxxxx.xxxx.xx>

Subject: Advice for puberty blockers media query please: s 9(2)(a) RNZ and Gender Clinic News - puberty blockers

Hi Edie,

The web team said you were the author of the change this media query is asking about. Please redirect me if you are not the right person. If no one is available for interview, I can provide the reporter with written comment instead. There is a second query below which I sent to Pharmac, Jarrod and Anne – but haven't heard back from Jarrod or Anne yet. Pharmac is answering the first and third questions, but I was wondering if you could please help with the highlighted question?

I have found these Waikato University guidelines which talk about the benefits etc of puberty blockers:

Guidelines for Gender Affirming Healthcare for Gender Diverse and Transgender Children, Young People and Adults in Aotearoa New Zealand: (<https://researchcommons.waikato.ac.nz/handle/10289/13101>)

However, I also notice they talk about them being reversible, so advice that we have now changed?

Many thanks for any help or redirections,

Danya

Media: s 9(2)(a) RNZ

Query: I'm doing a story for RNZ on puberty blockers and the fact the Ministry has now removed the words "safe and reversible" from its advice.

<https://www.health.govt.nz/your-health/healthy-living/transgender-new-zealanders/transgender-new-zealanders-children-and-young-people>

- Would anyone from the Ministry be available for interview tomorrow or on Wednesday? Any time between 9am and 2.50pm is easiest for me because there won't be any background screaming, but I can be flexible.

Media: s 9(2)(a) Gender Clinic News

Query: I'm a journalist covering the international debate about youth gender clinics.

I'm writing about the situation with youth gender dysphoria in NZ, with a particular focus on puberty blockers.

- Does NZ Health Ministry fully fund the cost of puberty blockers? **Pharmac answering**
- **Can you please point me to any NZ Health Ministry advice for New Zealanders about the benefits, risks & nature of puberty blocking as a treatment for gender dysphoria?**
- Is there a minimum age below which puberty blockers cannot be given? **Pharmac answering**

Deadline: Midday Tuesday

Danya Levy (she/her)
Principal Media Advisor
S9(2)(a)

media@health.govt.nz

Info for media: www.health.govt.nz/news-media/media-centre

Manatū Hauora, 133 Molesworth Street Wellington 6011



RELEASED UNDER THE OFFICIAL INFORMATION Act 1982

From: Danya Levy
Sent: Tuesday, 20 September 2022 4:00 pm
To: Sayali Pendharkar
Cc: Edie Taylor
Subject: RE: Advice for puberty blockers media query please: s 9(2)(a) RNZ and Gender Clinic News - puberty blockers

Got it. Thanks Sayali. I'll remove that part.

From: Sayali Pendharkar <xxxxxx.xxxxxxxxxx@xxxxxx.xxxx.xx>
Sent: Tuesday, 20 September 2022 3:57 pm
To: Danya Levy <Danya.Levy@health.govt.nz>
Cc: Edie Taylor <Edie.Taylor@health.govt.nz>
Subject: RE: Advice for puberty blockers media query please: s 9(2)(a) RNZ and Gender Clinic News - puberty blockers

Thanks, Danya. Agree – it shouldn't be part of the response. It's back end stuff for us to do 😊

Ngā mihi nui

Sayali

Dr Sayali Pendharkar, PhD (she/her)

Deputy Chief Science Advisor
 Office of the Chief Science Advisor
 Evidence, Research and Innovation
 Phone: s9(2)(a)

Email: sayali.pendharkar@health.govt.nz

Manatū Hauora, 133 Molesworth Street
 Thorndon, Wellington 6011



From: Danya Levy <Danya.Levy@health.govt.nz>
Sent: Tuesday, 20 September 2022 2:43 pm
To: Sayali Pendharkar <Sayali.Pendharkar@xxxxxx.xxvt.nz>
Cc: Edie Taylor <xxxx.xxxxxx@xxxxxx.xxxx.xx>
Subject: RE: Advice for puberty blockers media query please: s 9(2)(a) RNZ and Gender Clinic News - puberty blockers

Hi Sayali,

Can you please check you're happy with this highlighted line? I didn't want to use the term "evidence brief" because although it sounds self-evident, I'm not sure the media/public know what it is. Happy to just remove the highlighted line if it wasn't intended for the response.

Many thanks,

Danya

Gender affirming healthcare is a rapidly evolving interdisciplinary field. Manatū Hauora is in the process of adjusting lines on our webpage in a way that gives the opportunity to review and assess emerging information. **For this reason, we will be adding information on the latest international evidence available to our webpage.**

From: Danya Levy

Sent: Tuesday, 20 September 2022 12:28 pm

To: Jenna Osborne-Taylor <Jenna.Osborne-Taylor@health.govt.nz>; Sayali Pendharkar <Sayali.Pendxxxxxx@xxxxxx.xxxx.nz>; Timothy Jelleyman <Timothy.Jelleymxx@xxxxxx.xxxx.xx>; Steve Barnes <Steve.Barnes@health.govt.nz>; Edie Taylor <Edie.Taylor@health.govt.nz>; Jo Elvidge <Jo.Elvidge@health.govt.nz>

Subject: RE: Advice for puberty blockers media query please: **§ 9(2)(a)** RNZ and Gender Clinic News puberty blockers

Mōrena all,

Many thanks for all your help on this, especially Edie and Tim who worked on this late last night.

Please see latest version below. Sayali asked if it would be signed off by OCCO or Pharmac. We don't usually get sign off from Pharmac, but I could run this by Dr Joe Borne as chief medical officer if you thought that was appropriate? I have changed the order, and I have tweaked the sentence about planning an evidence brief as it was a bit bureaucratic. Can you please make sure you're happy with the highlighted replacement? And did you want me to include the link to the OIA?

When I send this back to RNZ, I will explain that unfortunately we don't have anyone available for interview on this, so we are providing written comment.

Many thanks,

Danya

Media: **§ 9(2)(a)** RNZ

Query: I'm doing a story for RNZ on puberty blockers and the fact the Ministry has now removed the words "safe and reversible" from its advice.

Suggested response:

Manatū Hauora – the Ministry of Health is committed to providing better access, support and safe treatment for rainbow communities through our health system, and ensuring the system is responsive to the needs of transgender, intersex, and gender-diverse people.

Gender affirming healthcare is a rapidly evolving interdisciplinary field. Manatū Hauora is in the process of adjusting lines on our webpage in a way that gives the opportunity to review and assess emerging information. **For this reason, we will be adding information on the latest international evidence available to our webpage.**

It is important to note that Manatū Hauora provides general health advice on our website. Treating clinicians are responsible for considering the appropriateness of a particular treatment for an individual patient. The use of any medicine or treatment is a matter for discussion between them and their patient.

In view of the increasing scientific evidence, World Professional Association for Transgender Health (WPATH) commissioned a new version of the Standards of Care for the Health of Transgender and Gender Diverse People, Version 8 (SOC-8). The SOC-8 published on 6 September 2022 is based on the best available scientific evidence and expert professional consensus in transgender health. SOC-8 is available at:

<https://www.tandfonline.com/doi/pdf/10.1080/26895269.2022.2100644>

Guidelines for Gender Affirming Healthcare (2018 - New Zealand) have been developed by the Professional Association for Transgender Health Aotearoa (PATHA). These are available at: <https://patha.nz/Guidelines>

PATHA is expected to update its guidelines for Gender Affirming Health Care following the WPATH release of SOC8.

Manatū Hauora's approach to the provision of gender affirming health care will continue to be guided by scientific evidence, health professionals and Rainbow communities and the WPATH Standards of Care Version 8 (SOC8). These guidelines provide updated assessment, support, and therapeutic approaches for transgender and non-binary people.

Further information on the work we are doing in gender-affirming care can be found here:

https://www.health.govt.nz/system/files/documents/information-release/h202204014_response.pdf

From: Jenna Osborne-Taylor <Jenna.Osborne-Taylor@health.govt.nz>
Sent: Tuesday, 20 September 2022 8:25 am
To: Sayali Pendharkar <Sayali.Pendharkxx@xxxxxx.xxvt.nz>; Timothy Jelleyman <Timothy.Jelleyman@health.govt.nz>; Steve Barnes <Steve.Barnes@health.govt.nz>; Edie Taylor <Edie.xxxxxx@xxxxxx.xxxx.xx>; Danya Levy <Danya.Levy@health.govt.nz>; Jo Elvidge <Jo.Elvidge@health.govt.nz>
Subject: RE: Advice for puberty blockers media query please: s 9(2)(a) RNZ and Gender Clinic News - puberty blockers

Mōrena all

I'm happy with the wording with Sayali's changes.

Ngā mihi nui

Jenna Osborne-Taylor (she/her/ia)

Senior Advisor | Kaitohutohu Matua

Primary Care

Primary Health Care System Improvement and Innovation / Commissioning

Imēra: jenna.osborne-taylor@health.govt.nz

133 Molesworth Street, Thorndon, Wellington | P O Box 5013, Wellington 6140



Te Whatu Ora – Health New Zealand

TeWhatuOra.govt.nz

I work remotely - please include virtual options for hui/meetings. My standard hours of work are 7.00am to 3.00pm.

From: Sayali Pendharkar <Sayali.Pendhxxxxx@xxxxxx.xxxx.nz>
Sent: Monday, 19 September 2022 9:55 pm
To: Timothy Jelleyman <Timothy.Jelleymxx@xxxxxx.xxxx.xx>; Steve Barnes <Stxxx.xxxxxx@xxxxxx.xxxx.xx>; Edie Taylor <xxxx.xxxxxx@xxxxxx.xxxx.xx>; Danya Levy <Daxxx.xxxx@xxxxxx.xxxx.xx>; Jo Elvidge <Jo.Elvidge@health.govt.nz>; Jenna Osborne-Taylor <Jenna.Osborne-Taylor@health.govt.nz>
Subject: RE: Advice for puberty blockers media query please: s 9(2)(a) RNZ and Gender Clinic News - puberty blockers

Thank you, all. Edie, this is reading well. Some very minor edits from me below in black. We may or may not want to refer to scientific evidence in the 2nd bullet point – I think it is appropriate given the planned evidence brief.

Will this be signed out by OCCO and PHARMAC?

Ngā mihi nui

Sayali

Dr Sayali Pendharkar, PhD (she/her)

Deputy Chief Science Advisor
Office of the Chief Science Advisor
Evidence, Research and Innovation
Phone: s 9(2)(a)
Email: sayali.pendharkar@health.govt.nz
Manatū Hauora, 133 Molesworth Street
Thorndon, Wellington 6011



From: Timothy Jelleyman <Timothy.Jelleyxxx@xxxxxx.xxxx.nz>

Sent: Monday, 19 September 2022 9:37 pm

To: Steve Barnes <Steve.Baxxxx@xxxxxx.xxxx.xx>; Edie Taylor <xxxx.xxxxxx@xxxxxx.xxxx.xx>; Danya Levy <Danya.Levy@health.govt.nz>; Sayali Pendharkar <Sayali.Pendharkar@health.govt.nz>; Jo Elvidge <Jo.Elvidge@health.govt.nz>; Jenna Osborne-Taylor <Jenna.Osborne-Taylor@health.govt.nz>

Subject: RE: Advice for puberty blockers media query please: s 9(2)(a) RNZ and Gender Clinic News - puberty blockers

Thank you Edie,
I think you have set out well what has been discussed and planned.
No adjustments from me.
Ngā mihi
Tim.

Dr Tim Jelleyman

Chief Clinical Advisor, Child and Youth Health
Office of Chief Clinical Officers
s 9(2)(a)
timothy.jellexxx@xxxxxx.xxxx.xx
Manatū Hauora, 133 Molesworth Street
Thorndon, Wellington 6011
Auckland based. Regular MoH days: Mon – Wed;
Clinical days at Waitemāta : Thurs, Fri.
Text me if your email needs priority attention.



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Subject: Re: Advice for puberty blockers media query please: § 9(2)(a) RNZ and Gender Clinic News - puberty blockers

Kia ora tātou,

I can't speak to any of the clinical info but I can confirm that when my team was working on trans health issues last year PATHA advised us that they'd be updating their guidelines following SOC8. I haven't heard otherwise so it's most likely still the plan.

Steve

Steve Barnes
Group Manager, Family and Community Health Policy
System Strategy and Policy
Ministry of Health
Mobile: § 9(2)(a)
<http://www.health.govt.nz>

From: Edie Taylor <Edie.xxxxx@xxxxxx.xxxx.xx>

Sent: Monday, September 19, 2022 6:20:10 PM

To: Timothy Jelleyman <Timothy.Jelleyman@health.govt.nz>; Danya Levy <xxxx.xxxxx@xxxxxx.xxxx.xx>; Sayali Pendharkar <Sayali.Pendharkar@health.govt.nz>; Jo Elvidge <xx.xxxxxxx@xxxxxx.xxxx.nz>; Jenna Osborne-Taylor <Jenna.Osborne-Taylor@health.govt.nz>; Steve Barnes <xxxx.xxxxx@xxxxxx.xxxx.xx>

Subject: RE: Advice for puberty blockers media query please: § 9(2)(a) RNZ and Gender Clinic News - puberty blockers

Kia ora koutou

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Is somebody able to confirm this second sentence re. the PATHA update following SOC8 please?

- *We are committed to providing better access, support and safe treatment for rainbow communities through our health system and ensuring the system is responsive to the needs of transgender, intersex, and gender-diverse people.*
- *It is important to note that Manatū Hauora intends to provide general health advice on its website. Treating clinicians are responsible for considering the appropriateness of a particular treatment for an individual patient. The use of any medicine or treatment is a matter for discussion between the treating clinician and their patient.*

Ngā mihi

Eddie Taylor (she/her)

Senior Advisor | Office of the Chief Clinical Officers

System Performance & Monitoring

Manatū Hauora, 133 Molesworth Street

Thorndon, Wellington 6011



From: Timothy Jelleyman <Timothy.Jelleyxxx@xxxxxx.xxxx.nz>

Sent: Monday, 19 September 2022 5:20 pm

To: Danya Levy <xxxxx.xxxx@xxxxxx.xxxx.xx>; Eddie Taylor <xxxx.xxxxxx@xxxxxx.xxxx.xx>

Cc: Sayali Pendharkar <Sayali.Pendharkar@health.govt.nz>

Subject: RE: Advice for puberty blockers media query please: **s 9(2)(a)** RNZ and Gender Clinic News - puberty blockers

Kia ora Eddie – I would not be comfortable with presenting for an interview, so will decline that for my part. There is significant risk going out talking about this without the right expertise in the room.

This is a work in progress, and we could say that the Ministry of Health has received indication that the statement 'safe and reversible' needs looking into. Other jurisdictions such as Sweden and UK have also been grappling with this question recently.

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Happy to discuss further.

Danya – thanks for your offer of support.

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Ngā mihi
Tim.

Dr Tim Jelleyman

Chief Clinical Advisor, Child and Youth Health
Office of Chief Clinical Officers

§ 9(2)(a)

timothy.jellexxx@xxxxxx.xxxx.xx

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Auckland based. Regular MoH days: Mon – Wed;

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Text me if your email needs priority attention.



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Subject: FW: Advice for puberty blockers media query please: § 9(2)(a) RNZ and Gender Clinic News - puberty blockers

Kia ora Tim

Please see below from Danya – should we get together to put together some lines for these queries?

Ngā mihi

Edie Taylor (she/her)

Senior Advisor | Office of the Chief Clinical Officers

System Performance & Monitoring

Manatū Hauora, 133 Molesworth Street

Thorndon, Wellington 6011



From: Danya Levy <Danya.Levy@health.govt.nz>

Sent: Monday, 19 September 2022 4:44 pm

To: Edie Taylor <xxxx.xxxxxx@xxxxxx.xxxx.xx>

Subject: Advice for puberty blockers media query please: s 9(2)(a) RNZ and Gender Clinic News puberty blockers

Hi Edie,

The web team said you were the author of the change this media query is asking about. Please redirect me if you are not the right person. If no one is available for interview, I can provide the reporter with written comment instead. There is a second query below which I sent to Pharmac, Jarrod and Anne – but haven't heard back from Jarrod or Anne yet. Pharmac is answering the first and third questions, but I was wondering if you could please help with the highlighted question?

I have found these Waikato University guidelines which talk about the benefits etc of puberty blockers:

Guidelines for Gender Affirming Healthcare for Gender Diverse and Transgender Children, Young People and Adults in Aotearoa New Zealand: (<https://researchcommons.waikato.ac.nz/handle/10289/13101>)

However, I also notice they talk about them being reversible, so advice that we have now changed?

Many thanks for any help or redirections,

Danya

Media: s 9(2)(a) RNZ

Query: I'm doing a story for RNZ on puberty blockers and the fact the Ministry has now removed the words "safe and reversible" from its advice.

<https://www.health.govt.nz/your-health/healthy-living/transgender-new-zealanders/transgender-new-zealanders-children-and-young-people>

- Would anyone from the Ministry be available for interview tomorrow or on Wednesday? Any time between 9am and 2.50pm is easiest for me because there won't be any background screaming, but I can be flexible.

Media: s 9(2)(a) , Gender Clinic News

Query: I'm a journalist covering the international debate about youth gender clinics.

I'm writing about the situation with youth gender dysphoria in NZ, with a particular focus on puberty blockers.

- Does NZ Health Ministry fully fund the cost of puberty blockers? **Pharmac answering**
- **Can you please point me to any NZ Health Ministry advice for New Zealanders about the benefits, risks & nature of puberty blocking as a treatment for gender dysphoria?**
- Is there a minimum age below which puberty blockers cannot be given? **Pharmac answering**

Deadline: Midday Tuesday

Danya Levy (she/her)
Principal Media Advisor
s 9(2)(a)

media@health.govt.nz

Info for media: www.health.govt.nz/news-media/media-centre

Manatū Hauora, 133 Molesworth Street Wellington 6011



RELEASED UNDER THE OFFICIAL INFORMATION Act 1982

From: Danya Levy
Sent: Tuesday, 20 September 2022 10:38 am
To: Jarrod Williams
Cc: Edie Taylor
Subject: RE: Advice for media query please: s 9(2)(a), Gender Clinic News - youth gender dysphoria

Thanks Jarrod. s9(2)(a)

From: Jarrod Williams <Jarrod.Williams@health.govt.nz>
Sent: Tuesday, 20 September 2022 7:55 am
To: Danya Levy <Danya.Levy@health.govt.nz>
Cc: Edie Taylor <Edie.Taylor@health.govt.nz>
Subject: RE: Advice for media query please: s 9(2)(a), Gender Clinic News - youth gender dysphoria

Kia ora Danya,

s9(2)(a) we've got some lines on our website about puberty blockers that are our standard lines. <https://www.health.govt.nz/your-health/healthy-living/transgender-new-zealanders/transgender-new-zealanders-children-and-young-people>

Beyond that, like with any medication, the Ministry advice is that people should discuss the benefits, risks & nature of puberty blocking as a treatment with their doctor or other trusted clinician.

We don't really have any more to say sorry.

Ngā mihi,

Jarrod Williams (he / him)

Manager

Office of the Chief Clinical Officers

s9(2)(a)

xxxxxx.xxxxxxxx@xxxxxx.xxxx.nz

Manatū Hauora, 133 Molesworth Street

Thorndon, Wellington 6011



If this email reaches you out of hours, I don't expect a response outside of your office hours, it's just a convenient time for me to send an email

From: Danya Levy <Danya.Levy@health.govt.nz>
Sent: Monday, 19 September 2022 3:32 pm
To: Media Pharmac-EXT <xxxxx@xxxxxx.xxxx.xx >; Jarrod Williams <Jarrod.Williams@health.govt.nz>; Anne

Stewart <Anne.Stewart@health.govt.nz>

Subject: RE: Advice for media query please: s 9(2)(a) Gender Clinic News - youth gender dysphoria

Thank you Jane. That would be wonderful, thank you. The only other part of the query is about advice on the benefits/risks of puberty blockers. I can keep trying to chase that here, if Pharmac doesn't have anything on that.

From: Media <media@pharmac.govt.nz>

Sent: Monday, 19 September 2022 3:29 pm

To: Danya Levy <xxxxx.xxxx@xxxxxx.xxxx.xx>; Jarrod Williams <xxxxxx.xxxxxxxx@xxxxxx.xxxt.nz>; Anne Stewart <Anne.Stewart@health.govt.nz>

Subject: RE: Advice for media query please: s 9(2)(a) Gender Clinic News - youth gender dysphoria

Hi there,

We can answer around what is funded re puberty blockers, and talk about if age is an access criteria (not sure yet as haven't checked). Do you want us to provide you the information to add to your answer?

Ngā mihi

Jane Wright | Pharmac's Senior Communications Advisor, Media

Pharmac | Te Pātaka Whaioranga | PO Box 10 254 | Level 9, 40 Mercer Street, Wellington

M: s 9(2)(a) www.pharmac.govt.nz

From: Danya Levy <Danya.Levy@health.govt.nz>

Sent: Monday, 19 September 2022 3:21 pm

To: Jarrod Williams <Jarrod.Williams@health.govt.nz>; Media <media@pharmac.govt.nz>; Anne Stewart <Anne.Stewart@health.govt.nz>

Subject: FW: Advice for media query please: s 9(2)(a), Gender Clinic News - youth gender dysphoria

Hi Jarrod, Anne and the Pharmac team,
Please see media query below that I'm struggling to find a home for. Does this sit with either of your teams?
Many thanks,
Danya

From: Sarah Upston <Sarah.Upston@health.govt.nz>

Sent: Monday, 19 September 2022 3:14 pm

To: Danya Levy <xxxxx.xxxx@xxxxxx.xxxx.xx>; Harsh Vardhan <Harsh.Vardhan@health.govt.nz>; Jo Elvidge <Jo.Elvidge@health.govt.nz>

Subject: RE: Advice for media query please: s 9(2)(a) Gender Clinic News - youth gender dysphoria

Hi Danya – I wonder if this sits best with PHARMAC and/or OCCO?

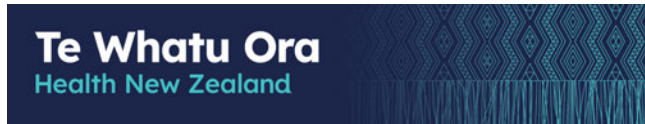
Ngā mihi nui,

Sarah Upston (she/her)

Acting Manager, Primary Care |

Primary Health Care System Improvement and Innovation/Commissioning

waea pūkoro: s 9(2)(a) | ĭmēra: sarah.upston@health.govt.nz
133 Molesworth Street, Wellington | PO Box 5103, Wellington 6140



Te Whatu Ora – Health New Zealand
TeWhatuOra.govt.nz

I work remotely some days during the week – please include virtual options for hui.

From: Danya Levy <Danya.Levy@health.govt.nz>

Sent: Monday, 19 September 2022 2:53 pm

To: Sarah Upston <Sarah.Upston@health.govt.nz>; Harsh Vardhan <Harsh.Vardhan@health.govt.nz>; Jo Elvidge <Jo.Elvidge@health.govt.nz>

Subject: Advice for media query please: s 9(2)(a) Gender Clinic News - youth gender dysphoria

Hello Sarah, Harsh and Jo,

Apologies for the scattergun email. I am trying to find out who looks after youth gender dysphoria/puberty blockers. Do any of you know who would be best placed to answer these questions please?

I have found an old response on this, and guidelines which seem to show that puberty blockers are subsidised and there is no age limit?

Many thanks,

Danya

Media: s 9(2)(a) Gender Clinic News

Query: I'm a journalist covering the international debate about youth gender clinics.

I'm writing about the situation with youth gender dysphoria in NZ, with a particular focus on puberty blockers.

- Does NZ Health Ministry fully fund the cost of puberty blockers?
- Can you please point me to any NZ Health Ministry advice for New Zealanders about the benefits, risks & nature of puberty blocking as a treatment for gender dysphoria?
- Is there a minimum age below which puberty blockers cannot be given?

Deadline: Midday Tuesday

From the Waikato Uni guidelines:

Currently in New Zealand, goserelin (Zoladex®) SC implants have sole subsidy status, although leuprorelin (Lucrin®) IM injections continue to be fully funded for children and adolescents, who are unable to tolerate administration of goserelin, where the prescription is endorsed accordingly.

June 2021 response:

It is important to note that the Ministry intends to provide general health advice on our website. The treating clinician is responsible for considering the appropriateness of a particular treatment for a particular patient. It is also their responsibility to ensure that the patient is informed of the risks and benefits associated with that treatment. Informed consent should be obtained from the patient before the choice is made to prescribe a treatment.

A young person aged 16 years and over can consent to their treatment as if they were an adult. For children and young people under the age of 16, consent may be given by a parent, guardian or other person acting in the place of a parent. Depending on the child's age, they will be involved as much as possible and information will be given to them in a way that they can understand.

The Ministry has consulted with local clinical experts, including Counties Manukau DHB paediatrician Rachel Johnson, who advised that despite the change in advice in the UK, the information on our website that puberty blockers are safe and reversible remains appropriate.

The information is supported by the *Guidelines for Gender Affirming Healthcare for Gender Diverse and Transgender Children, Young People and Adults in Aotearoa New Zealand*. This is available on the University of Waikato's Research Commons' website (<https://researchcommons.waikato.ac.nz/handle/10289/13101>) It is also supported by the *Standards of Care* developed by the World Professional Association for Transgender Health, which can be found on its website (www.wpath.org/publications/soc).

Please note: The UK has since reversed its decision around puberty blockers which are now available with parental consent following this statement on the Tavistock ruling from WPATH , PATHA , AUSPATH and other gender affirming care organisations:
<https://www.wpath.org/media/cms/Documents/Public%20Policies/2020/FINAL%20Statement%20Regarding%20Informed%20Consent%20Court%20Case%20Dec%202016%202020.docx.pdf>

Danya Levy (she/her)
Principal Media Advisor
S9(2)(a)

media@health.govt.nz
Info for media: www.health.govt.nz/news-media/media-centre
Manatū Hauora, 133 Molesworth Street Wellington 6011



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From: Kieran Moorhead
Sent: Wednesday, 21 September 2022 10:06 am
To: Danya Levy; Jo Elvidge; Sarah Upston; Harsh Vardhan
Cc: Jenna Osborne-Taylor; Edie Taylor
Subject: RE: Advice for media query please: s 9(2)(a) Gender Clinic News - youth gender dysphoria

Apologies for the delay – appreciate we may have missed deadline on this one! But we think including some key points below would strengthen the response. Thanks heaps 😊

- Some people experience psychological distress as a result of the discrepancy between their sense of gender identity and the sex that they were born with, often referred to as gender dysphoria.
- We know that transgender and non-binary people experience higher rates of psychological distress, including experiences of anxiety, depression, thoughts of suicide, and substance misuse. This is not always only related to gender dysphoria and there may be many factors that contribute to poor mental health outcomes for transgender and non-binary people, for example, lack of acceptance from family or peers, or bullying and discrimination when accessing education, housing, employment and health services.
- Not all people who experience feelings of gender dysphoria seek to access puberty blockers or hormones, although many do on their often long journey to ‘come out’ and undergo a transition to an identity that more truly matches their lived experience.
- Transitioning is not a linear or straight forward process, and can include a range of steps that someone wishes to take including, changing how they dress or present, changing their name, updating legal identification documentation, accessing counselling or peer support from community organisations, as well as accessing puberty blockers or hormones.
- Many areas of New Zealand require a diagnosis of gender dysphoria before someone is able to access puberty blockers or hormones which can sometimes mean accessing specialist mental health services or a private assessment from a psychologist. This creates additional barriers for accessing health care. Some people experience this as harmful as it pathologises what feels natural in relation to their gender identity.
- Gender affirming care includes a range of health supports to affirm people’s own gender identity. This may include puberty blockers, hormone, as well as laser hair removal, voice therapy, counselling and social supports, and surgeries. Not all people will want these options, or may only want a few. Many people pay for some services or access them through community organisations.
- We recommend speaking to young people who have experienced gender affirming care, including puberty blockers and hormones, to understand the benefits that these have brought them.

Kieran Moorhead (he/him)

Senior Policy Analyst

Mental Health and Addiction Strategy and Policy | System Performance and Monitoring Directorate

+64 4 496 2000

xxxxxx.xxxxxxxx@xxxxxx.xxxx.xx

Manatū Hauora, 133 Molesworth Street Thorndon, Wellington 6011



From: Danya Levy <Danya.Levy@health.govt.nz>
Sent: Tuesday, 20 September 2022 10:01 am
To: Kieran Moorhead <Kieran.Moorhead@health.govt.nz>; Jo Elvidge <Jo.Elvidge@health.govt.nz>; Sarah Upston <Sarah.Upston@health.govt.nz>; Harsh Vardhan <Harsh.Vardhan@health.govt.nz>
Cc: Jenna Osborne-Taylor <Jenna.Osborne-Taylor@health.govt.nz>; Edie Taylor <Edie.Taylor@health.govt.nz>
Subject: RE: Advice for media query please: s 9(2)(a) Gender Clinic News - youth gender dysphoria

Many thanks Kieran 😊

From: Kieran Moorhead <xxxxxx.xxxxxxxx@xxxxxx.xxxx.xx>
Sent: Tuesday, 20 September 2022 9:48 am
To: Jo Elvidge <Jo.Elvidge@health.govt.nz>; Danya Levy <Danya.Levy@health.govt.nz>; Sarah Upston <Sarah.Upston@health.govt.nz>; Harsh Vardhan <Harsh.Vardhan@health.govt.nz>
Cc: Jenna Osborne-Taylor <Jenna.Osborne-Taylor@health.govt.nz>; Edie Taylor <Edie.Taylor@health.govt.nz>
Subject: RE: Advice for media query please: s 9(2)(a) Gender Clinic News - youth gender dysphoria

Kia ora koutou

I have written some lines for the second point regarding treatment of gender dysphoria – running them by our principal clinical advisor children and young people so will get them to you before midday for your consideration 😊

Kieran Moorhead (he/him)

Senior Policy Analyst

Mental Health and Addiction Strategy and Policy | System Performance and Monitoring Directorate

+64 4 496 2000

xxxxxx.xxxxxxxx@xxxxxx.xxxx.xx

Manatū Hauora, 133 Molesworth Street Thorndon, Wellington 6011



From: Jo Elvidge <xx.xxxxxxx@xxxxxx.xxxx.xx>
Sent: Monday, 19 September 2022 5:20 pm
To: Danya Levy <xxxxx.xxxx@xxxxxx.xxxx.xx>; Sarah Upston <Sarah.Upston@health.govt.nz>; Harsh Vardhan <Harsh.Vardhan@health.govt.nz>
Cc: Kieran Moorhead <xxxxxx.xxxxxxxx@xxxxxx.xxvt.nz>; Jenna Osborne-Taylor <Jenna.Osborne-xxxxxx@xxxxxx.xxxx.nz>; Edie Taylor <xxxx.xxxxxxx@xxxxxx.xxxx.xx>
Subject: RE: Advice for media query please: s 9(2)(a) Gender Clinic News - youth gender dysphoria

Oh well done Danya!

Yes there has been some recent international debate going on about their safety—I am not fully up with that debate. From memory it came from doctor prescribing puberty blockers in the UK who thought we should be more informed about long term impacts, and has been taken up by conservatives in the US.

Kia pai tō rā

Jo Elvidge (she/her)

Principal Advisor | Kaitohutohu Mātāmua
Sexual and Reproductive Health

**Family and Community Health,
Population Health Commissioning**

waea pūkoro: S9(2)(a) | Īmēra: Jo.Elvidge@health.govt.nz
650 Great South Rd, Penrose, Auckland | Private Bag 92522, Auckland 1141



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TeWhatuOra.govt.nz

From: Danya Levy <Danya.Levy@health.govt.nz>
Sent: Monday, 19 September 2022 5:07 pm
To: Jo Elvidge <Jo.Elvidge@health.govt.nz>; Sarah Upston <Sarah.Upston@health.govt.nz>; Harsh Vardhan <Harsh.Vardhan@health.govt.nz>
Cc: Kieran Moorhead <xxxxxx.xxxxxxxx@xxxxxx.xxvt.nz>; Jenna Osborne-Taylor <Jenna.Osborne-xxxxxx@xxxxxx.xxxx.nz>; Edie Taylor <xxxx.xxxxxx@xxxxxx.xxxx.xx>
Subject: RE: Advice for media query please: S 9(2)(a) Gender Clinic News youth gender dysphoria

Many thanks Jo. Pharmac is answering the first and third questions. Edie is helping me with the middle question and a new query from RNZ on why the Ministry removed the words “safe” and “reversible”. I did find those guidelines but have queried them with Edie as they talk about puberty blockers being reversible still, so wanted to make sure they were still relevant.

From: Jo Elvidge <xx.xxxxxxx@xxxxxx.xxxx.xx>
Sent: Monday, 19 September 2022 5:02 pm
To: Danya Levy <xxxxx.xxxx@xxxxxx.xxxx.xx>; Sarah Upston <Sarah.Upston@health.govt.nz>; Harsh Vardhan <Harsh.Vardhan@health.govt.nz>
Cc: Kieran Moorhead <xxxxxx.xxxxxxxx@xxxxxx.xxvt.nz>; Jenna Osborne-Taylor <Jenna.Osborne-xxxxxx@xxxxxx.xxxx.nz>
Subject: RE: Advice for media query please: S 9(2)(a) Gender Clinic News - youth gender dysphoria

Apologies I was on a deadline and ignoring my email. There are guidelines for this put out by the association for trans health care. <https://patha.nz/Guidelines>

There have been issues regarding the appropriately skilled leads for prescribing and management between primary care, mental health care and specialist care for prescribing.

Jenna (primary care) or Kieran (mental health) could tell you more.

Kia pai tō rā

Jo Elvidge (she/her)
Principal Advisor | Kaitohutohu Mātāmua
Sexual and Reproductive Health
Family and Community Health,
Population Health Commissioning

waea pūkoro: S9(2)(a) | Īmēra: Jo.Elvidge@health.govt.nz



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From: Danya Levy <Danya.Levy@health.govt.nz>
Sent: Monday, 19 September 2022 3:19 pm**To:** Sarah Upston <Sarah.Upston@health.govt.nz>; Harsh Vardhan <Harsh.Vardhan@health.govt.nz>; Jo Elvidge <Jo.Elvidge@health.govt.nz>**Subject:** RE: Advice for media query please: s 9(2)(a) Gender Clinic News - youth gender dysphoria

Thanks Sarah. I'll try them.

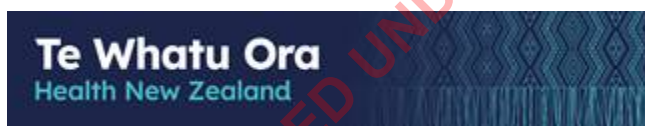
From: Sarah Upston <Sarah.Upston@health.govt.nz>
Sent: Monday, 19 September 2022 3:14 pm**To:** Danya Levy <xxxxx.xxxx@xxxxxx.xxxx.xx>; Harsh Vardhan <Harsh.Vardhan@health.govt.nz>; Jo Elvidge <Jo.Elvidge@health.govt.nz>**Subject:** RE: Advice for media query please: s 9(2)(a) Gender Clinic News - youth gender dysphoria

Hi Danya – I wonder if this sits best with PHARMAC and/or OCCO?

Ngā mihi nui,

Sarah Upston (she/her)**Acting Manager, Primary Care |****Primary Health Care System Improvement and Innovation/Commissioning**waea pūkoro: s9(2)(a) | ĩmēra: sarah.upston@health.govt.nz

133 Molesworth Street, Wellington | PO Box 5103, Wellington 6140

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I work remotely some days during the week – please include virtual options for hui.

From: Danya Levy <Danya.Levy@health.govt.nz>
Sent: Monday, 19 September 2022 2:53 pm**To:** Sarah Upston <Sarah.Upston@health.govt.nz>; Harsh Vardhan <Harsh.Vardhan@health.govt.nz>; Jo Elvidge <Jo.Elvidge@health.govt.nz>**Subject:** Advice for media query please: s 9(2)(a) Gender Clinic News - youth gender dysphoria

Hello Sarah, Harsh and Jo,

Apologies for the scattergun email. I am trying to find out who looks after youth gender dysphoria/puberty blockers. Do any of you know who would be best placed to answer these questions please?

I have found an old response on this, and guidelines which seem to show that puberty blockers are subsidised and there is no age limit?

Many thanks,
Danya

Media: s 9(2)(a) Gender Clinic News

Query: I'm a journalist covering the international debate about youth gender clinics.

I'm writing about the situation with youth gender dysphoria in NZ, with a particular focus on puberty blockers.

- Does NZ Health Ministry fully fund the cost of puberty blockers?
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- Is there a minimum age below which puberty blockers cannot be given?

Deadline: Midday Tuesday

From the Waikato Uni guidelines:

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June 2021 response:

It is important to note that the Ministry intends to provide general health advice on our website. The treating clinician is responsible for considering the appropriateness of a particular treatment for a particular patient. It is also their responsibility to ensure that the patient is informed of the risks and benefits associated with that treatment. Informed consent should be obtained from the patient before the choice is made to prescribe a treatment.

A young person aged 16 years and over can consent to their treatment as if they were an adult. For children and young people under the age of 16, consent may be given by a parent, guardian or other person acting in the place of a parent. Depending on the child's age, they will be involved as much as possible and information will be given to them in a way that they can understand.

The Ministry has consulted with local clinical experts, including Counties Manukau DHB paediatrician Rachel Johnson, who advised that despite the change in advice in the UK, the information on our website that puberty blockers are safe and reversible remains appropriate.

The information is supported by the *Guidelines for Gender Affirming Healthcare for Gender Diverse and Transgender Children, Young People and Adults in Aotearoa New Zealand*. This is available on the University of Waikato's Research Commons' website (<https://researchcommons.waikato.ac.nz/handle/10289/13101>) It is also supported by the *Standards of Care* developed by the World Professional Association for Transgender Health, which can be found on its website (www.wpath.org/publications/soc).

Please note: The UK has since reversed its decision around puberty blockers which are now available with parental consent following this statement on the Tavistock ruling from WPATH , PATHA , AUSPATH and other gender affirming care organisations:

<https://www.wpath.org/media/cms/Documents/Public%20Policies/2020/FINAL%20Statement%20Regarding%20Informed%20Consent%20Court%20Case%20Dec%2016%202020.docx.pdf>

Danya Levy (she/her)
Principal Media Advisor
S9(2)(a)

media@health.govt.nz

Info for media: www.health.govt.nz/news-media/media-centre

Manatū Hauora, 133 Molesworth Street Wellington 6011



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From: Blair Cunningham
Sent: Friday, 23 September 2022 7:34 am
To: Media MOH
Cc: Edie Taylor
Subject: FW: MoH media response - s 9(2)(a), Stuff, Puberty blockers info on MOH site

Categories: Tracked To Dynamics 365

Morning Emily and Ben....are you able to take on this follow up please...from s 9(2)(a), you'll see Edie in OCCO will be looking into this today

Edie are you able to reply to media team please Im off today and on call this weekend.

Cheers!

Blair Cunningham

Senior Media Advisor

s9(2)(a)

For media issues, please copy in media@health.govt.nz

Information for media:

<https://www.health.govt.nz/news-media/media-centre>

Manatū Hauora, 133 Molesworth Street Wellington 6011



From: Edie Taylor <Edie.Taylor@health.govt.nz>
Sent: Thursday, 22 September 2022 4:47 pm
To: Blair Cunningham <Blair.Cunningham@health.govt.nz>
Subject: RE: MoH media response - s 9(2)(a), Stuff, Puberty blockers info on MOH site

Hi Blair

We're getting one of our Dr's to take a look at this first thing tomorrow – imagine it'll be something along the lines of *...the use of any medicine or treatment is a matter for discussion between the clinician and their patient. The Ministry is unable to be involved in clinical decisions for individual patients. It is important to ensure that patients are fully informed of all aspects of any health intervention to enable them to make an informed choice and give informed consent.*

Possibly will also craft something around appropriate and effective use of medicines improving health outcomes and quality of life..

Will get back to you tomorrow!

Ngā mihi

Edie Taylor (she/her)

Senior Advisor | Office of the Chief Clinical Officers
System Performance & Monitoring
Manatū Hauora, 133 Molesworth Street
Thorndon, Wellington 6011



From: Blair Cunningham <Blair.Cunningham@health.govt.nz>

Sent: Thursday, 22 September 2022 4:16 pm

To: Edie Taylor <xxxx.xxxxxx@xxxxxx.xxxx.xx>

Subject: FW: MoH media response - s 9(2)(a) [REDACTED], Stuff, Puberty blockers info on MOH site

Hey Edie...would you be keen to help with this one please?

Cheers!

Blair Cunningham

Senior Media Advisor
s9(2)(a) [REDACTED]

For media issues, please copy in media@health.govt.nz

Information for media:

<https://www.health.govt.nz/news-media/media-centre>

Manatū Hauora, 133 Molesworth Street Wellington 6011



From: s 9(2)(a) [REDACTED] <[\[REDACTED\]@stuff.co.nz](mailto:[REDACTED]@stuff.co.nz)>

Sent: Thursday, 22 September 2022 4:14 pm

To: Blair Cunningham <Blair.Cunningham@health.govt.nz>

Cc: Media MOH <media@health.govt.nz>; OIA Requests <xxxxx@xxxxxx.xxxx.xx>

Subject: Re: MoH media response - s 9(2)(a) [REDACTED], Stuff, Puberty blockers info on MOH site

Kia ora Blair,

Thanks for this - can you clarify though whether MOH believes they are safe? I understand if you need to wait for emerging evidence, but some response would be useful given the misinformation and claims these right-leaning and anti-trans groups are spreading, so I'm just keen to be really clear.

I've had a look through that SOC-8 document and there is a line that says: (under 6.12.c): Gender-diverse youth should fully understand the reversible, partially reversible, and irreversible aspects of a treatment, as well as the limits of what is known about certain treatments (e.g., the impact of **pubertal suppression on brain development** (Chen and Loshak, 2020)).

Is it information like this that is behind the removal of the word 'safe'?

Happy to talk this out with someone if that's useful

Thanks

s 9(2)(a)

On Thu, Sep 22, 2022 at 3:37 PM Blair Cunningham <Blair.Cunningham@health.govt.nz> wrote:

Hi s 9(2)(a)

I hope this helps

Cheers Blair

QUERY

I'm just checking whether there is some truth to claims being shared online by TERF and right-wing conservative groups like Family First regarding info about puberty blockers on the MOH website.

Attached is a screenshot alleging [the webpage here](#) used to reference blockers as "safe and fully reversible" and now this has been removed, which has [lead Family First to claim](#) this means the MOH does not believe they are safe or reversible. These groups are of course problematic sources, but it does appear something has changed on the MOH page, so I'm just looking to clarify:

- was [this page on the MOH site](#) edited to remove the reference to puberty blockers as "safe and fully reversible" and if so, why?

- does MOH maintain puberty blockers are safe and reversible?

- [Speak up for Women](#) is also claiming they had something to do with the change online - is this correct?

Response

Manatū Hauora – the Ministry of Health is committed to providing better access, support and safe treatment for rainbow communities through our health system, and ensuring the system is responsive to the needs of transgender, intersex, and gender-diverse people.

Gender affirming healthcare is a rapidly evolving interdisciplinary field. Manatū Hauora is in the process of adjusting lines on our webpage in a way that gives the opportunity to review and assess emerging information.

It is important to note that Manatū Hauora provides general health advice on our website. Treating clinicians are responsible for considering the appropriateness of a particular treatment for an individual patient. The use of any medicine or treatment is a matter for discussion between them and their patient.

We endorse the PATHA guidelines, which do state:

“Puberty blockers are considered to be fully reversible and allow the adolescent time prior to making a decision on starting hormone therapy”

In view of the increasing scientific evidence, World Professional Association for Transgender Health (WPATH) commissioned a new version of the Standards of Care for the Health of Transgender and Gender Diverse People, Version 8 (SOC-8). The SOC-8 published on 6 September 2022 is based on the best available scientific evidence and expert professional consensus in transgender health. SOC-8 is available at: <https://www.tandfonline.com/doi/pdf/10.1080/26895269.2022.2100644>

Guidelines for Gender Affirming Healthcare (2018 - New Zealand) have been developed by the Professional Association for Transgender Health Aotearoa (PATHA). These are available at: <https://patha.nz/Guidelines>

PATHA is expected to update its guidelines for Gender Affirming Health Care following the WPATH release of SOC8.

Manatū Hauora’s approach to the provision of gender affirming health care will continue to be guided by scientific evidence, health professionals and Rainbow communities and the WPATH Standards of Care Version 8 (SOC8). These guidelines provide updated assessment, support, and therapeutic approaches for transgender and non-binary people.

Further information on the work we are doing in gender-affirming care can be found here: https://www.health.govt.nz/system/files/documents/information-release/h202204014_response.pdf

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From: Tim Jelleyman <Timothy.Jelleyman@health.govt.nz>

Sent: Friday, 10 March 2023 5:41 pm

To: Joe Bourne <Joe.Bourne@health.govt.nz>; Sarah Upston <Sarah.Upston@health.govt.nz>; Jarrod Williams <Jarrod.Williams@health.govt.nz>

Cc: Sayali Pendharkar <Sayali.Pendharkar@health.govt.nz>

Subject: Re: Media enquiry: Puberty blockers evidence brief

Kia ora koutou,

Copying you in fyi, but also with my suggestion about future of the related public facing information (webpage etc):

Once the evidence brief is completed and confirmed with stakeholders (Te Whatu Ora/Manatu Ora/MedSafe etc) then it needs to inform the work in Te Whatu Ora on Transgender health care pathways etc. I think the ownership of the webpage in future iterations needs to be packaged with that. I do not think the webpage should sit longer term in Manatū Hauora as it is a health information resource for public and healthcare people. May we have that discussion with the Transgender team currently doing the work.

Sayali - welcome any comment from you also.

ngā mihi
Tim.

Dr Tim Jelleyman

Clinical Chief Advisor, Child and Youth Health

Ngā Āpiha Hauora : Office of Chief Clinical Officers

s 9(2)(a)

timothy.jelleyman@health.govt.nz

Manatū Hauora, 133 Molesworth Street Thorndon, Wellington 6011

Auckland based. Regular MoH days: Mon – Wed;

Clinical days at Waitemāta : Thurs, Fri.

Text me if your email needs priority attention.



From: Tim Jelleyman <Timothy.Jelleyman@health.govt.nz>
Sent: Friday, 10 March 2023 5:33 pm
To: Cedric Horner <Cedric.Horner@health.govt.nz>; Sayali Pendharkar <Sayali.Pendharkar@health.govt.nz>
Subject: Re: Media enquiry: Puberty blockers evidence brief

Kia ora Cedric,

Just out of conference so here are a couple of initial thoughts, but this will need further work in the new week.

Re Q1 & 2) The change to the website was in recognition that overseas jurisdictions including UK and Sweden were reviewing the use of puberty blockers in their health systems as questions about safety and reversibility were being asked. Furthermore, in response to questions raised our MoH recommended the specific evidence work to consider current state of research around this question and produce an evidence brief that will inform Te Whatu Ora and health professionals working in this area.

Re Q3) I would not say we classify any correspondents in the way described, but the MoH role is rather to consider the questions raised in an evidence based way and provide the best clinical advice that is available. (I am not sure what p10 refers to - was that an OIA document?).

Regarding your suggested wording - closing statement is good, emphasising rangatahi/professional partnership in clinical process; opening statement - we can not yet state that position as it pre-empts the evidence brief work, which will then be used to inform any webpage statements. I think we have to wait for that.

My recommendation also is that the Te Whatu Ora / Primary Care / Transgender Health team be asked to comment and advise on this.

ngā mihi
Tim.
(him/he)

Dr Tim Jelleyman

Clinical Chief Advisor, Child and Youth Health

Ngā Āpiha Hauora : Office of Chief Clinical Officers

s 9(2)(a)

timothy.jelleyman@health.govt.nz

Manatū Hauora, 133 Molesworth Street Thorndon, Wellington 6011

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Clinical days at Waitemāta : Thurs, Fri.

Text me if your email needs priority attention.



From: Cedric Horner <Cedric.Horner@health.govt.nz>

Sent: Friday, 10 March 2023 3:37 pm

To: Tim Jelleyman <Timothy.Jelleyman@health.govt.nz>; Sayali Pendharkar <Sayali.Pendharkar@health.govt.nz>

Subject: FW: Media enquiry: Puberty blockers evidence brief

Hi again both

s 9(2)(a) has a few more follow-up questions on the puberty blockers:

1. *Why did the ministry change the webpage?*
2. *Does the ministry believe puberty blockers are not “safe and fully reversible”?*
3. *Noting on page 10 that one official said “the statement is no doubt true” but the changes were warranted “in the hopes it creates fewer queries”, did the ministry change the website because of pressure from anti-trans activists, even though it viewed the content to still be true?*

Is this something we can answer easily?

I feel that a response should start with this line:

The best available clinical evidence suggests that puberty blockers are safe and reversible

Then go into the rationale behind removing that associated line from the website

And finally close with something like this:

Anyone considering gender-affirming intervention should seek advice from a health professional

Cedric Horner (he/him) | Senior Media Advisor
Manatū Hauora | Ministry of Health
s 9(2)(a) | media@health.govt.nz

From: s 9(2)(a) <[s9\(2\)\(a\)@newsroom.co.nz](mailto:s9(2)(a)@newsroom.co.nz)>
Sent: Friday, 10 March 2023 12:23 pm
To: Cedric Horner <Cedric.Horner@health.govt.nz>
Cc: Media MOH <media@health.govt.nz>
Subject: Re: Media enquiry: Puberty blockers evidence brief

Kia ora Cedric,

Thanks for sending all of that through.

I have a few follow-up questions for a story I'm working on, based on the OIA response linked earlier. The story looks at the decision to change a ministry webpage referring to puberty blockers as "safe and fully reversible".

I have the following questions:

- Why did the ministry change the webpage?
- Does the ministry believe puberty blockers are *not* "safe and fully reversible"?
- Noting on page 10 that one official said "the statement is no doubt true" but the changes were warranted "in the hopes it creates fewer queries", did the ministry change the website because of pressure from anti-trans activists, even though it viewed the content to still be true?

My deadline is end of day Monday.

Ngā mihi,

s 9(2)(a)

--

s 9(2)(a)
Senior Political Reporter

newsroom.

s 9(2)(a) <[s9\(2\)\(a\)@newsroom.co.nz](mailto:s9(2)(a)@newsroom.co.nz)>
<[s9\(2\)\(a\)@newsroomnz](mailto:s9(2)(a)@newsroomnz)>

From: Cedric Horner <Cedric.Horner@health.govt.nz>
Date: Thursday, 9 March 2023 at 8:49 AM
To: s 9(2)(a) <[s9\(2\)\(a\)@newsroom.co.nz](mailto:s9(2)(a)@newsroom.co.nz)>
Cc: Media MOH <media@health.govt.nz>
Subject: Re: Media enquiry: Puberty blockers evidence brief

Hi again s 9(2)(a)

If needed, you can attribute these comments to Tim Jellyman, Clinical Chief Advisor, Child and Family, Ministry of Health

Cheers, Cedric

From: Cedric Horner
Sent: Wednesday, March 8, 2023 2:38:24 PM
To: s 9(2)(a) <[REDACTED]@newsroom.co.nz>
Cc: Media MOH <media@health.govt.nz>
Subject: RE: Media enquiry: Puberty blockers evidence brief

Hi s 9(2)(a)

We're expecting review results to be finalised by May this year. Of course this could change.

Cedric Horner (he/him) | Senior Media Advisor
| Manatū Hauora | Ministry of Health
s 9(2)(a) | media@health.govt.nz

From: Cedric Horner
Sent: Wednesday, 8 March 2023 1:12 pm
To: s 9(2)(a) <[REDACTED]@newsroom.co.nz>
Cc: Media MOH <media@health.govt.nz>; Tim Jolleyman <Timothy.Jolleyman@health.govt.nz>
Subject: RE: Media enquiry: Puberty blockers evidence brief

Hi s 9(2)(a) thanks for your patience

Just trying to get a proper attribution for you, but for now you can attribute to a Ministry spokesperson:

“The evidence brief has been completed and is currently undergoing further review. It will be published on the Ministry website in due course. Treatment plans for individuals exploring gender affirming healthcare sit with their clinician. The brief will be shared with relevant professional bodies and colleges to inform any advice or information a clinician may share with their patient.”

Cedric Horner (He/him)
Senior Media Advisor, s 9(2)(a) [REDACTED]
Manatū Hauora | Ministry of Health

From: Cedric Horner
Sent: Wednesday, 8 March 2023 12:38 pm
To: s 9(2)(a) <[REDACTED]@newsroom.co.nz>
Cc: Media MOH <media@health.govt.nz>
Subject: RE: Media enquiry: Puberty blockers evidence brief

Hi s 9(2)(a), should be far away. Let me follow up

Cedric Horner (He/him)
Senior Media Advisor, s 9(2)(a) [REDACTED]
Manatū Hauora | Ministry of Health

From: s 9(2)(a) <[REDACTED]@newsroom.co.nz>
Sent: Wednesday, 8 March 2023 11:45 am

To: Cedric Horner <Cedric.Horner@health.govt.nz>
Cc: Media MOH <media@health.govt.nz>
Subject: Re: Media enquiry: Puberty blockers evidence brief

Hi Cedric,

Just checking in on this please.

--

s 9(2)(a)
Senior Political Reporter

newsroom.

s 9(2)(a) newsroom.co.nz
[@newsroomnz](https://www.instagram.com/newsroomnz)

From: Cedric Horner <Cedric.Horner@health.govt.nz>
Date: Monday, 6 March 2023 at 3:13 PM
To: s 9(2)(a) <[s9\(2\)\(a\)@newsroom.co.nz](mailto:s9(2)(a)@newsroom.co.nz)>
Cc: Media MOH <media@health.govt.nz>
Subject: RE: Media enquiry: Puberty blockers evidence brief
Hi s 9(2)(a) I'll come back to you on this

Cedric Horner (He/him)
Senior Media Advisor, s 9(2)(a)
Manatū Hauora | Ministry of Health

From: s 9(2)(a) <[s9\(2\)\(a\)@newsroom.co.nz](mailto:s9(2)(a)@newsroom.co.nz)>
Sent: Monday, 6 March 2023 2:16 pm
To: Media MOH <media@health.govt.nz>
Subject: Media enquiry: Puberty blockers evidence brief

Kia ora,

In an OIA response in October (since publicly released on the MoH website [here](#)), Joe Bourne said the ministry was working on an evidence brief on puberty blockers. I'm just curious about the progress of that brief. Specifically:

- Has it been completed?
 - If so, will it be released? What has changed as a result of it?
 - If not, when is it expected to be completed?

Ngā mihi,
s 9(2)(a)

--

s 9(2)(a)

Senior Political Reporter

newsroom.

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[@newsroomnz](mailto:newsroomnz@newsroomnz)

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