



# AB075. SOH22ABS110. Gender affirmation surgery: increases in demand requires urgent service planning

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**Background:** According to the Irish National Gender Service, there has been a 7-fold increase in demand for gender affirmation surgery over the past decade. Since no reconstructive service currently exists, the Internet remains a key and ever-evolving source of information for these patients. We aimed to assess the quality and readability of online information available to patients in relation to gender affirmation surgery.

**Methods:** We investigated the first 200 websites that appear on the search engine Google when the term 'gender affirmation surgery' is searched. Websites were then sorted into eight categories: commercial, government, health portal, news, non-profit, professional, scientific journal and others. Criteria for website exclusion include inaccessible websites, websites containing <1 sentence, articles >15 years old and duplicates. Website quality was assessed using the JAMA Benchmarks and inter-rater reliability was quantified using Cohen's kappa.

**Results:** There was a critical lack of information regarding indications, suitability, pre-operative assessments, risks and potential complications, and expected quality of life outcomes. Quality of information was often less than satisfactory as evidenced by a median JAMA score of less than 3. The highest score achieved by any website was 3. Of concern, fifty percent of these websites were categorised as professional with a paucity of scientific journal publications.

**Conclusions:** The increased demand for gender affirmation surgery should be married with accurate, high-quality information available to both prospective patients and their treating physicians. Increases in demand for gender affirmation surgery need to be matched with funding to develop reconstructive services. To guide us in producing an accurate and readable patient information resource we are currently undertaking a survey of this patient cohort to assess the needs of this population.

**Keywords:** Gender affirming surgery; top surgery; bottom surgery; service evaluation; national gender service

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## Footnote

*Conflicts of Interest:* The authors have no conflicts of interest to declare.

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