

1-2-69
Dr Lamb

Rough Notes

Transsexualism is a disease which is different from homosexuality or transvestism. It is a disease in which the patient feels that he actually is of the opposite sex. Patients feel they have had this desire ever since birth and quite frequently their parents corroborate this. It is not felt to be induced by the environment, although possibly some cases have been aggravated by the environment. Rather, it is felt that the affected person was born with some abnormality that produced a thinking pattern in the brain which works as the opposite sex. Therefore, in the most simple and absurd terms the person, for example, would have a male body but a female mind.

A logical treatment then would be psychiatric interview or some type of psychiatric therapy. It is well-known and established from experience that psychiatry has very little or no effect on this disease.

Surgery is usually recommended. It has not been widely accepted in the United States to date, although thirty operations have been performed by a urological surgeon, Dr. Elmer Belt in Los Angeles, and four operations have been performed at the John Hopkins Medical Center in Baltimore. I believe there is an active program at the University of Minnesota, although I do not know about the surgical results. This surgery is done in Casablanca and in Tijuana.

The person in the United States who is well-versed in the disease is Dr. Harry Benjamin of San Francisco and New York. He has written a book entitled, "The Transsexual Phenomena."

Although it seems quite absurd that a disease such as this should actually exist, I believe that there are patients who fit into this category. Almost all of these patients are dressed as women and carry out, to the fullest extent, a life of the opposite sex (90% of the patients were males desiring to be females) even changing their name.

The operation of sexual conversion is the medical term for the operation. It implies the alteration of male genitalia to make the patient's sex organ more similar to that of a female and more compatible to her psychological needs.

Sexual conversion operations are combined with an extensive psychiatric interview and support throughout the entire episode. Endocrinologic or hormone treatment accompanies the operation.

The operation is not widely practiced to enable us to relate an accurate picture of the side-effects. Dr. Belt's thirty cases in Los Angeles were all successful from the standpoint of the patients being pleased.

We are now investigating the disease to determine if surgery is worthwhile. We have not performed a sexual conversion operation at Stanford to date, except for corrective surgery on four patients who have had a sex alteration elsewhere.

We have not yet decided if Stanford will embark on any program in this field in the future.

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