

## Trans Health Services

- General primary care & HIV primary care
- Hormone therapy
- Referrals to TGNC-sensitive specialists & surgeons
- Transgender Sexual Health Clinic (routine sexual health screenings, clinical chest/breast exams, SRS follow up, pap tests, STI screening & treatment, and safer sex counseling)
- Health education
- HIV testing and counseling
- Alternative Insemination Clinic
- Mental Health Services

### Resources

Vancouver Coastal Health Trans Health Library: [transhealth.vch.ca/resources/library/](http://transhealth.vch.ca/resources/library/)  
Love Your Body!: [transequality.org/PDFs/HealthFacts.pdf](http://transequality.org/PDFs/HealthFacts.pdf)  
Hudson's FTM Guide: [ftmguide.org/](http://ftmguide.org/)  
Trans-health.com  
Mazzoni Center Resources: [mazzonicenter.org/resources](http://mazzonicenter.org/resources)

## Safety First!

### Why get hormones from a provider?

By getting your hormones from a provider you can be sure that you're taking the right dosage for your body, that you are certain about the quality of your hormones, and that your health is being monitored.

### What about sharing?

Sharing hormone vials and syringes can increase your risk of getting HIV or Hepatitis C and increase scarring at the injection site. If you do share hormones, it is best to use your own syringe. Talk to your provider or the Transgender Case Manager for resources for syringes.

## Hormones @ Callen-Lorde

Callen-Lorde uses an informed-consent process.

- (1) **Make an appointment to start hormone therapy.** If you're already a patient, make an appointment with your medical provider. If you are under 21, see the HOTT Clinic.
- (2) **Tell your provider you want to start hormones.** If you already take them & want to have them monitored by your provider, discuss the hormones you currently take.
- (3) Your provider will give you a **physical** and take your **medical history**, then you will give blood for **labwork**, and have a **counseling/education** appointment.
- (4) Follow up with your provider to review labs and discuss hormone risks, benefits, doses, alternatives, address concerns, and **discuss next steps towards starting hormones.**
- (5) **Follow up with regular labwork** and provider's appointments to **monitor your health** and progress.

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Services for Transgender &  
Gender Non-Conforming  
(TGNC) People

## All About Estrogen



Callen-Lorde Community Health Center



## Estrogen, what is it?

Hormones are like messengers. They tell your body how to work and they regulate many of your body's functions, like growth, sex drive, hunger, thirst, digestion, metabolism, blood sugar, cholesterol, fat placement, hair growth, breast growth, voice changes, bone growth. Taking hormones encourages your body to take on some of the sex characteristics that are associated with estrogen.

### If I stop hormones, are the changes permanent?

Except for breast growth, most changes are not permanent. Breast and nipple growth may decrease depending on length of treatment. Estrogen may also affect sperm production and result in infertility.

### What won't estrogen do?

Estrogen won't raise your voice, make your facial hair disappear, cause your body to produce more of its own estrogen, create a "perfect" figure, make everything better, or make immediate changes to your body.

### Are there risks?

Some of the risks of taking estrogen may include: headaches, including migraines; liver disease; high blood pressure; unhealthy changes in cholesterol (decreased HDL and increased LDL); nausea or vomiting; discharge from your nipples; benign growths in the brain; gallstones; blood clots (which can cause lung damage, stroke, heart attack, or problems with the veins in your legs); increased risk of heart disease; and increased risk of breast cancer. Your provider will discuss with you in more detail about health risks specific to your medical history.

**BODY** Breast growth begins in first two months and may continue for years; increased nipple sensitivity; body fat moves from stomach to hips, thighs, and butt; muscle mass and upper body strength decreases; thin layer of fat softens facial features; skin softens; testes, penis, and prostate may decrease in size; erections may become less intense or more difficult to maintain; sex drive and orgasms may decrease.

Very few people experience changes to facial hair; **HAIR** hair may appear finer or lighter; body and facial hair growth may slow; some anti-androgens may slow pattern baldness.

**MOOD & ENERGY** Energy levels may decrease; metabolism may slow; potential changes in sex drive and/or sexual functioning; possibility of weight gain; some people report experiencing their emotions and feelings differently; mood swings and hot-flashes are possible.

Transitioning takes time, and your timeline might **TIME** be different from others you know. In general it will take a few years to see the full extent of hormone therapy's effects on your body, but you will see changes happen before that, too! In the first 6 months, you might notice softening of your skin and features, some breast development, and some changes in your sex drive. For a couple years after that, you might notice further breast development, slowing of pattern baldness, and a decrease in testicular size.

## What? How? How Much? Cost?

**WHAT?** There are two parts of hormone treatment: the anti-androgen, like spironolactone ("spiro") and the hormone, estrogen (or sometimes progesterone). Most medical experts think estrogen is more effective and less risky than progesterone. Many people report feeling that estrogen is more effective than progesterone at feminizing the body.

All bodies are different, so everyone experiences hormones differently. Talk with your provider about your progress, questions, or concerns to be sure you are finding the right treatment and dose for you.

Anti-androgens come in pills. While **HOW?** hormones can come in different forms, we prescribe injections, pills, and patches. Your provider will help you decide which is best for you.

**HOW MUCH?** Hormone doses vary; you and your provider will agree upon the treatment that is best for you based on your goals and other medical history. The most important rule of hormone therapy, though, is **more is not better**. Taking more than your recommended dose can increase risks and in some cases may have masculinizing effects.

Not all insurance covers hormones, and **COST?** Medicaid will not cover it if your Medicaid card has an "M" on it. Talk to our Pharmacy about greatly reduced hormone prices.