

HORMONES AND ME



THE COMPLETE ANSWER BOOK FOR THE
TV OR TS WHO CONTEMPLATES TAKING
FEMALE HORMONES.

Hormones And Me

BY: **SALLY
DOUGLAS**

This year seems to be the IN year for bosoms. Everywhere I go, these days, I bump into gals who seem to be getting hormones from somewhere. Interestingly enough, most of them seem to be pursuing a "do-it-yourself" program of experimentation with various formulations at varying dosages in the hope that by so doing they will be able to hit on the right combination to develop lovely breasts. Even some of my friends, who had successfully resisted this temptation for years and who had positively asserted that they would never take hormones, have succumbed, and are now forging gloriously ahead into the never-never land of hormone therapy.

Last year, of course, everyone was interested in prosthetics, and some of the girls did achieve notable success with them but it would seem that the urge to realism is overpowering these days, so one doesn't hear so much of prosthetics anymore. Perhaps it's only that more of the girls are leading active sex lives, instead of hiding in the closet. If this is indeed true, it is a very healthy state of affairs; and, perhaps, real bosoms are really worth all the trouble the girls go through to get them.

I find, in my own life, that real breasts are a lot more fun to have than prosthetics ever were, but before I proceed too far into the story of my experiences with breast growth, I would like to take a moment to look again at the relative advantages and disadvantages of prosthetics.

As you know, the process of growing one's own bosoms is a lengthy one. Conversely, getting rid of bosoms that have formed-should a person be motivated to do so - is an equally lengthy process. So, people who change identities back and forth frequently, from male to female, can not successfully embark upon a course of hormone therapy. They must employ other methods to achieve realistic cleavage; and

this is where prosthetics come into their own.

From a practical standpoint, if it turns out that you're a closet drag, or a true transvestite (as differentiated from a transsexual), or if you have a wife who doesn't know about you and doesn't want to, prosthetics are probably not only the best but the only answer for you. They provide you with a very realistic picture of how you would look if you really went ahead to develop your own superstructure. And, what is equally important, they come off easily when it's time to change back.

The main problem with latex breasts is that they don't turn out to be very practical for everyday wear. They're difficult to put on, and hard to keep looking nice. They are expensive, hot and uncomfortable, and they don't move or feel like the real thing.

What's worse, if you move around fast enough to work up a sweat, they won't stay glued on. So that, if you want to go out in public and show off your stunning figure topless, they're completely out of the question!

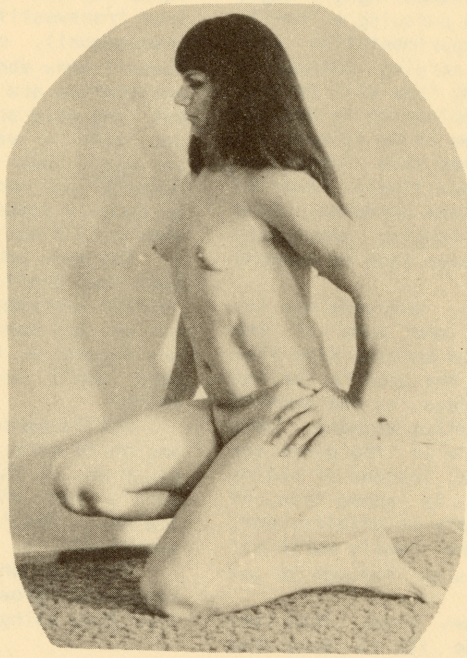
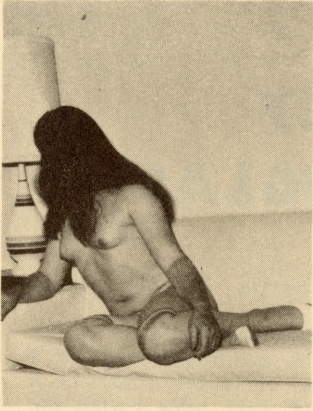
This is why most of the professionals have been growing their own mammaries rather than using falsies.

REAL BREASTS

Having thus relegated latex breasts to the studio, what does one do for breast development if one's not the closet type? What is the answer for the girl who likes to be social, who dates a lot, makes love to other girls, and wants to appear realistic at parties?

Well, obviously, under conditions like this, a girl has to have her own. Which brings us to the point of this article: How does one go about getting set-up with real breasts, anyway?

(Continued on the next page)



METHODOLOGY

There are, currently, three possible ways to get permanent bumps on your chest - One way is to use silicone injections & increase the volume of your breasts without surgery. Another is to go for surgical implants. (This way seems to be favored both by plastic surgeons and girls who want a lot of tissue in their breasts.) The third way is to start hormone therapy.

Of these three techniques, for reasons that I will explain later, only one seems safe.

This one, accepted, safe technique is to use estrogen, or a combination of estrogen and progesterone, to encourage one's body to grow its own natural breast buds. Using this method, one can develop very satisfactory breasts in a reasonable time, at relatively low cost and with a minimum of inconvenience. However, beware! Even this may not be suitable for you.

Hormone developed breasts are not exactly a universal solution that you can use indiscriminately. In fact, estrogen therapy, in some of its forms has been known to produce very undesirable side effects! So, if you must start off along this path, do yourself the favor of going to a knowledgeable physician; and, within reason, take his advice about your physical condition and your tolerance to estrogen.

Please note, in addition, that prescription estrogen is very inexpensive. So there's no real need for you to resort to the black market unless you're a do-it-yourself type or you're so shy that you can not bring yourself to talk to a doctor. (If you're this shy you really shouldn't start at all!)

A word to the wise is insufficient, n'est-ce pas?

Furthermore, as contrasted to the purely physical problems that may be introduced into your life by estrogen therapy, there are certain psychological problems that can crop up as a result of your changing form; and, if you aren't careful to keep your head screwed on right, the pressures that build up inside from your reactions to the attitudes of the people around you can be completely disorienting.

This process of keeping your head screwed on right is called mental health, and, if you're in doubt about it, sometimes a mental hygienist or a shrinker can be

helpful in getting you pointed in the right direction.

As a very minimum, however, it is absolutely necessary that you start out in the right frame of mind - which means that you should be reasonably sure about the real motivation behind your decision to grow breasts. As I see the picture, and I don't say this lightly, the use of hormones to develop one's breasts is only reasonable if one's self concept falls within a certain specific framework.

What I mean by this is that you either have to have developed your feminine self-image to the point at which you are convinced that you want to live the rest of your life as a girl, or you have to have recognized that your feminine personality split is strong enough to enable you to live as a gynecomast comfortably. Nothing outside these broad boundaries will work out.

However, if conditions exist in your life that you are reasonably similar to these, and, in addition, you have found a girl who digs you feminine, then natural breasts may be quite allright for you.

The problems arise when you aren't really sure of what you are; and, if this is your case, real breasts can be a source of trouble rather than an asset.

What happens, when you find yourself vacillating back and forth in your feelings, is that you start and stop the treatment rather than giving it a real chance; so the therapy can never work out for you. Also, whatever breast development you do happen to have at the moment will very likely be wrong for your mood.

This whole festering dissatisfaction with the state of affairs that exists can be so un-nerving, especially if you don't have an understanding lover who can help put it in perspective, that it can ruin your whole attitude toward life!

COMPLICATIONS

One of the things I noticed, once I started developing my own breasts, was that my life suddenly became very much more complicated. Things that had been going along in the groove before began to get all messed up.

For example, one of the notable things that cropped up immediately was that I found I had to change my whole style of

prospecting for new girl friends.

My old technique, which had been relatively successful, relied almost entirely on my ability to appear to be normal male-- a thing I could do well enough before my breasts began to grow. But, once my upper body started to appear feminine, this whole approach went down the tubes!

To put it another way, as a patently normal male, I never really had any trouble dealing with the question - which was usually the first in a long developing series - of what the nickname Sal stood for. With the up-tight gals, I would just let it go that Sal stood for Sal - and I didn't really feel too badly about telling a white lie like this because I wouldn't keep up a friendship with such a girl long enough for it to reach intimacy, anyway. With the others, I would always say that Sal was short for Sally; and, when the eyebrows raised, I would point out, with considerable justification, that there were lots of names around for Sally that were unisexual. (Shirley, Billie-Billy, Jean-Gene, Pat, etc.) This would get me over this hurdle without any necessity for lying, while leaving the question essentially open for further discussion.

However, with a female upper body, it's too much of a coincidence to have a girl's name, so I had to completely revise my ideas on how to approach the problem.

In the days before I had my own breasts I could meet any girl who appealed to me, by any means available; and, having thus made contact, I could settle down to let the relationship develop at its own pace. I didn't need to be in any great hurry to explain to the gal that I lived part of my life as a girl. In fact, it was usually better to take a while to bring her up to speed, because I found from experience that the revelation was most successfully made after we had become intimate. At this point my friend would have a real interest in keeping the affair going, and had found that she could, for the most part, trust what I told her.

However, with the bumps there for everyone to see, the transsexual question usually had to come first; and, of course, there then arose the problem of trying to diagnose, ahead of time, what a gal's probable reaction to my bosoms might be - a thing that's very hard to do within the limits of the general conversational patter

that one gets into on dates.

In reality, one can only be entirely sure of a girl if one knows that she has previously been involved with another transsexual; and there aren't too many girls like this floating around. So the enterprise is fraught with some difficulty.

In this connection, I used to think that I was pretty good at diagnosing what made females tick; what their underlying motivations were; and how they might react in given situations. And, I have to admit that my batting average has been fairly high. But, occasionally I have a disastrous failure. Usually this happens when a girl has emotional problems of her own that she wants to keep hidden from me, so the resulting relationship can become exceedingly fouled up indeed!

Such a situation occurred rather recently when my male side (whatever that means these days) met a girl who had a problem like this.

As I later surmised, she was bothered by strong feelings for her own sex which she tried to keep smothered because of misguided early moral training. In this attempt to remain straight, she would not only withdraw violently from any situation that threatened her with involvement with a girl - which was bad enough - but she would also be compelled to verbalize homosexual epithets about anyone she suspected of being gay. (A syndrome called homosexual panic, which, unfortunately, is all too common in our society.)

Of course, I didn't know this when we started dating and as far as I could tell, she seemed not only to be fairly normal girl, but a rather hep individual as well.

The conversation was certainly exhilarating enough in the beginning. On our first date, she deliberately let slip that she taught a course in sex education (no doubt to let me know that she was a free thinker and not too puritanical.) On the next date, we got on the topic of the gay scene, and talked - rather rationally, I thought - about gay life and some of my gay friends. So I noticed no really great hang-ups and, consequently, was very optimistic about the probable success of our future relationship.

The thing that went wrong, though, was that she hadn't had a man in her life for a while and was very horny. So that, even though I dragged my feet as much as I could

to keep the affair from developing too fast I found myself in bed with her long before I had time to bring her up to speed on the transsexual question!

And, of course, that blew it! Her reaction to my breasts was immediate and violent - like: "My God." You have more than I have!"

What's worse, there was no appeal from her closed mind. All I could get from her after that were miscellaneous shock statements, like: "Oh, you make me sick! You live as a woman, don't you? Your closet is full of dresses, isn't it? If I ever saw you that way, I'd throw up! I never want to see you again! Etc."

Very traumatic, to say the least!

Girls like this can often work out fine under more favorable circumstances, if brought up to speed correctly, but I've noticed that it's usually only the truly bi-girls and the lesbians who really dig breasts. The others may go along with them because they love me, but they'd really rather I didn't have them at all. (It's you I love Sal; and Sally's just a funny looking Sal!") So my particular preference is for the bi-s who have a strong bias toward girls.

Also girls like this can be very relaxed around me when I'm male (where lesbians usually can't stand me when I'm not female) so I have no problem in taking them anywhere I need to go as a male. Yet, I know they will be very turned on by my female side (a thing that keeps me relaxed), and this combination makes them very nice company, in any situation.

In the days before I had my own breasts I began to realize that if a girl was this way, no matter how fond she was of me, she still was hankering after something more stimulating than my flat chest. Sometimes this was a rather low level kind of reaction that didn't make too much difference in our relationship. But, as it turns out, some girls have an absolute fetish about breasts and can't really get turned on unless there are bumps to feel and nipples to kiss. So, if you have a girl like this and you really like her; you try to cater, somewhat, to her needs. At least I do! And I'm sure that this desire to meet my friends at least half way contributed, in a major way, toward helping make up my mind to start therapy.

Of course, now that I have my own

breasts, whenever I ask my bi-friends if I really shouldn't give up hormones and go straight again, the answer is invariably, "Heavens, NO!"

But not every girl is as definite as this. With some, the case is not nearly so clear cut, and you can get all sorts of other answers.

For example, one girl I know rather likes me to appear somewhat imperfectly feminine. It gives her a feeling of "devilishness" to go out with me when I can be read. Her attitude is that I don't need breasts at all. I make a perfectly beautiful woman without them, and her general comment is, "A lot of girls don't have anything, and don't particularly worry about it. And, anyway, you can convert to male more perfectly without them." (Emphasis mine.)

To her, this last is most important, because she's basically square and wants to be discreet among her square friends. When we are invited to swimming parties, for instance, she always worries that her friends will think I'm a freak.

Of course, being a sensation in male bikinis rather gives me a thrill. But, that isn't her bag.

Another girl, an exlesbian who desperately needs to feel she's going straight, keeps worrying about the fact that she likes to fondle my breasts. So, I have to assure her continually that this doesn't make her a lesbian; because, of course, I'm not a female. (Well, I'm not!)

Other girls seem to be able to accept the feminine name and the feminine upper body without any particular trouble. With them, as long as the affair progresses to their satisfaction; embarrassing question just never seem to come up. I'm sure they must notice all the signs, and in at least one case, it's rather obvious that the girl knows what the real score is, but there is just no problem at all.

I suspect that girls like this are simply better oriented than average; and, consequently are not concerned with the subtle nuances of sexuality. As long as they love you, they love you as a person; and trivialities of shape, sexual orientation and sexual identity are simply ignored - bless their hearts! (Too bad more people are not like this!)

If you feel you are most comfortable as a gynecomast and believe your personality

is best integrated into such a form, a girl like this can be an absolute jewel!

OTHER COMPLICATIONS

Aside from the question of girls and how they may react to you, other complications can arise which make the life of a gay necomast very uncomfortable.

For instance, you must remember that, if you lead some part of your life as a male, sooner or later you will find yourself in a situation in which it becomes socially mandatory to do things with a bare chest. And, as your shirt comes off - Behold! - there your boobs are, standing up in all their glory!

Think, for instance, of being invited to swim with your boss and his wife in their new pool. A social event you can't turn down. But, how do you explain keeping your shirt on in the water? You can't say you sunburn easily if it's evening! And how about that sailing trip, or tennis match, or just mowing the lawn on a hot afternoon?

I, personally, have no problems with things like this, because I don't care. But the point is, do you feel you can ignore social pressure; or, more importantly, can you live as a girlish-man without feeling silly?

Another traumatic situation could develop when you suddenly find yourself changing jobs and the company doctor wants to give you a physical.

Can you trust him not to blow the whistle on you?

If, for instance, you happen to be working for Uncle Sam on a defense payroll, be advised that the boys in the Defense Department like to pull your clearance, under a still directive written by President Eisenhower, if when they find out you dress; because they say you are a sexual pervert! And, of course, being dead wrong about this doesn't seem to bother them one bit!

With the bulk of scientific evidence pointing in the direction that says that people who have sexual identity problems are not in the least perverted, one would think the DOD would change its stance on this matter. But, the boys back there apparently get a big charge out of having a chance to kick someone out, so once they have any evidence they cheerfully put you out of work! (This is anti-inflationary!)

The worst part of this situation is

that it's nearly impossible to effectively challenge such unilateral action by an administrative agency as powerful as the DOD. So, once this happens, you're stuck with it!

In my opinion, this is just another exercise designed to show that the government is powerful enough to get away with unconstitutional discrimination in employment because of sex - a practice that too many government agencies seem all too prone to practice throughout the country, despite official protestations to the contrary. (ACLU please note!) But why be a scapegoat?

This has been a long chapter, but, I hope, an enlightening one. And, of course, the moral of all these stories is: Be sure before you take the plunge! Be doubly sure you know where your head is, because the buffetting you get from your friends can be devastating. And, be careful! Romances have a way of ending; and if you have developed that chest merely to please one girl, you will find yourself stuck with the change for a very long time. The breast buds don't go down nearly as fast as they come up. And unfortunately, you can't pull them off at the end of an evening or even at the end of a season!

RISKS

Assuming you don't have any of the problems mentioned above and would really like to have your own breasts, what are the physical risks? What about breast cancer? And what about chemical castration?

The cancer phobia is really the first stumbling block, because it seems rather ridiculous to go to the trouble of developing breasts only to chance having amputated later because of a developing cancer. And the cancer rumor seems always to be hanging around - perhaps fed by the sensational press accounts of what happened to Jane Doe who, it turns out, was a sex change and who died in Timbuktu of uncontrolled cancer.

While I'm not an MD and I can't give you the benefit of my personal experience, I can refer you to two excellent sources for quieting your qualms.

The first is the well known text on the TRANSSEXUAL PHENOMENON by Dr. Harry Benjamin, MD, in which Dr. Benjamin clearly states that there is no danger of a cancer developing from the use of natural estrogen. The other is a study entitled: Can O-

ral contraceptives prevent uterine and breast cancer?.. from the Bulletin of the Worcester Foundation for Experimental Biology, Vol. 4, November 1965. This study reports, in no uncertain terms, the common misconception that estrogen produces cancer in women.

As I read between the lines, I surmise that the states of affairs may be as follows:

Case of cancer of the breast, if in fact they were actually contracted by transsexuals, may have occurred because of silicone injections, surgical implantation, the use of certain synthetic hormones with harmful side effects, or a combination of these factors. There is no evidence that I can find that the use of natural estrogen has ever caused an incidence of breast cancer.

After all, as the Worcester Foundation study correctly points out, the hormone supplement Premarin is not a drug at all, but a natural body substance which is taken as a supplement or replacement for estrogen normally present in the body chemistry of both sexes. (Testosterone - the male hormone - is changed into estrogen in the liver.) And, since the body can tell no difference between its own hormones and the substitutes, it does not react unfavorably.

As a final clincher, the study concludes with the statement that there have been no adverse effects observed from the use of natural estrogen in 25 years of general use for the treatment of postmenopausal complaints in women and for the control of birth. (This can not be said for the synthetics, which are currently undergoing sharp criticism by some doctors.)

While the above sounds pretty authoritative and may well be the final answer, I would advise you to do your own follow-up study of this problem and make up your own mind before you commit yourself to a period of therapy. To help you with this, I have cited some other references to this subject in the Appendix.

The other problem, the one of impotence caused by progressive chemical castration, noted by Benjamin and others, was really of more concern to me than the worry of cancer. However, before I began therapy, first hand information on this subject was rather scarce.

A year or two before I became interested in growing breasts, I had met Harry Benjamin socially and at that time had an

opportunity to chat with him about his work; so I was inclined to believe his observation that continued estrogen therapy would produce a reduction of the libido, followed by eventual castration. However, somewhat later, a friend, whose experience I also trusted, gave me a contradictory view that intimated that things weren't really as bad as Benjamin had projected. She reported that she had taken estrogen for some time and was as horny as ever!

Very confusing indeed!

Possibly the answer is that it's simply a function of the original libido of the person under observation.

I rather suspect this is it, because my own experience confirms both observations!

In my own case, as it turned out, when the opportunity came to get some prescription Premarin easily, I was in the depths of an emotional depression brought about by the loss of a girl to whom I was deeply attached; so I wasn't overly concerned with the thought that it might sublimate my libido. In fact, under the circumstances, some moderation of my obsessive sex drive might prove to be desirable; and it seemed like this might be as ideal a time as any to experiment. So I took the step I had been resisting for years.

However, I was interested to note, in those first few months, that even though I was taking a rather high dosage of estrogen there was no diminution of my libido at all. Later, as I came out of my emotional depression, I felt like being social again. and, before I knew it, I was back in the party circuit again at full strength.

I was still as horny as ever, even though my breast were blooming. My friends couldn't believe it, and there were gloomy forecast of what would happen to me; but, there was no denying, at that time, that I was at the height of my sexual prowess. As time went on, I began to think that the myth of chemical castration was simply dreamed up by the gals who didn't have any libido to start with, as an excuse for not doing anything with girls.

My doctor was very interested in my experiences, although I suspect he didn't quite believe me.

However, as things went along, I began to notice that even though I had no trouble making out with girls who really turned me on, I was not terribly interested in swing-

ing with any woman who happened to be around. So my wild party life began to be more subdued. - a thing I rather liked, because, although I have no particular hang-ups about sex, there is always a risk of catching something if one is too promiscuous.

It wasn't until later, when my principal girl friend started complaining that I really didn't like her anymore, that it dawned on me that possibly Dr. Benjamin was right after all. It really looked like my sex drive was diminishing, because, in the early days of our romance, I had been erect all the time I was with her; but now I just acted like all the other males!

What to do? Obviously, at this point, the problem had to be faced squarely. What did I really want? Sexual ability, or breasts?

(Tune in next week to hear the conclusion of this drama!)

Well, Hell! Of course! What do you think I did? I chose to stop taking hormones! (This shows which side of me is dominant, doesn't it?)

But the funny thing was; in the process of discontinuing hormones, I discovered that one's breast growth, although it may eventually be reversible, doesn't go down nearly as fast as it comes up. But, one's libido comes right back. So all one needs to do, if one wants both to be horny and stacked, is to alternate periods of therapy with periods of rest.

This discovery is perhaps the most important one that I made during my course of therapy. I have continued with this kind of regime long enough to safely say that it works; so you really don't need to worry about the chemical castration problem either.

HOW TO FIND A DOCTOR

Now that you've finally made up your mind to go ahead with the bosoms, and you really believe that it would be better to be under a doctor's care during the process of development, the next problem to be solved is how to find a doctor who is knowledgeable enough to do you some good.

I would like to say that the following list of doctors will accept transsexual patients and then give you a list so you could call up the nearest one for an appointment. But it would seem that the Ame-

rican Medical Association frowns on this kind of thing (it smacks too much of advertising, which is unethical), so the doctors have requested that their names be withheld.

However, if you live in a less densely populated area, the probabilities are that no doctor in your area has treated a transsexual before, so you'll have to go prospecting for a doctor.

Now, lest you be worried over this task let me assure you that the process of prospecting for a doctor is not a difficult one - it just takes a little time because you may have to educate the doctor.

I would suggest you use the following method:

Go through the phone book and find a General Practitioner (GP) who lives fairly near you. Then call his office and ask what his age is. If he is under 35, and not a Catholic, the chances are that you'll probably succeed in finding a doctor on your first contact.

If he qualifies as to age, make an appointment with him and when it is time to see him, if you have experience enough with drag so that you can pass, meet him the first time as a girl.

Once you're in his office, don't beat around the bush, just tell him straight out that you've come to him because you want to begin estrogen therapy and that you want him to prescribe Premarin for you.

If he asks why, tell him that you are not genetically female - but, rather, a transsexual - and that your breasts are not large enough to satisfy you. And, if by this time he hasn't shown that he's hostile to the idea, but merely uninformed, hand him a copy of Dr. Benjamin's book or the Appendix from this article, and tell him you'd like to have him get up to speed on your problem. Then, arrange for another appointment.

Naturally, if he shows hostility, you will have to get yourself another doctor. But you don't need to worry that you've given yourself away, because the information

he has about you is absolutely confidential and he'd be violating the AMA's code of ethics if he told anyone about you without your prior permission. So you are absolutely safe in this regard.

One of my friends recently tried this method and it worked fine for her, so there is no reason why it shouldn't work for you.

HORMONE TYPES AND DOSAGE

When one starts into hormone therapy, one's usually has just made some momentous decision about the future course of one's life and there's severe pressure on to get on with the job and achieve feminization as quickly as possible. For this reason, there is always the temptation to experiment with the most potent of the synthetic estrogens and to take doses that are higher than recommended.

You should resist this temptation, because if you persist in either course you stand a good chance of ruining your health.

There are scores of synthetic hormones available today which have been developed in the pharmaceutical laboratories all over the world in the last 25 years or so. To really get the feeling of how many, you need only refer to the Merck Index under the heading of estrogen or progesterone. There you will find listed a host of preparations formulated by many, many drug companies.

However, almost all of these seem to be inferior to the natural hormone, because they invariably produce some undesirable side effect or other in people.

There are a number of preparations, for instance, based on the chemistry of a synthetic estrogen called Stilbestrol (once widely used in the chicken industry to caponize male birds.) These seem to uniformly cause morning nausea and headaches.

A very powerful birth control pill called Provest, composed of synthetic estrogen and progesterone, has been prescribed for some girls by physicians in the East. This has been reported to cause great soreness in the nipples - although this may only be due to the fact that it is taken in dosages that are too high.

The best, most easily available, least dangerous, and least expensive preparation currently under prescription is a conjugated natural estrogen called Premarin. This compound contains the entire spectrum of

natural hormones that exist in the system of the pregnant mare and is prepared by Ayerst in tablets of 1.25 milligram (mg.) (Yellow), 215 mg. (Purple) and so forth.

The yellow 1.25 mg. tablets are very common because they are used for postmenopausal estrogen replacement therapy (in women). The purple pills seem equally common although there can't be all that many transsexuals on the pill yet.

Premarin is the favored treatment for males who are starting into the sex change, because it is highly effective and apparently has few side effects. Aside from some slight tenderness in my nipples, which is a normal growth effect, I noticed no side effects whatever from this preparation during the course of my therapy.

Premarin is commonly prescribed for males at 2.5 mg. per day, and, except for the first few weeks of your therapy, you will be well advised to stick to this dosage.

WHY OVERDOSAGE WON'T HELP YOU

Estrogen can only be used by the body on a current basis. No estrogen is stored by the system, and any excess over the amount that can be used immediately is passed out as waste through the kidneys into the urine. So, taking an overdose of estrogen will do you no good whatsoever. All you will accomplish is to overload your kidneys. And, if you persist in this for very long, they will let you know about it in no uncertain terms!

However, if you should mistakenly take an overdose of hormones because you were forgetful and simply wanted to be sure you got enough for the day, you probably won't feel any ill effects; in fact, I noticed that temporary dosages as high as 15 mg. were not harmful. The only thing that happens is that you throw away good estrogen.

Although no really definite metabolic measurement have been made on a significant population of males so as to determine the optimum dosage of estrogen (the only such measurements that I know of were made by Dr. Christian Hamburger on Christine Jorgensen in the forties, c.f. A Personal Autobiography by Christine Jorgensen) as therapy continues, your body will, itself provide excellent guidepost which you should not fail to heed.

As Dr. Benjamin puts it, when your nip-

ples get so sensitive that you can't tolerate the irritation of wearing a jacket, you should back off of the dosage. You will be forced to, anyway, because your nipples will get to be so sore that you won't be able to sleep!

Many of the girls I know claim that 2.5 mg. is not enough to give them the maximum growth in the minimum time. And this may well be true in the early stages of therapy because it takes a certain amount of estrogen to just turn your body processes around from the male course they'd taken all those years and start them toward the female.

To throw more light on this problem, I experimented with higher dosages and found that, for my system, the optimum effect came at a dosage of about two pills a day, which I spaced 12 hours apart. However, as my breasts filled out, I found that I could not sustain this dosage comfortably, so I had to drop back to 2.5 mg. per day and then, finally, to 1.25 mg. per day.

Since estrogen can only be absorbed by the body on a current basis, many doctors favor using massive injections of hormone in oil. The theory here is that the oil will bleed out of the tissue and be absorbed - along with the estrogen - at a steady rate. If the dosage is calculated correctly, this will keep the body under maximum estrogenic effect continuously.

If you're in a great hurry to get your superstructure up, I suppose the added expense of such injections is justified; but I found that in a year, at about 15¢ a day, I could develop all the rise I wanted by simply taking the purple pills orally.

PHYSICAL MECHANISM OF THE CHANCE

When one first starts to take estrogen, not much happens for about ten days - and this time lag from the start of dosage to the start of physical effect seems to remain rather consistent all through the various stages of development, whenever one stops treatment for any reason. Apparently it takes about this long for the estrogen to gain the upper hand in the processes supervised by your testosterone.

After this latent period is over, one notices a rather pleasant scratchiness in and around the nipples and a slowly developing hardness in the breasts just under the areolae. On the basic male chest this

beginning change simply appears as a slight swelling just at the nipples, producing an effect visually similar to the one noticed just after you have been swimming in very cold water.

As time goes on, the volume of the hard area continues to increase, and at about the sixty day point, one's chest begins to look less like that of the male and more like the form of a young girl in her early puberty. Then, as things go farther, the truly feminine roundness becomes more apparent; 'till, in the limit, one has breasts that are very realistic in appearance.

Coccinelle's account of her change contains some excellent photos of her body as transformed by estrogen, and I would recommend that you have a look at them, c.f. Reverse-Sex, written by Mario Costa (1962) and She-Male, written by Carlson Wade (1963).

The publications Female Mimics also has excellent coverage of the development of the French performers Capucine and Bambi, among others. (See Appendix.)

The photos of me should be rather self-explanatory. The various stages shown are separated by approximately equal intervals of time. The total period was a little over one year.

I have concentrated on breast development in this article, so far, because that is what I was interested in; but I must warn you that that's not all that may develop as a result of estrogen therapy. In point of fact, you may develop all over! In other words, you'll probably put on a lot of weight!

Estrogen works on the body by two mechanisms. In the breasts, it encourages the dormant male lymph nodes (which exist in the breast tissue) to expand - this accounts for the hardness in the breasts when the body is subjected to hormone therapy, and also accounts for the slackness in the female breast after menopause when the estrogen supplied by the body has decreased.

However, estrogen also causes the body fat to redistribute and a lot of fat, of course, gets moved up to the chest. (This is why the breasts remain after one ceases to take estrogen.) But a lot of it gets moved elsewhere too.

The principal other place - where I do not like it to be at all - is the thighs, and as a result of my period of therapy, my thighs and fanny have really become rather

heavy.

The arms and face also get their share of redistributed fat.

Most girls like this, because it does make them more feminine looking. However, I liked the way I looked before, and I admire a trim figure on a woman; so I was really quite pushed out of shape to find that I was getting to look very matronly!

There's nothing one can do about it, though, short of starving oneself to death—and I've never been very successful with dieting.

The early stage of breast expansion may get going remarkably quickly. (As you can see from my photos, it was only a little while until I had a nice development.) But then, the apparent rate of growth seems to be slow.

But don't get discouraged. The process is still going along at the same rate. The thing you've forgotten is that your breasts are three dimensional.

It seems apparent that the total weight put on is directly proportional to the number of pills you take, but the volume of a hemisphere is proportional to the cube of the radius, so it takes you eight times as long to double your linear dimension (or cup size).

If this statement is confusing, let me put it to you this way:

The daily increment of growth caused by the estrogen remains the same throughout the whole period of therapy, but the observed effect, as measured by the cup size, appears to be less and less as time goes on. This comes about partly because of an optical illusion, because in the early period, a little added weight in the area of the nipples is immediately observable as a little bump against the background of the flat male chest. Later, because of contour development, additional growth is not as apparent.

Doing a little mathematical exercise here, suppose we say that this initial bump is about a half inch high, and suppose that we call its volume one volume unit. In order for this bump to grow to an inch in height, the volume must grow eight times! So it should take about 8 times as long to get the second half inch as the first. To get the next inch will take 64 times as long as the first half inch, and so on.

But, wait! Don't be discouraged by my mathematics! You can grow cups, firm B cups

in a year for about \$55, and unless you're some kind of a breast fetishist, this should be all you need to be quite stunning. After that, all that happens is that your figure gets to be needlessly heavy.

INTROSPECTIVE REFLECTIONS

If I've seemed to be somewhat equivocal in my attitude toward hormone therapy thro' out this article, I'm sorry. But, I didn't write it as a sales pitch, and I own no stock in Ayerst Pharmaceutical.

However, lest you think I'm unduly pessimistic, let me set the record straight by reporting that I've had some really nice experiences both with my breasts and because my upper body has become feminine.

When I'm in a feminine phase, I find that the mere presence of breasts can be very reassuring, and I've derived lots of satisfaction from just being able to reach up and feel them or look down and see that they were there. Of course, the way they look in the mirror can also be fairly erotic, but then I've become rather used to the way I look, so this usually doesn't do anything for me.

In the early days of therapy, I found that it was exciting to feel the growth going on under my nipples. And, later on, as my breasts began filling out, it was pleasant to note that they were so much larger—a thing I was reminded of every time I moved my arms. (This sensation, which is created everytime the inner arm touches the outer bulge of the breast, is really one of the most constant sensations that one has; and, of course, as the breasts become larger and larger they actually begin to get in the way of many motions!) This is nothing new to the girls, but it was always quite startling to me!

At about the six month point, when my breasts had developed enough weight and volume so they became bouncy, I noticed a new sensation. Every time my body would make a sharp vertical movement, as it did when I was running, jumping, walking down steps or going over bumps on a bicycle; a little twinge would take place in my breasts. This could sometimes be quite thrilling, especially if it came unexpectedly. It was almost as if someone had touched them!

As the sensitivity of my breasts increased with time, I noticed that they had turned into truly secondary sex organs; and it was during this period that I learned to

love to have my nipples fondled, stroked pinched and kissed.

Later, when my libido was generally down from its peak, because of prolonged treatment, I found that a girl could cause enough erotic stimulation when she caressed my nipples to enable me to get erect, if I hadn't been able to make it before. Then, if I had trouble reaching orgasm, further stroking would help push me over the edge!

I think, of all my sexual experiences, this was the most thrilling! I can't imagine anything greater than to be loved by a girl who really desires me as a female and who loves my breasts because they are an erotic attraction to her.

One may have traumatic experiences with girls who don't like the idea of a male who is part female, especially during the formative period when one's breasts are coming up. But, in my opinion, these are more than offset by the pleasure one receives from the girls who think that all men should look feminine and have pretty breasts.

On the other side of the coin, I've noticed that this attraction to she-males is so strong for some girls, that they give up what they claim has been a completely satisfying relationship with another female, to become seriously involved with a male-transsexual. (Apparently the existence of an erectable, but apparently otherwise non-functional male organ tips the scales in favor of the she-male even when the previous love partner has been most attractive.)

Aside from the purely physical feelings which we have probably discussed far too much, estrogen therapy can have a profound effect on one's emotions as well.

For instance, it is commonly known (although strenuously denied by many MDs) that females who are chronic users of the birth control pill (estrogen plus progesterone) suffer from mild hysteria and from periods of sexual depression which often makes them feel "as sexy as dishwater."

On my part, I found that very similar reactions were generated in me by the estrogen.

I've already noted that sublimation of my libido occurred. What I haven't said, so far, is that hormones made me very much more emotional! (And I think that this is a very healthy kind of thing.)

Before hormones, I was not a very emotional type, at all. Yet, last year at a

performance of Madame Butterfly given by the San Francisco Opera Company, as well as at more recent performances of the great lyric operas, I found myself so overcome by emotion that tears were coursing down my cheeks!

This heightened emotion often crops up now, and I often find myself choked up over some beautiful thought or by some external emotion directed my way from the movie screen or theater.

To place this all in proper perspective I can't recall ever having such experiences in my pre-estrogen life.

In contrast to the rather beautiful emotions I have just alluded to, a rather different emotional state comes upon me in the periods when I am between women and haven't a satisfactory sexual and emotional outlet. In these periods, I find that my thoughts turn inward too much, so that I become overly concerned with the woman inside me, and I'm not sure that this is terribly healthy, although it is sublimatory.

Usually such periods are accompanied by a feeling of need for higher estrogen dosage, and if such periods continue too long, one begins to feel unattractive, which is definitely unhealthy.

This is why I prescribe a lover as the necessary compliment to any period of estrogen therapy.

WITHDRAWAL SYMPTOMS

If you haven't been faked out by your straight girl friend & still like your feminine side, hormones tend to become addictive.

The reason for this is that one has a large investment in time and experience in the development of one's breasts. And, if one has had any active sexual experiences with girls who like the female side, one is used to the fact that one's breasts have become secondary sexual organs.

When hormone therapy is stopped, the first and most disastrous thing that happens is that the sensitivity of the breasts decreases steadily to zero. (In about ten days.) After that time, the constant reminder, from every motion, that the breasts are there is largely lost, and the breasts simply become sexless appendages on the body, without any life of their own.

Very shortly after this, one's high maidenly form begins to slump, because the

glands in the tissue have contracted again, and at this point one usually develops a high degree of anxiety which can only be assuaged by a return to therapy. The resumption of therapy is usually justified as just a protection for one's investment!

Of course, these withdrawal symptoms are very similar to the ones that most TVs experience after going through a purge. And for approximately the same reasons that TVs can never seem to be cured in therapy, TSs can never give up hormone therapy.

Of course, if one has been saturated with the experience and concludes that it wasn't all that great after all, one can withdraw effectively; although, as has been pointed out previously, the decay process is slower than the enlargement process.

One's libido comes back very quickly as soon as therapy is terminated, of course, and one of the things that can push one back into hormone therapy is that feeling of horniness. If one has erections and sexy dreams without a steady sexual outlet; the sublimation offered by the hormones can be preferable to frustration or masturbation.

One other aspect that comes into the picture is, that if one, in frustration, tends to bar hop and likes the flattering attention the men give her, she may be persuaded that the homosexual route is better. It is certainly true that, although it always seems difficult to meet girls who come up to one's expectations, it's very easy to pick up attractive men. In fact, it's hard to keep them off! (For myself, if I weren't basically a male-lesbian, I could have a hundred men standing in lone waiting.)

· CONCLUSIONS

As I noted earlier, this is not a sales pitch, so you'll have to make up your own mind about whether hormones are your thing or not. What I tried to achieve with this article was to provide some help by filling in a little of the void that exists in the written literature with some actual observations made on the scene.

As far as my own future course is concerned, it's difficult for me to make a prognosis. My life swings in cycles from very feminine to very masculine, and at the moment I have all the development I want if anything, too much - so I'm not even on a sustaining dose.

The one thing I miss most about this

state of affairs is the lack of feeling of fullness and sensitivity that my breasts used to have. My breasts are no longer secondary sex organs, but just bumps. Possibly when I get my fanny under control again I may resume estrogen treatments.

I just don't know.

January, 1970.

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Eureka...

IT WORKS

WRITTEN BY: ANNE R.

Like most of us girls, I've been searching for years to discover a fool-proof to cover the black beard-shadow on my face. Being, by nature, one who plays the fool, I still haven't discovered it. But I have found a pretty good substitute, providing one is at least a little bit careful. And when I think of some of the things I've heard...It has to be worth the trouble!

I remember one girl who explained her very painstaking efforts to lay an absolutely smooth mask of surgical cement over the entire facial area. Only two problems. To look right, it had to be done in one, continuous layer. Otherwise, take it all off and start over. And second, be very careful not to light a cigarette until it was dry---or the result could be instant blackface. And, whatever you do, never, never put on a wig 'til you're certain the stuff is dry. EVERYTHING sticks to it YUK.

Then, I remember talking to a very, very successful stage performer. "Her" solution --a full half-pound of margarine - like greasepaint. Thick. Heavy. But...properly handled...perfectly acceptable under even street conditions. Provided the temperature never rises above 85. And, says she, "honey, don't ever let anyone touch your face... it leaves fingerprints, like in concrete." YUK also.

"Somewhere in the middle," says I, "must be an acceptable compromise." With a little help from an extremely close friend (my wife), I found it for me. Now I'd be interested in seeing if it works for anyone else. It's actually very simple....relying more on skill of handling than on special ingredients and built-up layers. And I'm not certain how it will work on skin types other than mine.

Here's the formula. You begin with Max

Factor PanStik, Theatrical Grade #11-N or #10-N. This is a lighter-than-greasepaint, grease-based makeup. Comes in a handy stick applicator. Is available at almost any Theatrical Supply House (See your Yellow Pages). No need to have any qualms about buying it as John or Charlie, as the stuff is very widely used by any and all amateur theater groups; models, male or female.... almost anyone who appears in a television commercial.

This stuff is very dark. A deep reddish tan color. And it stands to reason that if you want to cover up something that's dark ...you can cover it with a far thinner layer of dark makeup than you could if you use light shades. Besides, it won't be that color when we finish, so don't worry.

Now, every makeup job, regardless of how simple or outlandish the formula, seems to begin with an ultra-close shave. This one is no exception. Shave with a razor. Not an electric mowing machine. I find that Gillette Platinum Plus works best. Other kids I know prefer the single-edged Shick razors. But shave at least twice. Once in the direction you usually shave. The second time completely against the way you usually shave. Apply shave lotion (bay rum doesn't conflict with most women's perfumes, but if you really like the mixture of Brut and Channel #5...be my guest).

Let the alcohol dry. Now apply streaks of PanStik 11-N (or 10) directly over the beard areas. Along jaw lines. Under chin. On chin. On upper lip, etc. Next step requires the skill. Blend the stuff into your pores AGAINST the beard grain until your face is uniformly covered from sideburns to below your dress neckline (don't do it with the dress on, for Pete's Sake!). At this

point, your lower face should look a little like Tonto---heap big Injun. In fact, 11-N is often called Indian Makeup in the theater. There shouldn't be too much of it in thickness. And one of the skills you should develop as you use this technique over and over again is to see how little you can use to cover.

But most important, rub the damned stuff against the grain of the beard. Below your sideburns, for example, rub up toward the sideburns as most people normally shave downward at that area and the hairs have been trained to grow downward.

Now take a second color of Max Factor PanStik. This one should be approximately, olive color. You can ask for an Olive color at the same Theatrical House where you bought the 11-N... or go to a Ladies Cosmetic Department that handles PanStik (it's the same stuff but in more limited colors and under fancy femme-names) and ask for Olive or some form of it. This one is lighter than the 11-N. Streak it across the forehead, eye areas, down sides of nose if you have a prominent nose (me part Senaca Injun anyhow and seem to have the largest schnozz since Durante) and across cheek bones. Again, blend carefully to cover with the least possible grease and blend extra carefully at the points where the light stuff and the dark 11-N overlap--and overlap they should.

Another little sidelight here. A light color brings OUT a facial feature. A dark color tames it. If you have a big nose... put 11-N down the bridge and the Olive on both sides to make it look smaller. Male jawlines take a dark color almost exclusively. And since the males who seem to make up best as girls are those of us who are a little (or more than a little plump, chances are you have a heavy chin anyhow so the dark 11-N belongs there too. As for other areas of the face...eye sockets, cheeks, etc.,you'll have to experiment a little.

BUT much of the color contrast between the two shades will now go by the board anyway. The next step is the one that makes you look natural. Right at present, a two-tone Tonto is looking at you in the mirror. We're going to turn that into a good looking smoothskinned girl for about 45 cents, for a year's supply of magic.

Next ingredients is simple, Plain Red grease-based rouge.The key is grease-based.

Available in most Five-And-Dimes. Or at the same theatrical makeup supply house. It usually comes in a small plastic container the size of a half-dollar. Very gingerly, pat your fingertips in the bloody stuff and BLEND it into the facial makeup all over. Not just on the cheeks. All over. Your face will magically begin to lighten and take on the rosy hue of natural flesh...destroying the made-up look. You see, all makeups made for females tend to look mask-like and pale on a man... even if he has selected the right one for his skin color...which, unless your name Chief Flying Cloud, you did not anyway. Applied properly, you'll look like a very smooth-faced, slightly high-bloodpressured female with an oily complexion at this point.

Last step is to get rid of the greasy look (and some of the red-faced look.) That requires plenty of facepowder. Slap it on heavily with a powderpuff. The best color, I've discovered is Rachel...also a common enough color name you can buy almost any brand. The cheaper, the better. After you look like an accident in a flour factory, stroke the excess off with the puff until you have a light mate finish and streaks... no leftover light spots. And no heavy layer.

That should last you for the whole evening. If repairs are necessary, carry a pressed powder compact of about Rachel shade in your handbag and apply sparingly in the nearest Ladies Room. Sparingly...or by the end of the night you'll look like a poor plaster job on a ghetto wall.

Now, on to other things. First off, if you use artificial eyelashes, apply BEFORE you begin this whole procedure and allow to dry. Stick 'em on after shaving and go do your nails or something.

But, with this facial base, you can now apply mascara, eye liner, eye shadow and brow color. Plus lipstick...and if you feel you must, a bit of powdered blusher over the cheek bones. A few hints here. Pastel colors look better on "us girls" as well as being more in style. Throw away the bright red lipstick. Also the almost-white or beige colors. Unless, of course, you really want to be approached at every bar you enter by a dirty old man. And even if you do you can get more if you look virginal. (Also more \$\$\$).

Enlarge your eyes with soft blue or

brown eyeshadow. Somehow, the powdered varieties seem to look better than liquids or grease based ones. And do not use eyeliner until you've done everything else to your eyes that you're going to... it's the finishing touch. I find the Maybelline cake that you wet to be the most controllable. And the liquids in little bottles to be useful only for used-car touchup or writing nasty graffiti on John Walls.

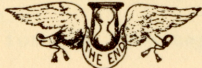
There's one danger in all this. If you have the usual coarse-pored male face, this preparation will cover it far more evenly than liquid makeups like CoverGirl which tends to fill in the pores and rub off the highs between--creating a cement-walk look. If you have a very heavy pore structure... almost an acne-scarred facial skin, it may not work too well. I don't and haven't tried it on someone who does. It may be even better...or terrible.

And one warning....it does tend to rub off on dress collars (also on shirt collars if you have a boyfriend...) so be prepared for one wearing out of a high collared white blouse... maybe two out of a pastel dress...but a simple drycleaning takes care of all.

How do you get out of what I got you into? Simple. Buy the biggest, cheapest jar of cold cream you can get. The more you can buy for your money, the better it will work. Grab a big gob and smear all over your face. Literally wash your face in the goo until you're covered with tan grease. Wipe off with a ton of paper towels. Take a smaller gob and repeat the treatment. Then wash well with soap and water (mainly to remove the perfumed odor and keep your secret from your wife.) If there's no secret to be kept, allow the residue to remain as it's quite good for your skin anyhow.

Goodluck. And let me know how it works. I believe that the same combination of dark and light can be used for those with far lighter beards than mine (I'm the Original Great American Woolly-Bear)...using much lighter tones of PanStik than 11-N.... but for difficult-to-cover beards, it's a good way to go.

oooooooooooo



"A New Must 'Read' Book" By: Charles Slavik

"A STUDY OF MEN WHO ENJOY WEARING WOMEN'S CLOTHING"

THE TRANSVESTITE

This book relates to a phenomena that has been a part of society since there was a society - transvestism. But unfortunately society (even today) has been slow to learn about transvestism because it has invariably, due to prejudice and lack of understanding, confused it with other behavioral patterns. Many people have therefore suffered greatly and unnecessarily.

The author has tried to be as unobtrusive as possible presenting facts, figures and opinions about transvestism gathered from numerous sources so that you the reader will have a better understanding and increased awareness as to the complexities of human nature. It is hoped that this book will sooner or later come into the hands of someone who has to contend with this phenomena either as a concerned bystander such as a parent or a wife or possibly a practicing transvestite. If this book can help any of these people achieve any degree of understanding and consideration it will have served its purpose.

Stop wondering, read the facts. Order your copy of 'The Transvestite,' today. Only \$2.00 - Send today.

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