

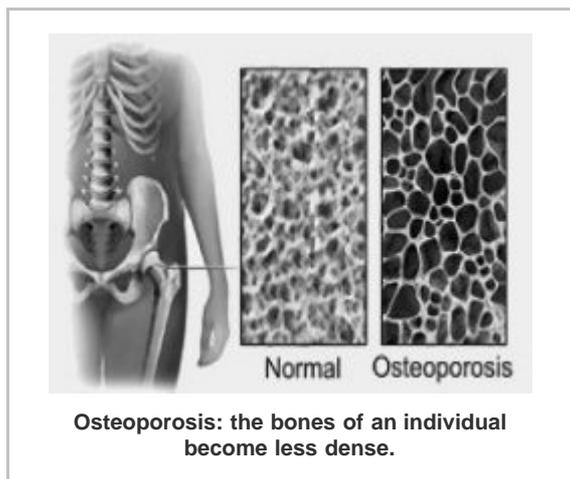
(The Gender Centre advise that this article may not be current and as such certain content, including but not limited to persons, contact details and dates may not apply. Where legal authority or medical related matters are cited, responsibility lies with the reader to obtain the most current relevant legal authority and/or medical publication.)

Osteoporosis

Once it has Taken Hold, There is No Cure

by Boys Own, F.T.M. Newsletter U.K.

Article appeared in Polare magazine: April 1996 Last Update: October 2013 Last Reviewed: September 2015



In the disorder, bone mass falls - that is the bones of an individual become less dense, and as a result they are more easily broken. We all know of the old lady who had a very small fall and broke her hip! Once the disorder has taken hold, there is no cure. The only things that one can do to help oneself are to keep fit and healthy, but the bone mass destruction cannot be reversed.

Osteoporosis starts when there is a hormone shortage - hence the reason that so many post-menopausal women suffer from it.

Those F.T.M.s who seem most at risk are those transsexuals who commenced oral therapy, rather than beginning with intramuscular forms of therapy. That is, those who began by taking testosterone in tablet form for a period, rather than having injections straight away.

The other group at risk are those transsexuals who have taken their hormones in such a way that at periods of time their body has suffered a hormone shortage. For example, this would include an individual who did not ensure they had their injections regularly enough, or skipped a few days every now and then. Or it would include those individuals who had had periods in which they did not take their hormones. Or it could include those who have a larger dose less frequently.

Osteoporosis starts when there is a hormone shortage - hence the reason that so many post-menopausal women suffer from it. The approach to dealing with this problem in older women is to provide them with Hormone Replacement Therapy (H.R.T.) at the time of their menopause and after it. The hormones they are provided with are female hormone - I don't suppose that therefore is an option for most F.T.M.s - though it would be interesting to see if there has been any research on the effects of providing a small dose of female hormones to counteract the possibility of Osteoporosis.

As I said there is no cure for Osteoporosis - but you can prevent further deterioration. This is done by monitoring your hormone levels and working out for you an appropriate dose, that maintains you within the normal masculine range.

To discover whether you have Osteoporosis, you need to discuss it with your G.P., who will consider sending you to see a specialist, or arrange X-Rays and Bone Scans.

This is certainly necessary for anyone who changed over ten years ago or more.

Polare Magazine is published quarterly in Australia by The Gender Centre Inc., which is funded by the Department of Family & Community Services under the S.A.A.P. program and supported by the N.S.W. Health Department through the AIDS and Infectious Diseases Branch. Polare provides a forum for discussion and debate on gender issues. Unsolicited contributions are welcome, the editor reserves the right to edit such contributions without notification. Any submission which appears in Polare may be published on our internet site. Opinions expressed in this publication do not necessarily reflect those of the Editor, The Gender Centre Inc., the Department of Family & Community Services or the N.S.W. Department of Health.

The Gender Centre is committed to developing and providing services and activities, which enhance the ability of people with gender issues to make informed choices. We offer a wide range of services to people with gender issues, their partners, family members and friends in New South Wales. We are an accommodation service and also act as an education, support, training and referral resource centre to other organisations and service providers. The Gender Centre is committed to educating the public and service providers about the needs of people with gender issues. We specifically aim to provide a high quality service, which acknowledges human rights and ensures respect and confidentiality.