

The Impact of Transgender Surgeries on the Practice of Anatomical Pathology

Type: Opinion

Received: January 18, 2024

Published: January 27, 2024

Citation:

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"The Impact of Transgender Surgeries on the Practice of Anatomical Pathology". PriMera Scientific Medicine and Public Health 4.2 (2024): 19-20.

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Background

The landscape of medical practice and healthcare is gradually evolving, and with it, the field of anatomical pathology is experiencing transformational changes. These changes are noteworthy in the field of transgender medicine and gender-affirming surgeries. This editorial piece seeks to explore the impact, implications and challenges that transgender surgeries pose to anatomical pathology practices and to emphasize the need for adaptation and sensitivity in pathology services to cater to the diverse needs of transgender patients.

Histopathologic Implications of Transgender Surgeries

The gender transition process for many transgender individuals usually involves gender-affirming surgeries, such as phalloplasty, vaginoplasty and mastectomy. Thus, anatomical pathologists will find themselves interpreting more unique anatomical changes because of the increasing demand for these surgeries.

As far as the gender transition process is concerned, the field of anatomical pathology will continue to play a crucial role in the pre-operative assessment, intraoperative evaluation, and post-operative examination of specimens obtained from transgender surgeries. Histopathological analyses of tissue specimens are crucial for confirming successful surgical outcomes and diagnosing complications. Thus, Pathologists must be aware of the diverse anatomical variations emanating from gender-affirming surgeries and adapt their diagnostic approaches accordingly.

Standard diagnostic breast pathology criteria may not be completely applicable to mastectomy specimens from transgender surgeries; therefore, anatomic pathologists will need to collaborate with surgeons to establish comprehensive guidelines considering both diagnostic accuracy and the unique needs of transgender patients.

The creation of neo-vaginal and neo-phallic tissues in transgender surgeries introduces new considerations for anatomical pathology practice. Evaluating these reconstructed anatomical structures requires a good understanding of the surgical procedure and the ability to recognize and separate normal histological features from surgically induced changes. Standardized reporting systems will have to be developed to ensure communication between surgeons and pathologists, ensuring accurate interpretation of pathological findings.

Patient-Centered Approach to care

Transgender individuals often face unique healthcare challenges such as stigmatization and discrimination; so it becomes imperative that anatomical pathologists should prioritize cultural competence and sensitivity in their interactions with transgender patients, ensuring that pathology reports and discussions are conducted with empathy, respect and confidentiality.

Suggestions for Education and Training

To navigate these evolving challenges, continuous education and training initiatives are essential for anatomical pathologists in the realm of transgender medicine. Pathology residency training programs and professional development courses should introduce transgender healthcare considerations that will enhance the skills and awareness of pathologists, to foster a more inclusive and competent pathology workforce.

Conclusion

The increasing prevalence of transgender surgeries requires a thoughtful evaluation and consideration of their impact on the practice of anatomical pathology. Pathologists must adapt their diagnostic approaches to accommodate the unique anatomical changes resulting from gender-affirming surgeries while maintaining a patient-centered focus. Collaboration between surgeons, pathologists, and educators is important to develop guidelines that ensure the delivery of accurate and culturally competent anatomical pathology services for transgender individuals.

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