



Senate Human Services Committee

HB 1254

March 15, 2023

Chair Lee and Committee Members, my name is Courtney Koebele. I am the executive director of the North Dakota Medical Association. The North Dakota Medical Association is the professional membership organization for North Dakota physicians, residents, and medical students.

NDMA opposes this bill. The NDMA Policy Forum recently passed a policy opposing the criminalization of medical practice. This policy states as follows:

NDMA should take all reasonable and necessary steps to ensure that evidence-based medical decision-making and treatment, exercised in accordance with evidence-based standards of care, does not become a violation of criminal law.

This bill makes evidence-based medical decision making and treatment of transgender individuals a violation of law. NDMA has concerns about the legislature getting between the physician/patient relationship and the accepted medical standard of care. There are physicians and a psychologist here today to testify as to the details of that treatment, and why patients would be harmed if it was made a crime.

NDMA requests a DO NOT PASS recommendation on the bill. In the alternative, NDMA would offer an amendment, which conforms to accepted medical practice in this area of medicine. Thank you for the opportunity to testify today. I would be happy to answer any questions.

1. Gabriela Balf, MD, MPH – Psychiatrist, Internist, Public Health agent
 - **Gender Dysphoria is real**
 - **Science informs understanding of the biological underpinnings**
 - **Care for transgender youth has been around for decades**
 - **When care is not available, harm is done**

2. Danial Sturgill, PhD – Clinical Psychologist in Gender Care
 - **Major Medical Organizations (both local and national) support care guidelines**
 - **Gender assessments are comprehensive**
 - **Gender Care involves ongoing, multi-disciplinary review**
 - **Parents and providers work collaboratively in decision-making**
 - **Youth do have capacity to assent to treatment**

3. Amanda Dahl, MD – Pediatric Endocrinologist
 - **Review of patient and family journey through medical process**
 - **We have positive outcomes**

4. Luis Casas, MD – Pediatric and Adult Endocrinologist
 - **Puberty blocking is safe and reversible**
 - **Hormone usage is safe and only initiated for those meeting criteria**
 - **Detransitioning is almost never related to regret**

5. Rachel Peterson, MD – Ob-Gyn
 - **Detransition is rare and almost never related to regret**
 - **Success in treatment is higher than in many other areas of medicine**

6. Mayson Bedient, DO – Family Medicine
 - **Family Medicine identifies needs for care**
 - **Gender dysphoria is not the same as depression**