Ana Catalina Arce-Clachar 1854 Tossing Mane Ct., Dayton, OH 45458

May 26th, 2022

Susan Manchester, Chair Ohio House Families, Aging and Human Services Committee Ohio House of Representatives 77 South High Street Columbus, Ohio 43215

Dear Chairwoman Manchester, Vice Chair Cutrona and Ranking Member Denson,

My name is Ana Catalina Arce-Clachar and I am a practicing pediatric gastroenterologist. I have over 11 years' experience in caring for patients and am currently licensed to practice in Ohio.

The Ohio General Assembly should leave the practice of medicine to licensed healthcare providers. I am gravely concerned that HB454 sets a dangerous precedent by interfering with medical decision making and parent/caregiver autonomy to discuss care options in consultation with their child's medical provider.

As I practice medicine, I perform a thorough evaluation on each patient and make treatment recommendations based on the best available evidence for that individual's situation. In my experience, parents/caregivers do the best they can, often in difficult circumstances, to make decisions they believe are in their child's best interest. An example of this is the treatment of gastrointestinal disorders such inflammatory bowel disease, eosinophilic esophagitis, feeding difficulties, dysphagia and liver disorders such biliary atresia, primary sclerosing cholangitis, fatty liver.

HB454 would place medical professionals in an ethical dilemma: we would have to refrain from providing evidence-based care to patients struggling with a diagnosis of gender dysphoria or lose our medical license. I cannot imagine another diagnosis where a state law would prohibit us from delivering evidence-based care.

In a time when the demand for child and adolescent mental health care is at its highest, HB454 makes the demand even higher. I address patients' mental health every day in my fatty liver clinic. These patients struggle a lot with depression and anxiety due to their obesity and comorbidities and in many cases their obesity is due to the medications they are on for their depression. Very often when I refer a patient to our behavioral specialist the wait list is long or

if we need to send someone to the ER due to suicidal ideation they can be there for hours/days before having a bed available at a mental care facility.

I was trained to treat the whole child; ignoring a child's mental health or a diagnosis like gender dysphoria is simply not responsible care. I implore you to vote no on HB454. This bill sets a dangerous precedent.

Sincerely,

Ana Catalina Arce-Clachar, MD

Assistant Professor

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