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Testimony Opposing LD 227
March 5, 2024

Senator Bailey, Representative Perry, and honorable members of the Committee on Health Coverage, Insurance and Financial Services:

I am Danae Kershner and I am a board certified family medicine physician practicing in Maine for twelve years. I represent the American Academy of Medical Ethics and many of my Maine colleagues as I testify in opposition to LD 227. I can barely begin to tell you how incredibly concerned I am about what this bill would do to healthcare, healthcare providers in our state, and our most vulnerable populations. In medical training physicians are taught to use shared decision making with our patients for optimal health outcomes, but always with a backdrop of moral and ethical judgment. LD 227 does away with any right of conscience and strips clinicians of the ability to provide the best counsel and guidance to patients for fear of reprisal from the State or courts because, it would make gender transitioning services and abortion on demand for any reason whatsoever a medical right.

There is no doubt that gender dysphoria as outlined in the DSM5 is a real problem, but we must understand that surgical and chemical transition comes at a very high cost. These changes are typically irreversible, and include increased risk of heart attack, stroke, certain cancers, osteoporosis leading to higher risks of fractures, blood clots, depression and regret. 1 These concerns are so significant, without the evidence that hormonal replacement prevents suicide in youth, that in July 2022 over twenty clinicians in nine countries, asked their Endocrine Society to stop making claims that HRT (hormone replacement therapy) prevents suicide. 2 A well done study from Finland published in February 2024 which studied two-thousand youths confirms this. 3 Yet the agenda is still promoted. Instead of providing compassionate, evidence based care, we have become victims of what Dr Kaltiala, a leading adolescent psychiatrist calls, "dangerous groupthink". 4

LD 227 promotes human trafficking, interferes with parental rights, eliminates clinicians' moral judgment, and denies protection for children and adolescents. If Maine passes this legislation, the State will be liable both legally and financially to those who survive these practices and choose to take judicial action. For these reasons, and many others, I urge you to vote "Ought not to pass" on LD 227.

- 1. Yelehe, Klein et al, "Adverse effects of gender-affirming hormonal therapy in transgender persons: Assessing reports in the French pharmacovigilance database", Fundamentals of Clinical Pharmacology Dec 2022, pp 1115-1124
- 2. Kaltiala, "The Evidence on Gender Transitions for Youth",
 The Wall Street Journal Letters to the Editor
- 3. "Suicide Mortality Among Gender-Dysphoric Adolescence and Young Adults in Finland", Society for Evidence Based Gender Medicine, February 2024
- 4. Kaltiala, Rittakerttu, "Gender-Affirming Care Is Dangerous", The Free Press, March 5, 2024