

REQUEST FOR SEX-RECONVERSION SURGERY - CASE REPORT

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General data: 41 years-old; biological male; divorced; father of five children; university degree.

Chief complaint: Regret following male-to-female sex-reassignment surgery (SRS) and facial plastic surgery; requesting sex-reconversion operation.

Psychiatric history: Compulsive, high-risk sexual behaviour, triggered by traumatic life-events during puberty (death of father and departure of mother at the age of 14). Symptoms evolved throughout adolescence and adulthood with persistent identity diffusion, intense abandonment fears, feelings of chronic emptiness and guilt, mood swings, unstable and intense interpersonal relationships, impulsivity and self-destructive behaviour. Gender history and transition: No evidence of gender nonconformity, gender dysphoria, gender-role discomfort or cross-gender identification. Uncertainty regarding male's role and identity diffusion, persisting since puberty. An impulsive decision for SRS and facial plastic surgery at the age of 40 (performed abroad), without a recommendation letter, motivated by the urge to resolve identity confusion and diminish compulsive sexual behaviour. He subsequently acknowledged his male identity, which led to relief of symptoms and request for sex-reconversion surgery.

Conclusion: Gender history and clinical presentation confirmed that the patient did not sufficiently meet criteria for Gender Identity Disorder, but rather for Borderline Personality Disorder. The authors are highly aware that this topic is significantly connected to issues of the human right to free choice; however we would wish to impose a medical obligation for a rigorous psychiatric assessment for origin of gender identity diffusion and discomfort. Psychotherapy and pharmacotherapy should be the first treatment choices before any radical surgery interventions are undertaken.