

11 OCT 2002
DISPATCHED



HEALTH REPORT

Subject: UPDATE ON GENDER REASSIGNMENT SURGERY
Date: 11 October 2002 **File Ref:** HCO1-52-01 HCO1-52-0-2
Attention: ~~Minister~~ Patsy King (Minister of Health)

Priority:	Routine	Semi-Urgent	Urgent	24 Hour
	X			

RECOMMENDATIONS

The recommendation is that you:

- (a) Note the information in this report

Yes / No

Colin Feek

Dr Colin Feek
Deputy Director-General
Clinical Services Directorate

MINISTER'S SIGNATURE:

DATE: 11/10/02

REPORT

BACKGROUND INFORMATION

1. The purpose of this report is to update you on Gender Reassignment Surgery (GRS). Currently there is no specific funding allocated within New Zealand for GRS although applications can be made to the Special High Cost Treatment (SHCT) pool under the category "treatment not currently available within the public health system".
2. The SHCT pool is a limited pool of approximately \$5 million held by the MOH for distribution on a national basis. Established on 1 July 1999, this risk pool funds procedures that are outside the DHB funding envelope. Types of treatment funded from this pool includes; epilepsy surgery, laser treatment for malignant eye tumours, corrective genital/reproductive surgery for children and specific surgery for Parkinson's disease.
3. Currently there are 7 male to female and 1 female to male GRS applications to the pool. Male to female surgery is available in New Zealand at St George's private hospital in Christchurch at an approximate cost of \$30,000. Female to male surgery is not available in New Zealand.
4. The NZHTA review of GRS in February 2002 found that the quality of the evidence for the effectiveness of GRS is poor and based on a small number of poorly designed studies. While there was some evidence that some people had perceived benefit from GRS there were also people who were unhappy with the outcomes and later sought reversal. No selection processes were available that identified, prior to surgery, which of the two categories people would fall into.
5. It should be noted that the current applications for GRS to the SHCT pool vary widely in their assessment process of the person's suitability for GRS and the likely benefit of the surgery.

COMMENT

6. In moving forward on GRS the MOH is currently putting together an advisory group who will develop a clearly defined selection procedure for those people who are most likely to benefit from surgery.

Contact for telephone discussion (if required)

Name	Position	Telephone		Suggested First Contact
		Direct Line	After Hours	
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