

Consent form for blocking female hormones

This consent form outlines important information you might want to talk to your health team about before starting blockers to block female hormones.

Lucrin (Leuprorelin acetate) injections or **Zoladex** (Goserelin acetate) implants work by blocking the production of female hormones in the ovaries.

The blockers are given every 10 – 12 weeks and will reduce the level of the female hormone oestrogen in the body. It will not make the body more masculine.

Blockers are a reversible medication used to stop the physical changes of puberty. It can be started in early puberty (Tanner stage 2-3). If started then blockers will usually stop significant breast development and further pubertal changes such as starting periods and widening of the hips. Blockers can also be started later in puberty where it may cause breast tissue to soften but not usually to reduce significantly in size. Blockers will stop periods but may take up to 3 – 6 months to do so.

Starting a blocker often improves psychological distress associated with having the unwanted female hormone and allows time to think about whether starting testosterone is right for you.

Common side effects

- Hot flushes
- Mood swings – mostly in the first few weeks of starting
- Possible fatigue

Most side effects should settle within a few days to weeks of starting the medications. Allergic reactions can happen but are rare. Please tell your health team if you have any problems.

Potential risks of blockers

- Increased height (unlikely if already through puberty)
- Decrease future bone density

Bones

Puberty is a time of increased calcium absorption and growth of bones. Blockers may interfere with this. For this reason it is important to look after your bones while on the blockers by keeping active and having enough calcium and vitamin D. It is not known if being on blockers increases the risk for osteoporosis (thinning of bones) in older age.

Fertility

Your fertility (ability to get pregnant) is likely to be affected after starting on a blocker, but this is not guaranteed. Contraception will be needed if there is any sexual contact that would put you at risk of getting pregnant. It is important not to get pregnant while on blockers as it may be harmful to the pregnancy.

If you decide to stop the blockers it is not expected that there will be any long term impact on fertility but periods may take a little time to return to normal.

Sex

Being on blockers may lower your desire to have sex. It may cause your vagina to become drier. This increases the risk of sexually transmitted infections (STIs), including HIV if you are having any sexual contact with this part of the body. Condoms provide good protection against STIs and lubricant helps to prevent any discomfort.

Risks of withholding blockers

Withholding the use of blockers may cause additional distress leading to anxiety and depression. Not using blockers can also lead to irreversible unwanted physical changes.

The Health Team

Keeping in touch with your health team for regular checkups and blood tests is an important part of your care and will reduce the risks of being on blockers. It is your health team's responsibility to best support you to make the decisions that are right for you and to keep ourselves up to date so that we can best inform you.

For many different reasons people question whether or not they want to continue to be on blockers. This can be a normal part of your journey. Please feel free to discuss this with your prescriber before you stop your medication. Come and talk – your health team is always ready to listen.

Are there any other questions you want to ask?

I wish to start hormone blockers:

Name

Date

Prescribed by:

Name

Date

