



**Dr. Shefali Mahesh, MD, MBA**

**Akron Children's Hospital**

**Opponent Testimony, Ohio Substitute House Bill 68 (Sub. HB 68)**

**Ohio Senate Government Oversight Committee**

**Wednesday, December 6, 2023**

Dear Chairwoman Roegner, Vice Chair Antani, Ranking Member Hicks-Hudson, and the Members of the Senate Government Oversight Committee:

My name is Dr. Shefali Mahesh, and I am the Dr. Noah Miller Endowed Chair in the Department of Pediatrics at Akron Children's Hospital as well as the Chair of Pediatrics at Northeast Ohio Medical University. As the department chair, I am responsible for the quality and evidence-based practice of the providers as well as clinical operations at Akron Children's Hospital. I am addressing you to express Akron Children's Hospital's opposition to Ohio House Bill 68 (HB 68).

Akron Children's Hospital has a mission to treat every child as if they were our own, to treat everyone the way they would want to be treated and to never turn any child away. True to our commitment, Akron Children's provides care to children and families who show up at our door for any medical condition, including issues related to gender identity. Some come asking about medications, and others are unsure of what path is right for them. We were founded on the principle of serving the needs of the community and, in accordance with our mission, we simply cannot turn these children away. Instead, we have developed a comprehensive approach to treating gender dysphoria which acknowledges its complexity and the need for a multidisciplinary approach to its management.

Despite the mischaracterization of gender clinics across the state, our Center for Gender Affirming Medicine has provided multidisciplinary and family-centered care to transgender youth through rigorous, thoughtful, evidence-based practices. Our comprehensive approach includes a detailed intake process, followed by numerous interactions with mental health professionals, social workers and adolescent medicine providers who are trained in the emotional, psychological, and developmental stages of these children.

At Akron Children's we care for over 320,000 unique patients each year. Only 0.0015% are under the care of our multi-disciplinary team in our Gender Affirming Care Clinic.

As I noted, 100% of patients in our clinic are supported by a therapist. This rigorous assessment is designed to evaluate the persistence of the child's gender preference, understand the social and psychological context of their gender identity and how it might intersect with other mental health conditions. We acknowledge that

there are associated psychological conditions that need to be evaluated and treated simultaneously. This is a sensitive and delicate time for these children, and this distress is only intensified as their bodies continue to develop in ways that exacerbate their disconnection to their birth gender. It is crucial to care for these children with dignity and respect so that they are willing to accept and embrace the education and mental health therapy that it is a significant part of their treatment. In 80% of our patients, mental health therapy is the only treatment needed. While the proponents acknowledge the importance of mental health, HB 68 creates additional barriers to mental health therapy.

Only 20% of children may require medications and extensive individualized counseling – accompanied by their parents – to ensure that the path they've chosen is best suited to their needs. Most patients receiving any medication at Akron Children's are 16 years of age or older. Any medical treatment is initiated after parental consent, and unequivocally without intimidation or coercion.

Recently, we hospitalized a gender diverse patient who purchased "hormones" off the internet and was injecting this unknown substance into their body. By restricting access to care for our patients, we will not only see an increase in our already unmanageable mental health crisis, but we will likely see an increase in dangerous medication-seeking behavior that puts these children at risk for blood-borne diseases. This will also result in potential skin and fatal bloodstream infections due to youth self-administering unregulated "medications." We argue that, rather than our government abandoning children and forcing them to treat their own medical conditions and live several years without medically based treatment, we continue to allow licensed, train professionals – with years of experience – to do so using the rigorous and thorough guidelines.

The debate about this issue has grossly mischaracterized the work being done across the state to help children. Continued comprehensive mental health assessments and therapies are important guardrails when pubertal blockers and cross sex hormones are used. Despite many claims by non-medical professionals, off-label use of medication is not improper and is common in the pediatric population. And, just like any other medical condition that is becoming more common, gender dysphoria should be monitored, studied, and analyzed using scientifically proven methodology. HB 68 lists no exceptions for clinical trials and research. By banning gender affirming care, HB 68 will prevent any systematic and scientific study of this condition.

The assessment, care, treatment, and support of gender diverse children and adolescents, as well as their families, is complex and needs to be individualized. Sound decisions on appropriate care are made when patients and families work together in partnership with health care providers who have expertise in child and adolescent development. Critically important for this population is that youth with gender dysphoria have the support and guidance regarding all proven treatments available and identified by their care teams. This is to ensure that the outcome of the treatment is best suited for the long-term interest of each individual patient.

HB 68 goes against the basic principle of medicine: that health care should be individualized based on each patient's internal and external environmental needs, with an emphasis on shared decision making by patient families and their health care professionals. Because of that, I respectfully request that this committee not advance HB 68. The passage of HB68 will likely result in catastrophic unintended consequences for an albeit

very small, but highly vulnerable number of Ohio's adolescents who desperately need professional advice, guidance and treatment from a team of pediatric and adolescent experts. Please don't create an environment in which a vulnerable population of Ohio kids and their families are deprived of the health care they desire.