

**OREGON ACADEMY OF FAMILY PHYSICIANS
CONGRESS OF THE MEMBERS
79TH ANNUAL MEETING
May 2, 2026
Resolution #3**

Introduced by: Steve Wahls MD, Andrew Janssen MD, William Toffler MD

Title: Evidence-Based Standards for Pediatric Gender Distress and Detransition Care

- 1 **WHEREAS**, leading health authorities in Finland, Sweden, Denmark, the United Kingdom, and
2 the landmark Cass Review (2024) now prioritize psychosocial support over medical transition,
3 noting that the evidence base for pediatric medical intervention is "remarkably weak"; and
- 4 **WHEREAS**, in early 2026, the American Medical Association (AMA) and the American Society of
5 Plastic Surgeons (ASPS) updated their standards to recommend deferring gender-related
6 surgeries for minors until adulthood (age 19+); and
- 7 **WHEREAS**, the Missouri Supreme Court (2026) upheld the SAFE Act, affirming state authority to
8 prohibit medical transitions for minors and establishing a 15-year statute of limitations for
9 medical liability, while a \$2 million New York jury verdict (*Varian v. Einhorn*) found providers
10 liable for "departure from the standard of care" regarding minor mastectomies; and
- 11 **WHEREAS**, an increasing number of individuals seek to pause or reverse medical transition, yet
12 family physicians lack standardized clinical protocols, diagnostic coding, and referral pathways
13 for detransition care;
- 14 **WHEREAS**, family physicians in 'shield' states like Oregon require updated toolkits to navigate
15 the conflict between state-level legal protections and the 2026 shifts in national clinical
16 consensus toward caution. therefore, be it
- 17 **RESOLVED**, that the AAFP promote comprehensive psychosocial assessment and non-invasive
18 mental health care—including watchful waiting—as the primary, evidence-informed approach
19 for gender-distressed youth, and advise families on the potential harms of early social
20 transition; and be it further
- 21 **RESOLVED**, that the AAFP support delaying irreversible medical interventions—including
22 puberty blockers, cross-sex hormones, and surgeries—for minors until they reach the age of
23 legal medical consent (19+); and be it further
- 24 **RESOLVED**, that the AAFP update its LGBTQ+ Health Toolkit to include evidence-based
25 detransition resources—such as those from the Society for Evidence-based Gender Medicine
26 (SEGM) and Resilience Health Network (RHN)—incorporating protocols for hormonal cessation,

27 HPG axis monitoring, and mental health screening for regret and comorbidities for
28 detransitioners and individuals with non-linear gender trajectories.

29 **Supporting Documentation**

30 **Rationale**

31 Current AAFP policy must adapt to the 2026 shift in national and international consensus. With
32 the AMA and ASPS now prioritizing caution and the Missouri Supreme Court affirming the
33 legality of age-based restrictions, family physicians face a new landscape of medical liability and
34 clinical expectations. This resolution provides a "psychosocial-first" framework that protects
35 both the patient's long-term health and the physician's professional license. Integrating
36 detransition protocols ensures that the AAFP offers "whole-person" care for the growing
37 population of patients seeking to restore innate sex traits. Current AAFP policy must reflect the
38 movement toward "mental-health-first" models. Family physicians require specialized tools like
39 those from SEGM and RHN to provide ethical, evidence-based care for the growing
40 detransitioning population.

41 **Resources**

- 42 • Clinical: The Cass Review (2024), SEGM (Detransition Typology), and Resilience Health
43 Network (Restorative Protocols).
- 44 • Legal: *E.N. v. Kehoe* (MO Supreme Court, 2026) and *Varian v. Einhorn* (NY Jury Verdict,
45 2026)

46 **Fiscal Note**

47 Low Impact (Estimated \$5000). Costs are primarily administrative, involving the curation and
48 digital integration of external clinical links (SEGM/RHN) into existing AAFP toolkits. These costs
49 are offset by the potential reduction in medico-legal risk and liability insurance premiums for
50 members by aligning AAFP guidance with current state laws and 2026 judicial rulings.