

SEX, GENDER, AND SEXUAL ORIENTATION
SNOMED RECOMMENDATIONS, VERSION 1

Note that this document is a work in progress and should not be considered a final document.

Basic Statistics

Number of terms under consideration – 81

Terms Under Consideration

SCTID	Preferred Term	Recommended Changes	Notes
18978002	Ovotestis (disorder)	Remove the acceptable synonyms “True hermaphrodite” and “True hermaphroditism.”	[Note 1]
205719003	46, XX true hermaphrodite (disorder)	Change preferred term to “46, XX disorder of sex differentiation (disorder)”. Add synonyms “46, XX DSD” and “46, XX ovotesticular DSD”.	[Note 1]
253857001	False hermaphrodite (disorder)	It’s unclear why this is separate from “pseudohermaphroditism” as this appears duplicative. Remove completely.	[Note 1] [Note 3]
38628009	Homosexual (finding)	Change to “gay person”.	[Note 4]
472947006	Previously homosexual transsexual (finding)	Remove.	[Note 14]
76102007	Male homosexual (finding)	Change to “gay man”.	[Note 4]
89217008	Female homosexual (finding)	Change to “lesbian”.	[Note 4]
105428002	Homosexual parents (family) (person)	Change to “Same-sex parents”. Synonym “gay parents”.	[Note 5]
105433003	Homosexual marriage (finding)	Change to “Same-sex marriage”. Synonym “gay marriage”.	[Note 5]

105434009	Homosexual marriage, male (finding)	Remove.	[Note 5]
105435005	Homosexual marriage, female (finding)	Remove.	[Note 5]
16445007	Homosexual forcible assault (event)	Remove.	[Note 5]
225531006	Homosexual behavior (finding)	Remove.	[Note 5]
2268003	Victim of homosexual aggression (finding)	Remove.	[Note 5]
228472005	Bisexual - predominantly homosexual (finding)	If kept, should be related to Kinsey scale, with additional appropriate terms created.	[Note 17]
228474006	Bisexual - predominantly heterosexual (finding)	If kept, should be related to Kinsey scale, with additional appropriate terms created.	[Note 17]
228475007	Homosexual relationship (finding)	Change to “same-sex relationship”. Narrower synonyms could be “gay relationship” or “lesbian relationship”.	[Note 5]
288311000119103	High risk homosexual behavior (finding)	Remove.	[Note 5]
43311000	Latent homosexual state (finding)	Remove or change to be less pseudoscientific and derogatory in nature.	[Note 5] [Note 20]
66677002	Compulsive overt homosexual state (finding)	If kept, broaden to “sexual orientation obsessive-compulsive disorder” (this is generally less offensive as well).	[Note 5] [Note 22]
8718003	Substitute homosexual state (finding)	Remove.	[Note 5] [Note 23]
87262002	Symptomatic homosexual state (finding)	Remove.	[Note 5] [Note 24]
266974005	Human immunodeficiency virus risk lifestyle	Change to “Risk factor for human immunodeficiency virus” or “Behavioral risk factor for human immunodeficiency virus”.	[Note 21]

237821001	Hermaphroditism (disorder)	This category should be folded into “Disorder of sexual differentiation (disorder)” [SCTID: 39179006] in accordance with the majority of intersex research literature.	[Note 1]
313079007	Counseling for homosexuality (procedure)	Change to be more inclusive, i.e. “LGBT affirmative counseling”, or separate out “affirmative counseling for gay persons”, “affirmative counseling for transgender persons”, etc.	[Note 19]
14883001	Nymphomania (finding)	Remove.	[Note 25]
66658004	Satyriasis (finding)	Remove.	[Note 25]
123673007	Don Juanism (finding)	Remove.	[Note 25]
110882004	Urethra and urethral meatus, male to female sex-change (combined site) (body structure)	Change to “Urethra and urethral meatus following feminizing genitoplasty”.	[Note 10] [Note 26]
719670005	Gender reassignment surgery (procedure)	Change to “Gender-affirming surgery”.	[Note 26]
282272009	Gender reassignment patient (finding)	Change to “Gender confirmation patient” or “Gender affirmation patient”. Or remove.	[Note 26]
367438004	Sodomy (finding)	Remove this term completely.	[Note 6]
407375002	Surgically transgendered transsexual (finding)	Remove completely. This term conflates being transgender with surgical intervention. Fold into “Transgender identity (finding)” [SCTID: 12271241000119109].	[Note 7] [Note 9] [Note 11] [Note 15]
403738000	Surgically transgendered transsexual, male-to-female (finding)	Remove completely. This term conflates being transgender with surgical intervention. Fold into a new sub-term of “Transgender identity	[Note 7] [Note 9] [Note 10] [Note 11] [Note 15]

		(finding)”, preferably called “Transfeminine identity”. Connecting being transgender to surgery is unnecessary, as the two are ostensibly separate.	
407379008	Surgically transgendered transsexual, female-to-male (finding)	Remove completely. This term conflates being transgender with surgical intervention. Fold into a new sub-term of “Transgender identity (finding)”, preferably called “Transmasculine identity”. Connecting being transgender to surgery is unnecessary, as the two are ostensibly separate.	[Note 7] [Note 9] [Note 10] [Note 11] [Note 15]
472948001	Cross-dressing (finding)	Remove “transvestism” and “transvestitism” as acceptable synonyms.	
472989003	Dual-role transvestism (finding)	Remove; fold into new term “Fluctuating non-binary gender identity” which should include the synonyms “Genderfluid” and “Genderfluid identity”.	[Note 12]
472949009	Primary transvestism (finding)	Remove.	[Note 16]
472950009	Secondary transvestism (finding)	Remove.	[Note 16]
472981000	Fetishistic transvestism (disorder)	Remove completely.	[Note 13]
407376001	Male-to-female transsexual (finding)	Change to “transgender woman”. “Trans woman” is an acceptable synonym.	[Note 7] [Note 10] [Note 15]
714186001	Male to female transsexual person on hormone therapy (finding)	Fold into “transgender woman”. Connecting being transgender to hormone therapy is unnecessary, as the two are ostensibly separate.	[Note 7] [Note 10] [Note 11]

407377005	Female-to-male transsexual (finding)	Change to “transgender man”.	[Note 7] [Note 10] [Note 15]
714189008	Female to male transsexual person on hormone therapy (finding)	Fold into “transgender man”. “Trans man” is an acceptable synonym. Connecting being transgender to hormone therapy is unnecessary, as the two are ostensibly separate.	[Note 7] [Note 10] [Note 11]
268229003	Indeterminate sex and pseudohermaphroditism (disorder)	This category should be folded into “Disorder of sexual differentiation (disorder)” [SCTID: 39179006] in accordance with the majority of intersex research literature.	[Note 1]
75164001	Pseudohermaphroditism (disorder)	Remove completely. “Male pseudohermaphroditism” is moved to “46, XX DSD” while “Female pseudohermaphroditism” is moved to “46, XX DSD”.	[Note 1]
472945003	Previously asexual transsexual (finding)	Remove.	[Note 14] [Note 15]
472977000	Previously bisexual transsexual (finding)	Remove.	[Note 14] [Note 15]
472946002	Previously heterosexual transsexual (finding)	Remove.	[Note 14] [Note 15]
407374003	Transsexual (finding)	Change to “Transsexual person”. Move from current hierarchy to “Gender finding” associated hierarchy.	[Note 15]
62607004	Orgasm incapacity (finding)	Remove “Frigidity proper” as an acceptable synonym.	[Note 27]
16611005	Relative frigidity (finding)	Remove.	[Note 27]
89102002	Secondary frigidity (finding)	Remove.	[Note 27]

267403002	Eunuchism (disorder)	Should probably be removed; in almost all cases, more specific terms exist.	[Note 18]
48723006	Male hypogonadism (disorder)	Remove “Eunuchoidism”, “Eunuchoidism, hypogonadism”, and “Eunuchoidism hypogonadism” as acceptable synonyms.	[Note 18]
8829008	Isolated lutropin deficiency (disorder)	Remove “Fertile eunuch syndrome” and “Fertile eunuch” as acceptable synonyms.	[Note 18]
91349007	Eunuchoid voice (finding)	Change to “persistent prepubescent voice”.	[Note 18] [Note 28]
2041006	Eunuchoid gigantism (disorder)	Remove, unless another appropriate synonym exists.	[Note 18] [Note 28]
93559003	Hypogonadism with anosmia (disorder)	Remove “Anosmia eunuchoidism” as an acceptable synonym.	[Note 18]
722454003	Intellectual disability, craniofacial dysmorphism, hypogonadism, diabetes mellitus syndrome (disorder)	Remove “This syndrome has characteristics of moderate intellectual deficit, craniofacial dysmorphism, hypergonadotropic hypogonadism, eunuchoid habitus, type 1 diabetes mellitus, and epilepsy. It has been described in four patients (three brothers and their sister). This syndrome is probably transmitted as an autosomal recessive trait.” as an acceptable synonym.	[Note 18]
271602007	Masculinized female	Remove.	[Note 29]
32951002	Feminized male	Remove.	[Note 29]
162752009	On examination - feminized male	Remove.	[Note 29]
162753004	On examination - masculinized female	Remove.	[Note 29]

87991007	Gender identity disorder (disorder)	Change to “Gender incongruence” and move from “disorder” hierarchy into “finding” hierarchy under “Gender finding (finding)”.	[Note 30]
93461009	Gender dysphoria (disorder)	Remove.	[Note 31]
5095008	Gender identity disorder of childhood (disorder)	Remove.	[Note 30]
18003009	Gender identity disorder of adulthood (disorder)	Remove.	[Note 30]
12277671000119109	Gender dysphoria in childhood (disorder)	Remove.	[Note 31]
57715001	Gender identity disorder of adolescence (disorder)	Remove.	[Note 30]
12277711000119108	Gender dysphoria in adolescence and adulthood (disorder)	Remove.	[Note 31]
59216005	Adult gender identity disorder, sexually attracted to males (disorder)	Remove.	[Note 30] [Note 14]
3503000	Gender identity disorder of adolescence, previously asexual (disorder)	Remove.	[Note 30] [Note 14]
77815007	Gender identity disorder of adulthood, previously homosexual (disorder)	Remove.	[Note 30] [Note 14]
54417002	Adult gender identity disorder, sexually attracted to females (disorder)	Remove.	[Note 30] [Note 14]
30509009	Gender identity disorder of adolescence, previously homosexual (disorder)	Remove.	[Note 30] [Note 14]
13670005	Gender identity disorder of adulthood, previously heterosexual (disorder)	Remove.	[Note 30] [Note 14]

67123006	Adult gender identity disorder, sexually attracted to both sexes (disorder)	Remove.	[Note 30] [Note 14]
68963006	Gender identity disorder of adolescence, previously heterosexual (disorder)	Remove.	[Note 30] [Note 14]
61180001	Adult gender identity disorder, sexually attracted to neither sex (disorder)	Remove.	[Note 30] [Note 14]
50878001	Gender identity disorder of adulthood, previously asexual (disorder)	Remove.	[Note 30] [Note 14]

Notes

1. The Intersex Society of North America (ISNA) notes that the terms *hermaphrodite* and *pseudo-hermaphrodite* as “stigmatizing and misleading” as well as “scientifically specious and clinically problematic,” further noting that “some medical personnel still use them ... because they still subscribe to an outdated nomenclature” [1]. ISNA also recommends removing *pseudo-hermaphroditism* and *true hermaphroditism* as people “with intersex are not hermaphrodites” and “these terms imply a kind of hierarchy of ‘real’ and ‘fake’ intersex people, which is unhelpful and illogical” and “fail to reflect modern scientific understandings of intersex conditions, confuse clinicians, harm patients, and panic parents” [1], [2]. Perhaps most importantly, the ISNA notes that the term *hermaphrodite* implies “a person is both fully male and fully female ... [which] is a physiologic impossibility” [1], [3]. The ISNA suggests utilizing disorders of sex development (DSDs) over *hermaphrodite*-based terms [2]. Other authors use disorders of sexual differentiation, disorders of sex differentiation, or differences of sex development [4], [5]. GLAAD notes that the term *hermaphrodite* is “outdated and derogatory” [5]. Other recommended changes following the multidisciplinary medical and nonmedical expert-based Chicago Consensus in 2005 included [4]:
 - a. Male pseudohermaphrodite → 46,XY DSD
 - b. Undermasculinization of an XY male → 46,XY DSD
 - c. Overvirilization of an XX female → 46,XX DSD
 - d. Masculinization of an XX female → 46,XX DSD
 - e. True hermaphrodite → Ovotesticular DSD
 - f. XX male or XX sex reversal → 46,XX testicular DSD
 - g. XY sex reversal → 46,XY complete gonadal dysgenesis

2. Intersex Human Rights Australia notes that intersex is not a gender identity: “defining intersex as a gender identity *misgender*s people born with intersex variations: it wrongly treats actual gender identities as invalid or suspect” [6].
3. Of the 700+ on ontologies at NCBO BioPortal, SNOMED CT is the only one which has a listing for “False hermaphrodite”. The 2003 *Miller-Keane Encyclopedia and Dictionary of Medicine, Nursing, and Allied Health, Seventh Edition* notes that “false hermaphroditism” is a synonym for “pseudohermaphroditism” [7]. It is generally unclear why SNOMED lists “false hermaphroditism” and “pseudohermaphroditism” separately, but both should be removed completely (see Note 1).
4. GLAAD and PFLAG note that *homosexual* is an “[o]utdated clinical term considered derogatory and offensive” and that the “Associated Press, *New York Times* and *Washington Post* restrict usage of the term” [5], [8]. Instead use “gay man” instead of “homosexual male,” “lesbian” instead of “homosexual female,” “gay person” instead of “homosexual,” and “gay people” instead of “homosexuals” [5].
5. GLAAD notes that usage of terms such as *homosexual relations*, *homosexual relationship*, *homosexual couple*, and *homosexual sex* are “extremely offensive and should be avoided [because] [t]hese constructions are frequently used by anti-LGBTQ extremists to denigrate LGBTQ people” [5]. They additionally note that “[a]s a rule, try to avoid labeling an activity, emotion, or relationship gay, lesbian, bisexual, or queer unless you would call the same activity, emotion, or relationship ‘straight’ if engaged in by someone of another orientation” [5]. For example, having “Homosexual forcible assault (event)” but no such “Heterosexual forcible assault (event)” is extremely offensive in that it enables anti-LGBTQ groups to manipulate data to support anti-LGBTQ claims (“the ‘homosexual forcible assault’ rate is so much higher...”, “why would there be a separate category if this isn’t a societal issue...”, etc.).
6. GLAAD contends that the term *sodomy* “should never be used to describe same-sex relationships or sexual orientation” [5]. SNOMED CT currently lists “Anal penetration” and “Oral penetration” as sub-terms of “Sodomy (finding)”. Because these sexual acts are often associated with members of the gay community, it implies a connection between *sodomy* and being gay, which is extremely offensive.
7. PFLAG notes that the term *transsexual* is “considered by some to be outdated or possibly offensive ... [while] others [consider the term] to be uniquely applicable to them” [8].
8. The second edition of the Guidelines for the Primary and Gender-Affirming Care of Transgender and Gender Nonbinary People notes that the “term transvestite is no longer used in the English language and is considered pejorative” [9].
9. GLAAD notes that the “adjective transgender should never have an extraneous ‘-ed’ tacked onto the end. An ‘-ed’ suffix adds unnecessary length to the word and can cause tense confusion and grammatical errors. It also brings transgender into alignment with lesbian, gay, bisexual, and queer. You would not say that Elton John is ‘gayed’ or Ellen DeGeneres is ‘lesbianed,’ therefore you would not say Chaz Bono is ‘transgendered’” [5].
10. The terms “male-to-female” and “female-to-male” are not typically considered derogatory or pejorative, however, these terms contribute to the erasure of nonbinary

persons and third genders. For example, a nonbinary person assigned female at birth may take a lower dosage of hormone-replacement therapy in order to become generally more androgynous—labelling this person as “female-to-male” is reductionist. However, transgender women are often labelled as male-to-female and transgender men are often labelled as female-to-male. Consider the following changes [9]:

- a. Male-to-female transgender person → Transfeminine person
 - i. Transgender woman (or trans woman) could be a sub-term of “Transfeminine person”.
 - b. Female-to-male transgender person → Transmasculine person
 - i. Transgender man (or trans man) could be a sub-term of “Transmasculine person”.
 - c. Male-to-female hormone replacement therapy → Feminizing hormone replacement therapy
 - d. Female-to-male hormone replacement therapy → Masculinizing hormone replacement therapy
11. GLAAD importantly notes that the term “transgender” is an umbrella term and that someone who identifies as transgender does not necessarily require surgery or hormone replacement therapy, i.e. “transgender identity is not dependent upon physical appearance or medical procedures” [5].
 12. This term appears to be directly important from ICD-10-CM, which removes the hyphen (instead making it “dual role transvestism”). It is a diagnosis separate from “transvestic fetishism” which describes someone who wears clothes of the opposite sex in order to experience being the opposite sex temporarily, but does not ultimately have a sexual motive or want any kind of gender confirmation surgery. Generally speaking, transgender identity does not require surgery and some transgender people may consider themselves genderfluid if they fluctuate between gender identities or expressions. Transgender Europe (TGEU) has suggested removal of “dual-role transvestism” in the ICD; Sweden, Norway, and Finland have already removed this term as well [10].
 13. The TGEU has recommended that the ICD remove “Fetishistic Transvestism” completely. Sweden, Norway, and Finland have already removed this term in their national ICD version [10].
 14. The conflation of being transgender (transsexual) and one’s sexual orientation should be avoided. GLAAD notes this by saying that “[g]ender identity and sexual orientation are not the same. Transgender people may be straight, lesbian, gay, bisexual, or queer. For example, a person who transitions from male to female and is attracted solely to men would typically identify as a straight woman” [5]. Therefore, terms that include both gender identity and sexual orientation should be removed.
 15. SNOMED CT currently lists “Transsexual (finding)” as a “Finding related to biological sex (finding)”, ostensibly separate from “Transgender identity”. This may not make sense, unless the term “biological sex” is further clarified. GLAAD notes that the term *transsexual* should only be used as an adjective if it is preferred by a particular person (i.e. *transsexual woman* or *transsexual man*) [5].

16. Anupama *et al.* notes that there is “no distinction of primary and secondary transvestism in literature” [11]. It is likely that this is a relic from when *transvestism* was used as a synonym for transgender identity (sometimes derogatorily termed as transsexualism) in the 1960s and 1970s—thus “primary transvestism” and “primary transsexualism” were used interchangeably, which is extremely problematic in modern literature.
17. These terms seem to be related to the Kinsey scale in some respects. The scale is as follows:
 - a. Exclusively heterosexual (0)
 - b. Predominantly heterosexual, only incidentally homosexual (1)
 - c. Predominantly heterosexual, but more than incidentally homosexual (2)
 - d. Equally heterosexual and homosexual (3)
 - e. Predominantly homosexual, but more than incidentally heterosexual (4)
 - f. Predominantly homosexual, only incidentally heterosexual (5)
 - g. Exclusively homosexual (6)
 - h. No socio-sexual contacts or reactions (X)
18. The term “eunuch” is largely considered pejorative, but it is the correct biological term for a castrated male [12]. It is therefore advisable to curtail its usage outside of directly referring to castrated males. Generally, contemporary literature uses quotes around inappropriate terms in a historical context, i.e. when referring to ‘fertile eunuchs’.
19. The LGBT community has a complicated history with therapy, stemming primarily from pseudoscientific (and often religious practices) variously called conversion therapy, reparative therapy, ex-gay therapy, and sexual orientation change efforts (SOCE). Other treatments used in misguided efforts to ‘cure’ LGBT persons included institutionalization, castration, and electroconvulsive shock therapy. A 2009 report by the APA listed exceedingly harmful practices still utilized including induction of paralysis while showing homoerotic images, orgasmic reconditioning, etc., all based on the “premise that being LGBT is a defect or disorder.” Generally, the APA “opposes any psychiatric treatment such as reparative or conversion therapy which is based upon the assumption that homosexuality per se is a mental disorder or based upon the a priori assumption that a patient should change his/her sexual homosexual orientation”, the American Academy of Pediatrics states that therapy “directed at specifically changing sexual orientation is contraindicated, since it can provoke guilt and anxiety while having little or no potential for achieving changes in orientation”, and the Pan American Health Organization has stated that conversion therapy practices “lack medical justification and represent a serious threat to the health and well-being of affected people” [13], [14]. However, LGBT people often seek therapy to help connect to their identities or to help them embrace positivity in communities which are otherwise discriminatory or prejudicial. This is referred to typically as “affirmative therapy” or “LGBT affirmative therapy” [15]. The distinction is important because LGBT is more inclusive and less derogatory than “homosexuality”, while also acting to actively disenfranchise hateful therapies (saying *therapy for* is also incorrect in this context).
20. “Latent homosexuality” was proposed originally by Sigmund Freud. The *Farlex Partner Medical Dictionary* (2012) notes that use “of this term is disappearing because of its

potentially iatrogenic effect and the inability to validate the phenomenon by techniques outside psychoanalytic theory”. GLAAD recommends referring to someone who is not openly gay as “not out” [5]. PFLAG notes that some gay persons prefer “disclosed” over “out” (i.e. “disclosed same-sex sexual orientation” or “out same-sex sexual orientation”) [8].

21. The use of the phrase *lifestyle* alongside mention of HIV is clearly connected to anti-gay sentiments and considerations of the disease as *GRID* (gay-related immune deficiency) [16]. As GLAAD notes: “[lifestyle is an] [i]naccurate term used by anti-LGBTQ extremists to denigrate LGBTQ people” [5]. PFLAG agrees by saying that “[lifestyle is a] negative term often incorrectly used to describe the lives of people who are LGBTQ ... The term is disliked because it implies that being LGBTQ is a choice” [8]. The more modern terminology is “behavioral risk factor” or “risk factor for” [17].
22. “Compulsive overt homosexual state” seems to have no direct reference in literature, unless it refers to what is now sometimes called “Homosexual Obsessive Compulsive Disorder” (HOCD) or, more inclusively, “Sexual Orientation OCD” [18].
23. No references to “Substitute homosexual” or “Substitute homosexuality” could be found in literature.
24. The idea that same-sex sexual orientation or behavior is symptomatic of mental illness. This has been largely discounted and discredited in the scientific community. Thus, removing the term “symptomatic homosexuality” is necessary, as it restricts the term from being used by anti-LGBTQ groups. Like conversion therapy, this is pseudoscientific at best, blatantly homophobic at worst.
25. Oxford University Press’ 2015 *A Dictionary of Psychology* defines *nymphomania* as “[a] psychological condition of women characterized by uncontrollable sexual desire and an inability to have lasting sexual relationships.” It further defines *satyriasis* as “[a] psychological condition of men characterized by uncontrollable sexual desire and an inability to have lasting sexual relationships. Referred to non-technically as Don Juanism” [19]. Generally speaking, contemporary literature and ontological terminologies consider the two terms to be separated only by ascribed gender. MedDRA currently classifies *nymphomania* as hypersexuality, while Read Codes, Clinical Terms Version 3 (CTV3) classifies *nymphomania* and *satyriasis* as “Excessive sexual drive” (it’s notable that CTV3 was merged into SNOMED and thus hasn’t been updated since 2000; ‘excessive sexual drive’ is also listed as a synonym for *hypersexuality*) [20]. As noted in the *Encyclopedia of Sex and Gender*: “Satyriasis is often considered the male counterpart to nymphomania, a condition in which women experience excessive sexual desire. Neither satyriasis nor nymphomania is recognized as a specific disorder in the Diagnostic and Statistical Manual of Mental Disorders (or DSM-IV) published by the American Psychiatric Association. Instead, the more general and gender-neutral term hypersexuality is used” [21]. Both ‘satyriasis’ and ‘nymphomania’ have perverse, laced histories wherein various human rights violations have been perpetrated—however, most importantly, their definitions have not been consistent. *Satyriasis* was originally a female designation, for example, to refer to a form of vulvodynia. It has also been labeled as a synonym for *satyriism*, *satyromania*, *erotomania*, and *Don Juanism*, even though

erotomania is now considered a delusional disorder. It is therefore recommended that SNOMED follow the lead of DSM-IV and consolidate these terms into “hypersexuality”. *Don Juanism* is considered a non-technical term for *satyriasis* and should be dropped entirely. As historian Carol Groneman notes “Nymphomania conjures up madness while Don Juanism hints of nobility and Spanish courts ... ‘Men are less stigmatized by this behavior...’ ‘for all it’s apparent openness, our society doesn’t yet loudly applaud a fully sexual woman” [22]. As clinical support worker and addiction professional Robert Weiss argued “[nymphomania is] an antiquated and demeaning word used to denigrate women. It is not a medical or psychiatric diagnosis, and it is certainly not helpful to anyone” [23].

26. GLAAD notes that the terms “sex change” and “sex change operation” are offensive and should be avoided, namely because it suggests that (1) a transgender person must have surgery in order to be considered transgender which leads to discrimination against non-surgically transitioned transgender people, (2) there are over 50 procedures (feminization laryngoplasty, bilateral mastectomy, facial feminization surgeries, etc.) to which could be referred to by these statements making them generally non-specific, and (3) implying that *sex* is being changed is not true and nonspecific—how is *sex* being qualified? It seems to imply that a castrated male is not “fully” male, just as it implies that a transgender man is not “fully” male until genitoplasty is performed, which is generally an unscientific conception of sex. It is therefore recommended that the umbrella term *gender-affirming surgery* (GAS) or *gender-confirming surgery* (GCS) be used instead of terms like *sexual reassignment surgery* (SRS). Further, more specific terms such as *genitoplasty* or *genital reconstruction surgery* should be used in order to avoid confusion as to which surgery is being practiced.
27. The term *frigidity* has derogatory connotations, especially because of its sexist historical usage, and has been replaced by the term ‘hypogyneismus’ by sex therapists [24]. The 2018 MeSH headings have folded *frigidity* under “Psychological sexual dysfunctions”. Descriptions of relative frigidity, absolute frigidity, primary frigidity, and secondary frigidity were poised as early as 1959 [25]. *Relative frigidity* was connected to another derogatory term, *nymphomania* in 1959 as well [26]. In the words of Leslie Margolin: “through the frigidity narrative, mid-twentieth century physicians managed to pass judgment, not only on women’s sexuality, but on their autonomy, their character, and the success or failure of their marriage: they are to blame when their husband leaves them for another woman; they are to blame when their husband is impotent; and they only have themselves to blame if they are unable to function in a sexually ‘healthy’ way” [27]. Because these terms are derogatory, sexist, and historically ambivalent, it is recommended that they are removed entirely where possible.
28. *Eunuchoid* meaning “resembling a eunuch” may refer to one’s having reduced or indeterminate sexual characteristics. *Eunuchoid gigantism* has been noted twice in PubMed, once as a likely erroneous 1970s translation from Japanese and the other as a paper published in 1950 [28], [29]. Julius Koch (1872 – 1902) was a victim of so-called “eunuchoidal-infantile gigantism” or “daddy-longlegs syndrome”. Neither of these terms appear in Google Scholar or PubMed, and cannot be found in any other context *other* than referring to Julius Koch. It is therefore recommended that *eunuchoid gigantism* be

removed. Next is the *eunuchoid voice*. Called the ‘falsetto’ in 1905 by Homer Dupuy, the eunuchoid voice is simply the persistence of the prepubescent voice in males after puberty. This is similar to the *castrato* archetype. David Morris’ opus *Dictionary of Communication Disorders, Fourth Edition* (2003) lays out a sea of what he refers to as “endocrine voice disorders”: castrati voice, eunuchoid voice, incomplete vocal mutation, delayed maturation of pituitary gland of thyrogenic origin, puberphonia, precocious vocal mutation, perverse putation, perello, menopausal voice changes, and the now offensive term, hermaphroditic voice. Morris defines the eunuchoid voice as a higher-pitched voice which responded to hormone treatment [30]. By this logic, it would seem that trans men pre-transition would also be technically considered as having a ‘eunuchoid voice’. Generally speaking, the term hasn’t appeared in literature since the 1960s, being replaced by a slew of synonyms (and mostly by defined hormone etiologies). This author recommends the usage of *persistent pubertal voice* or *persistent prepubescent voice* [31], [32].

29. Terms involving “masculinized” females or “feminized” males should be removed as they are non-specific. Do they refer to intersex conditions? Do they refer to gender identity, genotypic sex, or phenotypic sex? Generally speaking, more specific terminology should always be utilized in a clinical setting, with the terms “feminized male” and “masculinized female” being reserved in literature for non-human animals (historically the term has also been used in racist contexts while describing non-Western cultures) [33].
30. The TGEU and other transgender organizations advocate replacing *gender identity disorder* with *gender incongruence*, as well as removing timestamps such as “childhood”, “adolescence”, and “adulthood” (these ages are likely based more on stigma than on actual onset and the current phrasing implies that there is an *onset* of gender identity as a disorder, which is untrue) [10]. As the TGEU notes, “[t]he present diagnosis [of gender identity disorder of childhood] labels gender nonconforming children as mentally disordered which leads to unnecessary stigma, discrimination and results in social exclusion.”
31. “Gender dysphoria” is generally considered synonymous with “gender identity disorder” and is thus folded into “gender incongruence”.

References

- [1] Intersex Society of North America, “Is a person who is intersex a hermaphrodite?” 01-Jul-2013.
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