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Public Testimony
LD 1277: An Act Regarding Controlled Substances Prescription Monitoring
Activities

My name is Aspen Ruhlin, and I am submitting this testimony on behalf of Mabel Wadsworth Center. First, I would like to thank the Chairs Senator Ingwersen and Representative Meyer, along with the rest of the Health and Human Services Committee for reading this testimony. Mabel Wadsworth Center is an independent feminist sexual and reproductive health center that has been providing care in Bangor since 1984. Our services include abortion care, prenatal care, STI testing/treatment, contraception, gender-affirming hormone therapy, menopause care, primary care, and more. Today we are asking you to vote “ought to pass” on LD 1277.

Testosterone is a safe medication used to treat different diagnoses for a wide range of patients. There are cisgender¹ men with hypogonadism, or testes that do not produce sufficient testosterone, who are prescribed testosterone. There are cisgender women going through menopause who are prescribed testosterone to manage their symptoms, as testosterone is an essential hormone regardless of sex assigned at birth. There are transgender² people who are prescribed testosterone as a part of gender-affirming hormone therapy.

The Prescription Monitoring Program is an important program that exists to track the prescribing of important but higher-risk medications like opioids that can put patients at significant risk of misuse or overdose. Having testosterone as a part of the PMP simply doesn't make sense, as it doesn't carry that same risk and is non-addictive.

In our current political landscape, it is clear that transgender people are under attack and face significant threats to their freedom, autonomy, and safety,

¹ Cisgender: an adjective describing someone who identifies with their sex assigned at birth

² Transgender: an adjective describing someone whose gender is different than what they were assigned at birth



particularly by the federal government. By removing testosterone from the Prescription Monitoring Program, both transgender patients prescribed testosterone as gender-affirming care and those who could be misidentified as transgender will be kept safe from targeted discrimination. It is already a regular occurrence for cisgender people to experience misdirected transphobia. We have every reason to believe that those who would go after patients using testosterone as gender-affirming care would also cause harm to cisgender patients prescribed testosterone.

Testosterone is a safe, non-addictive medication that is prescribed by knowledgeable providers for different diagnoses and for a wide range of patients. Including it in the Prescription Monitoring Program simply doesn't make sense based on the purpose of the Prescription Monitoring Program, and in the current landscape puts patients at risk of harm. For these reasons, we at Mabel Wadsworth Center urge you to vote "ought to pass" on LD 1277.