TWENTY MINUTES

AUGUST 1990 THE XX (Twenty) CLUB $2.00

SEXY SECRETS OF DOLLY PARTON'S LIMO DRIVER—HE USED TO BE A SHE

DOLLY PARTON is being chauffeured around Hollywood by a 300-lb. transsexual who has had an operation to change from a woman into a man. The country queen shares 44-year-old Jason Pirro's "secret" and has promised to help the obese, tuxedo-outfitted driver attain his goal to become a movie director.

"Dolly has been good to me," Jason told STAR. "I'm not real comfortable talking about myself. Dolly knows all about me and is a very nice lady. "Whenever Dolly comes into Hollywood for a meeting, or for business, or for filming, or just staying here, she calls me and I drive her around."

Court papers obtained by STAR show Pirro legally changed his name from Susan Ann to Jason in 1988 because of "sex-reassignment." Jason underwent a sex-change operation in 1982.

Jason, who has a beard and wears his thinning reddish-brown hair in a ponytail, came to Hollywood 10 years ago. At the time, he was taking hormone tablets and dressing as a man. He got a job as a limo driver.

Dolly has said that there's nothing wrong with transsexuals. "If I were a man I'd be a drag queen," she admits. "I enjoy being a trashy dresser and I love gaudy things. I love to play with hair and makeup."

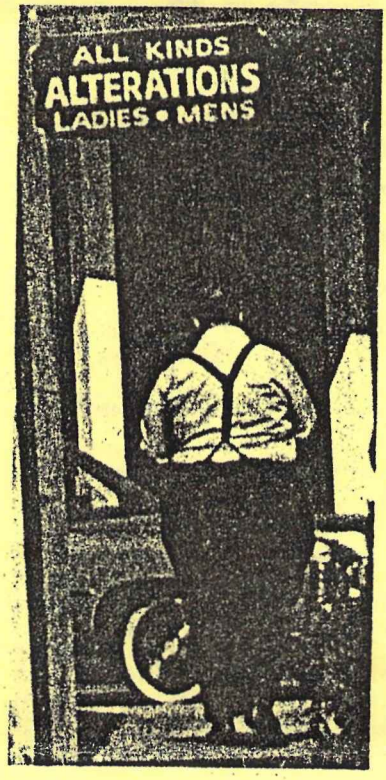
Jason studied theater as a coed at Syracuse University, but after eight years at college, left without graduating. Despite that, Jason has a genius-level I.Q. of 144.

A family friend says Susan was in her mid-30's when she decided to have doctors transform her into a man. "Jason has tried to make the family feel comfortable with the situation. Even by the time he started to grow facial hair and his voice was getting deeper, if we'd slip and call him Susie, he'd just hug us and say, 'That's OK.'"

"He's a loving warm, caring human being. He teaches transcendental meditation. He has never had an enemy. People just take a liking to him. He has that personality that makes you feel comfortable with him."

Story by Barry Levine, Yasmin Brennan, Alvin Grimes and Dave LaFontaine.

STAR July 10, 1990



WANTED - Several self starting individual types to assume dynamic leadership of transsexual support group. Must have own head screwed on tight and be able to take charge completely and show up at all meetings. Long hours, no pay and must be willing to put up with a lot. Master's degree in psychology and human behavior a must. Send all serious replies to The Twenty Club, POB 80690, Springfield, MA 01138.

GOT SOME TIME TO SPARE - Are you gender dysphoric? Got some information or feelings to share with other people like yourself in a friendly, laid back atmosphere? Want to find out more about yourself? Or did you ever wish you could help and lead others in a friendly, group environment, even for a few short minutes. No experience needed, Just an open mind and desire to help other people. Sincerity and a warm smile a must. Also must know when and how to give hugs. Reply The Twenty Club, POB 80690, Springfield, MA 01138

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Transsexual Support

TWENTY MINUTES

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THE XX (Twenty) CLUB, INC.
PO Box 80690
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THE TRANSSEXUAL SUPPORT GROUP OF NEW ENGLAND AND NEW YORK

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All the news that's print to fit.

This newsletter is funded entirely through subscriptions and the sales of educational materials. All written contributions welcome. A backlog of material may prevent the immediate publishing of submitted articles. The XX Club, or its members are not responsible for the opinions expressed or accuracy of information provided by the writers of unsolicited or solicited materials. Parts of this newsletter may be reproduced if source credit is given.

CLUB CALENDAR

MEETINGS

Saturday, Aug. 11

Saturday, Aug. 25

Saturday, Sept. 8

Seturday, Sept. 22

Regular meetings of the XX Club are held the second and fourth Saturdays of the month at 2 PM sharp to 5 PM.:

Christ Church Cathedral
45 Church Street
Hartford, CT

(Located at the corner of Church and Main Streets in the downtown area across from G. Fox.) If you believe you are gender dysphoric, you are welcome to visit and find out more about our group and talk about yourself and your feelings. The XX Club is a transsexual support group, not a dating service. There is NO SMOKING allowed during the meetings, though we do allow smoking during breaks and after the meetings. We attempt to provide peer support and practical information about making the gender transition, as well as information about the Gender Identity Clinic of New England. Parents, siblings, spouses and significant others are also welcome to attend.

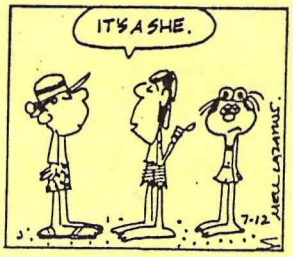
SAME-SEX MARRIAGES

Readers of Dear Abby expressing their view on the legalization of same-sex marriages were either passionately in favor of it or vehemently opposed. With over 55,000 letters, the count remained 2 to 1 against legalization with many intolarant and vicious responses. The Canadian mail is more objective and less shrill than that from the U.S. There seemed to be little interest from foreign cities, but great interest among North American readers.

EXAMPLE:

WHEN THE NEOPHYTE PRE-OP TS FIRST VENTURES OUT IN PUBLIC WITH FRIENDS OR RELATIVES!

MOMMA



BUSINESS

TREASURER'$ REPORT

Balance - from June		$1697.78
INCOME:		
Collections - meetings		14.00
Newsletter subscriptions		110.00
Brochure sales		26.50
IFGE sales		.00
GF sales		.00
Printing Fees		4.20
Donations		.00
Savings interest		7.90
Total Income	$162.60	
EXPENSES:		
Refreshments		31.18
Newsletter & brochures		124.95
Postage		25.00
Supplies		12.49
Bank Fee		.00
Total Expenses	$193.62	
Net Loss for July		$ -31.02
Balance - end of July		$1666.76

INCOME STATEMENT 1989-1990

Balance from F.Y. 1989		$1279.05
INCOME:		
Collections - Meetings		281.75
Newsletter Subscriptions		1236.25
Brochure Sales		253.30
IFGE Sales		237.10
CDS Sales		76.50
GF Sales		39.00
J2CP Sales		165.00
Printing Fees		48.12
Donations		168.15
Savings Interest		84.39
Total Income	$2589.56	
EXPENSES:		
PO Box Rental		72.00
Rent		.00
Refreshments		362.42
Gifts/Awards		191.35
Speaker's Fees		53.85
Newsletter/Brouchures		754.10
Postage		503.49
Supplies		171.39
IFGE Purchase		74.50
Bad Checks		.00
Bank Fees		18.75
Total Expenses	$2201.85	
Net Income for fiscal year		$ 387.71
Balance for F.Y. 1990		$1666.76

DISABILITIES ACT

The Americans with Disabilities Act has been approved by the U.S. Congress and signed into law by President George Bush. We believe that the admendment to specifically exclude TVs, TSs and Gays was not included.

THE MESSAGE IS THE MEDIUM

(Or, How Thick Is Your Skin?)

by Veronica Jean Brown

The following commentary was inspired by three newspaper articles which appeared the same day in a June issue of the Toronto Star (ED. NOTE - 35 cents Canadian or 29 cents in American funds). They could have however, appeared in almost any daily U.S. paper, with the possible exception of the Daily Rag A.K.A. the Hyannis based Cape Cod Sub Standard Times. The three articles were titled, "Dissent Isn't Welcome, Vatican Tells Catholics," "Victim Of Sex Assualt By Priest Gets $200,000" (ED. NOTE - or $170,000 in American funds), and "Ordaining Say Rabbis No Threat, Jews Say." So now you know where this is going and that I somehow intend to tie it all in with gender issues.

In the Vatican mandate article, the Vatican, that faceless leading monolith of male dominated hierarchy and religious power over others told Roman Catholics that it will not tolerate public dissent from official church teachings. By doing so, it asserted central authority with a severity never before seen in the reign of Pope John Paul II.

"The Christian faith is not a leisure time activity, and the church is not a club" (ED. NOTE - yes, but how many times in the not so distant past has the "church" wielded a club or a sword to get its message across?) said West German Cardinal Joseph Ratzinger, the church's custodian of orthodoxy. He wrote a 7,500 word (ED. NOTE - that's 8625 words in Canadian spelling) "instruction" for theologians and bishops released yesterday (26 June 1990) with papal approval.

"Standards of conduct, appropriate to civil society, or the workings of a democracy, cannot be purely and simply applied to the church," the document warns. It further asserts that the 850 million member church is by God's inspiration a hierarchy and requires obedience to central authority personified by the Pope.

Well, I don't know about you, but I'm quite quaking in my sneakers and don't know where to turn for salvation. By all sense of general definition, I have sinned terribly by changing God's creation of me by having healthy tissues removed from my body, but there's hope people, I can (and so can you if you are post-op) find salvation and forgiveness if I bow down and say I'm sorry. Does that wash with you? I didn't think so.

Cardinal Ratzinger's instruction is certainly to trigger protest among the liberal American and West European theologians who have publically challenged the Vatican on issues of faith and morals such as birth control. Faith and birth control. Now there's a mouthful. Do you think for one minute any of these radicals have challenged the Vatican on the issues of gender dysphoria and SRS?

The "instruction" (is this a modern day version of the Papal Bull? And we all know what bull is.) orders theologians who question elements of church teachings to express their reservations within the church (ED. NOTE - where of course they can be kept under close scrutiny and subject to the next available discplinary action including excommunication), but not publically.

"The theologian should avoid turning to the mass media, but have recourse to the responsible authority, for it is not by seeking to exert the pressure of public opinion that one contributes to the clarification of doctrinal issue and renders service to the truth," says the document. In other words, don't take your thoughts of heresy to the rabble because you might give them ideas about "free will."

And lastly, the "instruction" coldly rejects the assertion of some theologians that public opinion to the church ban on artifical birth control is permissible because it had not been dclared infallible. Even when a papal teaching is has not been declared infallible, it is divinely inspired and therefore must be obeyed.

In 1985, the Reverend Matthew Berko of Mississauga, Ontario Canada pleaded guilty to a charge of sexual assault that occurred in January 1984. The victim was a 21 year old (ED. NOTE - that's 24.1 in Canadian years) woman from the same city. Reverend Berko received a one year suspended sentence and returned to his parish in 1986, but after some parishioners picketed the Toronto residence of Bishop Isadore Borecky in 1987, Reverend Berko resigned from his church and was assigned to a parish in Stamford, Connecticut. Berko later worked at a Florida church and returned to Stamford last year where he was assigned to clerical duties.

"The whole hierarchy of the church has to be questioned" (ED. NOTE - does the Vatican know about this?), said Mike Petryshen, one of the woman's supporters who claimed the church is less interested in justice than in avoiding bad publicity. The woman's mother said poor treatment by other female parishioners who consider themselves "good Catholic women" has shaken their faith.

Turning to the article written by the Star religion editor, Michael McAteer, a decision to allow homosexual clergy in one branch of Judaism will not split Canada's Jewish community, leading Canadian Jewish leaders believe.

They spoke out after the progressive Reform branch of Judaism, in a move that parallels the action reecently taken by the United Church of Canada, that opened the doors to gay clergy in the U.S. and Canada.

"All Jews are religiously equal regardless of their sexual orientation," said a report by a committee of rabbis. "Although homosexual behavior is considered sinful in the Bible and Jewish law, homosexuals are entitled to ordination and placement in synagogues that will accept them." (ED. NOTE - Aye! there's the catch, eh. Unfortunately, in spite of this apparent easy going attitude, the report does not support gay weddings. One has to go to Denmark for that. It declared that heterosexual marriage continues to be the norm in Jewish life. The issue of homosexual ordination is not under consideration by Judaism's two other major movements, Conservative and Orthodox.

Said Rabbi Erwin Schild of Adath Israel Congregation in North York, Ontario, "homosexuality is forbidden in Judaism. It is not part of the Jewish way of life and the Jewish community as a whole would not tolerate it as an alternative lifestyle. One should have compassion and understanding of homosexuals, he said, but added he would openly oppose the ordination of a gay rabbi.

Homosexuality is a term given to gays by the straight people, similar to the term "transvestite" given to crossdressers by the non-CDers. Most transsexuals do not seem to dislike the term transsexual, but some have objected to the name "trannie" or "transie" (ED. NOTE - both terms are common in Toronto), but these terms come from within the community and are not labels placed upon them by outside groups.

Can a transsexual or gender dysphoric person seriously turn to a priest or minister for advice? I think not, except under special conditions when the religious person is either very compassionate or as in the case of Reverend Clinton Jones of the Gender Identity Clinic of New England, someone who has worked actively for many years to minister to transsexuals, transvestites and gender dysphorics.

As in any human endeavor, whether divinely inspired or not, there is always dissent and disagreement. The serious transsexual should carefully consider the source of such and then maybe proceed in an orderly fashion to the nearest exit. The sad thing is that in comparison to the major concerns of many religious leaders, the minute numbers of gender dysphorics is terribly small potatoes to them.

HAIR TODAY, GONE TOMORROW

(Or, Just Keep Plugging Away)

by Veronica Jean Brown

I can't remember what I had for lunch last Tuesday, but I do recall my first haircut, when as a little boy, my grandfather took me to his favorite local barber shop just around the corner from our New York City apartment on Broadway at 160th Street in the upper west side of Manhattan. I remember it being a sultry, simmering city summer day and how I had to sit on this special black leather seat to raise my little body up to the proper level. Oh and I cried and cried but when the lollipop the barber gave me afterwards magically stopped my tears.

And then some years later, I remember my mother shearing my head butch style for the summer like a farmer's bleating and protesting sheep with the home barber outfit she had. It was 1956, haircuts cost seventy-five cents and it was an expense the family budget could do better without.

Years later in the early 60's during high school, I tried to wear my hair in the then popular semi-D.A., or duck tail style, or sometiaes in a modified longish flat top. You know, you brushed the hair back at the sides and top and with a quick whisk of the brush, flipped the top forward and down. Trouble was, my hair was so fine and so limp, I had to go four days at least without shampooing before my hair had enough oil to retain that style. I didn't believe in using Vitalis or other treatments. At other times my hair style ranged from a military butch, a college crew cut to a neatly trimmed medium length style parted on the left side.

With the coming of the Beatles, I wore my hair as long and loose as my employers would allow me to at the time and as the years slipped by and I approached my late 20's, I noticed with dismay how my hairline was slowly receding on both sides of my forehead. And as I combed my hair with the part on the left side, I also noticed that there seemed to be one spot that was thinning a bit. I kept telling myself it wasn't really happening and that it would suddenly cease.

I can remember one night in 1977 taking a bath and seeing the tub covered with strands of hair after draining the water. It was at this time I started on female hormones and I apparently suffered no further hair loss. But the existing damage was already done and could not be reversed by the hormone therapy. The entire top of my head with the exception of the front middle had undergone a slight thinning. For me as a then thirty-two year old male, this thinning though unwanted, was acceptable but I wondered if I'd be able to get by with my own hair when the time came to live as a female.

In July of 1983, I got my first perm (while still living in the male role), which after having straight, limp hair for all of my life, really caused a commotion among those who knew me. By the time my third perm rolled around in early 1984, my hairdresser knew about the feminizing transition I was undergoing and gave me feminine styled perms and cuts. The only way I could make it in the real world without wearing a wig was to have my thinned, limp and fine hair curled into a tight perm and plastered with hair spray to keep the wind from blowing the front and sides back to reveal the receded masculine hairline.

Often times I agonized over not having started my transition when I was still in my early twenties and hadn't suffered any hair loss at all. I had met a number of young transsexuals in recent years and was envious that they had long, flowing, thick tresses and didn't have to resort to the trickery and camouflage as I was forced to. In the 60's, only the smartest of the gender dysphoric people were able to seek out and locate competent medical professionals and begin their transition to gender normalcy. I was not among their number and was locked into a role and a life style I didn't want.

Most of the subsequent perms I got from my personal hairdresser were good ones and she did a great deal to help maintain my illusion of femininity. Some of the perms didn't turn out so great since after attending various hairdressing and beauty seminars, she was eager to try out the newly learned techniques on her clients. One perm in 1988 resulted in massive hair breakage and I didn't return to her salon for an entire year and relied upon my curling irons to style my limp hair into a feminine hairstyle.

In late 1989 I moved from Massachusetts to Toronto, Ontario in Canada and sumaoned the courage to try out a local hairdresser. I told her I wanted a tight but gentle perm to cover my thinning hair, but my worst fears were realized. She didn't know my hair condition and the perm caused massive breakage once again.

If you've ever lived in a city, you quickly become aware of a specific fact. The architects of high rise buildings and skyscrapers deliberately design their structures as to magnify twenty fold the local natural wind conditions on any given day. Go to New York City on a wintery February day and you'll see what I mean. Hair spray is not a miracle product and can only do so much.

On Monday, the 28th of May, I had the first in a series of two or possibly if needed, three hair transplants to correct my male pattern hair loss and to give me a feminine hairline. The plastic surgeon who performed the surgery was Paul C. Cotterill, B.Sc., M.D., of 2156 Yonge Street, Toronto, Ontario Canada, M4S 2A8, phone (416) 484-8303.

My previous experiences with others who had transplants done were few. I recently saw a television program that showed graphic video and audio scenes of the procedure, had accompanied a friend to New York City a few years back when she had her surgery done and had seen the results of a "flap type" surgery done on a Twenty Club member by a Boston surgeon.

If you paid cash, the consultation fee was $40 (Canadian, or $32.80 American). If you were covered by Ontario's provincial health plan, the fee was $100 and was billed directly to the medical plan. Prior to April 1990, all Ontarians who had this plan, known as OHIP, paid a modest $35 fee per month for complete medical coverage. After April 1990, all Canadians received FREE medical insurance coverage. (Are you listening out there all you greedy, profit coveting American health insurance companies?). Hair transplants in most cases are not covered by OHIP, but voice surgery is, but that's another story.

Dr. Cotterill was a young man (younger than this 44 year old writer) who had thinning and receded hair. His desk side manner was excellent, in fact, as I have recently had personal dealings with other Canadian medical professionals, I have noticed a (for the better) difference in the way patients are treated. He showed me his extensive portfolio of previous clients and with a grease pencil, drew several different styles of hairlines on my forehead. I got to pick the one I liked the best. It was at this time that he found out I was a transsexual. While Dr. Cotterill's patients are mostly male, he does have a number of female patients who also seek corrective surgery for their hair loss.

He received a $1000 deposit and the balance of $1625 was due on the day of surgery. I was to get 75 plugs removed from the back of my head and have half of that number transplanted on each side of my forehead. The plugs cost (they cost $30 in December 1989) $35 each so 35 times 75 is $2625 Canadian or about $2205 in American funds. I was given a series of forms to fill out and a detailed list of pre-operative instructions.

On the day of the surgery, I was given 20 milligrams (four little white pills) of Vallium and politely ushered into one of the tiny operating salons thirty minutes later and

at 11:30 AM, the procedure was begun. Dr. Cotterill and four nurses performed specific, well orchestrated duties. I was instructed to lie on the table on my stomach with my face in a plastic pillow that had a breathing hole in the center. I was handed a gas mask connected to a pair of blue and white cylinders of nitrous oxide mixed fifty-fifty with oxygen while a nurse administered a series of xylocaine injections in the back of my head to freeze the area.

As xylocaine injections are painful, the laughing gas was supposed to lessen the pain, but it didn't and several times, I jumped off the table and clung in absolute terror to the ceiling until the nurses were able to scrape me off the acoustic tiles with a shovel and get me back on the table. After the donor area was finally frozen, the hair was clipped back to a very sort length and Dr. Cotterill quickly and painlessly augured out 80 of "325" and "375" sized plugs. (Yes, I got five extra free plugs done worth $175 - thanks Doctor!) As Canada went metric a number of years ago, I assume these numbers to be metric measurements. A team of two nurses seated at a nearby table processed these plugs by counting, arranging, trimming away excess fatty deposits and bisecting some of them into elongated grafts and dissecting others into micro grafts to line the edge of my new hairline.

The 80 donor sites (in three neat parallel rows) were quickly and painlessly stitched closed with two transverse longitudinal stitches and then I was instructed to lie on my back after they raised one end of the operating table to a 50 degree angle. Gulp. Now it was time to freeze the forehead. As I had previous experience as a part time manager at several MacDonald's fine fast food family restaurants, I knew that at the most inopportune times, the CO2 (carbon dioxide) cylinders that provided the fizz for the K-WAY (soft drink dispensers) would suddenly run "dry". I asked the nurses to please check the nitrous oxide cylinders. And sure enough, as I suspected and as my luck would have it, they had fed me nitrous oxide from an empty gas cylinder. "Naughty, naughty," I said, pointing a finger of accusation. "No wonder it hurt like hell!"

Well, they apologized, switched over the valve to a full cylinder and handed me the mask and I took five deep breaths. Wow. Far out man. Have you seen the pizza dude? What an excellent tubular experience! The nurse came at me with the xylocaine needle and I stared at her through beady Orson Wells like eyes and said, "Go ahead, make my day."

She said, "inhale, exhale, inhale, exhale..." Each time I inhaled, the needle went in and there was hardly no pain.

I mean talk about camaraderie. The di- and bisecting nurses were busy slicing and dicing my recently separated flesh with a Veg-O-Matic, the nurse with the pony tail was watching my progress of gas induced stupor (Watch it! I said stupor, not stupid) and the fourth nurse shot me up.

"Say," I said, grinning a little, "did'ya ever think about mixing this stuff with helium instead of oxygen? I'd be talking like Mickey, I mean- Minnie Mouse. Wouldn't that be fun?"

"Say," I said with a grin the size of an chromed grill on a 57' Coupe De Ville, "did'ya ever see the remake of the Little Shop of Horrors? Remember that scene with Steve Martin as the crazed dentist getting high on this stuff?"

"Say," I said with my grin now as big as the Grand Canyon, "did'ya know this stuff was used as a recreational drug by the upper crust folks in the late 1800's? Huh? Did'ya? Huh? And did'ya know that Coca Cola used to contain trace amounts of cocaine. I read about it in a book once, I mean where else would I read about it, except in a book." I was making perfect sense to myself of course, but the smiling looks on their faces led me to suddenly suspect otherwise.

My forehead was now completely frozen and to check it, the nurse jabbed a needle in here and there. No pain, not even the feeling of the needle prick. Suddenly Dr. Cotterill appeared and asked how I was doing, and I said, "Fine, fine, fine, super fine, fine...Doctor!"

Well, the fun and games were over now. Dr. Cotterill worked as efficient as any competent H.A.S.H. surgeon would have done. He drilled out the recipient sites on both sides of my forehead. I barely heard the sound of the drilling tool, but as when he did the back, I only slightly heard the faint raspy sound as each hole was made. Then there was the gentle tug and the soft plop as the unwanted plugs of flesh were plucked out.

There was little talking in the room now. Dr. Cotterill gave quick but polite instructions and they were followed at once. This was the serious part and as the nitrous oxide slowly wore off, I had enough sense to lie still and keep my mouth shut.

The recipient grafts were pressed gently and firmly into place but not stitched in. A large turban like white pressure bandage was quickly applied after Dr. Cotterill checked and rechecked the positioning of each plug. I was offered some chocolate chip cookies and chilled orange juice. Delicious. It was 3:20 PM. Where had the day gone? Time sure flies when you're having fun. And I hadn't had this much fun since that fateful day back in July 1978 when I abruptly left the relative safety of a DeHavilland twin engine "Otter" aircraft at 2200 feet over a quaint country airport in Connecticut wearing a military surplus jump suit, combat boots and crash helmet with a pair of 'chutes strapped to my body. And yes, I did yell "Geronimo!"

I was given verbal instructions by one of the nurses and a four page information sheet with explicit post-operative care instructions. I received a packet of drugs that included: Tylenol #3 (with Codeine), Percocet (stronger than the Tylenol #3's, Demerol (stronger than Percocet and which must be taken with the accompanying Gravol to prevent nausea and is often times taken by Canadians when listening to the MP's, MPP's and other national leaders of various and vague repute being interviewed on the CBC news), three sleeping pills and a bunch of anti-inflammatory pills to minimize swelling. Two weeks earlier, I was given a prescription for an antibiotic which I had begun taking two hours prior to the surgical procedure.

I used all the Tylenol #3 and tried one Percocet but I didn't like the side effects and didn't even consider using the Demoral. Tylenol #1 with 8 milligrams of codeine phosphate can be bought in Canada over the counter for $9.99 per 100 caplets and these served me well enough to relieve the minor discomfort I had during the first week post-op.

I took my anti-inflammatory pills on the second day and suffered no swelling and very little pain. I returned to Dr. Cotterill's office at 10:45 AM the following day (Tuesday) to have the bandage removed and the donor and recipient sites cleaned and checked. A couple of grafts needed to be pushed back in a bit. The nurse with the pony tail from the previous day engaged me in polite conversation and asked how I was referred to Dr. Cotterill. I said it was through Michelle Duff, the former internationally famous Canadian motorcycle racer. "Oh yes, we all know Michelle very well." From then on, the conversation descended into the standard question and answer period that often times occurs between an experienced, wordly, knowledgeable and thoroughly content post-operative M-F transsexual and an open minded medical professional hungry for some first hand knowledge on the transsexual phenomenon. They often read about us in medical text books, but to actually talk with one of us is an experience very few people ever have. She was amazed at my knowledge and awareness of medical terms and techniques.

On the third day (Wednesday) I was feeling really great and forgot to take my anti-inflammatory pills and at 11 AM while conducting a business matter over the phone and chewing away on a slice of whole wheat toast made from locally grown Canadian grain, I felt both sides of my

head between my ears and the corners of my eyes popping out. Within five minutes, these areas had swollen to the size of a third of a ping pong ball. I took the required medication at once but it wasn't until late afternoon that the swelling went down and on Thursday, I still had a little swelling. So much for being Supervoman.

I had my first real bath on Thursday and soaked the back of my head in the warm, gentle Canadian water as per the post operative instructions. The top of my head was still numb (and yes, several people close to me called me a numbskull all week!) and after the required ten minutes soaking, I gently massaged the stitched area to remove as much of the dried and crusted blood as possible. The donor area must be kept clean to allow the stitched parts to heal and shrink to allow normal regrowth of hair to the site.

On Friday and Saturday, I repeated the washing process and was able to style my hair in the usual feminine manner, though when I did venture out, I wore a brightly colored, feminine scarf covering my entire head. Remembering a Halloween pirate costume of the 50's, I thought about getting an eye patch.

The facial swelling that appeared on Tuesday remained with me off and on all week and by Friday, the skin under my right eye was a bit puffy and slightly discolored. I continued using Tylenol #1, massaged the back of my head whenever the spirit moved me which it did quite often and continued to marvel at the bristly growth of hair that magically sprouted from the many grafts inserted in both sides of my forehead. Though Dr. Cotterill removed 80 plugs from the donor site at the back of my head, I counted about 65 separate transplanted plugs in the front on each side, for a grand total of 130 grafted plugs. Two thirds of the plugs were large round ones of two slightly different sizes, but a number had been sliced into elongated sections and some were dissected into micro grafts that contained only two or three individual hairs and these lined the edge of my new hairline.

I hadn't had a hairline like this since I was a teenager. No, after checking my copy of the 1964 edition of the MASACKSIC, my Longmeadow High School yearbook and carefully studying the numerous photos of myself, I realized that my old masculine hairline was indeed much different from the new feminine hairline given to me by Dr. Cotterill. He told me that I had the best hair texture for the transplant procedure. Fine, limp hair was by far the best kind for transplanting

Saturday night was by far the worse night for discomfort but the Tylenol #1 helped a bit. I was up watching television until 5 AM but managed to get some sleep. There was no pain, just a slight itchiness over the recipient areas and an obvious discomfort from the donor areas at the back of my head. My body tends to close up openings very quickly and while the sutured area was clean, scab free and without infection, the discomfort was caused by the shrinking of the tissues against the lengths of black stitches. All week, I've had to put up with being called numb skull and bristle head (only kidding again). After my daily shampoos, I was able to style my hair forward and down across the two recipient areas, but to prevent the wind from blowing the hair back, I wore that scarf whenever I ventured out.

There are pros and cons about everything in life and hair transplanting is no exception. Some patients have complained about the "shower head" sprays of hair sprouting from their scalps, or the so-called spaghetti strand effect, or not having a very realistic looking hairline. So what else is new? Those early (circa 1984-1986) American patients of Docteur Seghers may or may not have as an esthetically appearing external female genitalia as those people who went to Brussels in 1987-1990. At least, that's what I've been told and again I'm not mentioning any names here either.

A Canadian TS woman had a series of three hair transplant augmentation surgeries performed by a Toronto plastic surgeon (not mentioning any names here) with the last one performed in 1984. Mary (not her real name) had much more extensive hair loss than I did including a very high receded hairline on her forehead. This was corrected by making an incision at the existing receded hairline, making a second incision in a curved horizontal line 3/4 of an inch below and across her lower forehead, cutting away and discarding the scalp tissue in between, stretching and pulling the two boundaries together and suturing them to each other.

Much to the dismay of the patient, she experienced a massive loss of hair from a two inch circular section on one side of her head several months after the scalp surgery was done. This was due to the shock her scalp had received as a result of the flap procedure. It wasn't until a full year later that Mary felt comfortable with the results of her three transplants and one scalp surgeries.

Mary's three surgeries only included the large circular plug grafts and not the bisected, elongated grafts as I received. She also did not get the micro grafts along her new hairline as I did with my recent surgery, so her hairline is not as "perfect" as it could be. But she's happy and I have to wait for time to pass to see the results of my first surgery and then to make plans for a second and if needed, a third procedure.

Monday the 4th of June was a chilly 10 degrees Celsius in *Toronto the good* and I returned to Doctor Cotterill's office. One of the men I saw there the previous Monday had returned to have his stitches removed. He wore a red baseball cap. There were two women in the waiting room. One was perhaps forty-ish and had extensive, probably 75% total hair loss on the top of her head. She kept glancing towards me as if to ask about the results of my surgery, but I carefully avoided her eyes. The other woman was thin, thoroughly grayed, and suffered from random patchy hair loss. Hell, I thought, maybe I didn't have it so bad after all if it hadn't been for the emotional paranoia that most transsexuals face about being read as the wrong gender because of some physical flaw.

After greeting me in his usual cheerful manner, Doctor Cotterill inspected my head and said everything looked fine. I thanked him profusely and shook his hand. Two nurses then removed the two stitches and told me there was a little bit of crusting where the lower longitudinal stitch had been. They reviewed some last minute post-operative instructions, I thanked them, put the pretty pirate scarf back on my head and stepped out onto Yonge Street. The temperature had risen to 12 degrees.

With the stitches now gone, I patiently wait for the scabs to fall off of the recipient plugs, for the donor site to completely heal and for the newly transplanted hairs to fall out and eventually grow back in again. Doctor Cotterill said to expect the bisected grafts to grow back in sooner. How nice, I thought. This is all very much like designing a house. The foundation had been established in the 80's, the framework erected, power and plumbing hooked up, the roof was on and all of the interior work was finished. Now, for a few more needed cosmetic touches on the exterior.

The difficult we do immediately-- the impossible we sub-contract!

(MULTIPLE CHOICE PHOTO CAPTIONS)

1. Veronica Brown shown here one day post-op after a hair transplant by the window in her luxury high rise downtown Toronto apartment washing down an ear of imported American Florida corn.

2. Veronica Brown shown here by the window of the psychiatric surgical ward following a brain transplant at Toronto General Hospital after being kidnapped by a militant TV terrorist force and given the brain of a recently dead person who likes transvestites.

3. Veronica Brown shown here wondering why she would want this photo taken and then printed on the pages of *Twenty Minutes*.

4. None of the above.

5. All of the above.

A Word About Hormones & Vitamins

by Catanja Lynn Irwin

As soon as my endocrinologist put me on Estinyl (Ethinyl estradiol) last Jan, I rushed to the library and looked it up in the Physician's Desk Reference. Looking anxiously throughthe possible side effects, I discovered to my chagrin that Estinyl can cause asthma - I'd had asthma in my forties!

"Not to worry," I told myself,"if I get asthma again, I'll cure it the same way I did last time - with vitamin A."

Sure enough, after a month or two taking Estinyl, I began to notice the typical symptoms indicating the onset of asthma.My lungs began collecting fluid overnight and I began having occasional difficulty breathing during the day. I began taking 30,000 I.U. of vitamin A per day, and My condition immediately improved. Six months after starting Estinyl, I am completely free of all asthma symptoms.

I then remembered a book I had bought a few years back, "Women (And the Crisis in Sex Hormones)" by Barbara and Gideon Seaman MD. I fished the book out of my library and looked up vitamin A. Here is what it said, "For unexplained reasons, serum vitamin A levels are raised in [birth control] users by 30 to 80 percent. It is thought that this may reflect a shift of the vitamin from the tissues to the blood. In theory, this could have untoward effects on women who are already deficient. Symptoms include night blindness and other visual disturbances, as well as lowered resistance to infection."

The appendix to the Seaman book indicates that taking estrogens can cause a vitamin deficiency of almost ANY vitamin or mineral. Any prospective recipient of female hormones might do well to read up on vitamins and minerals.

POST CARD

Becky,

Paris was wonderful, the Eiffel Tower, Arc de Triumphe, Rodin's Art, it's a 3 hour train ride but worth it. The Grand Place was under construction but there was much to see in Brussels. Everything (SRS- ed.) went well.

Vicki & Wendy

Congratulations, Vicki! Best wishes, Becky.

Being Accepted as a Woman

by Sonia

We in the transsexual community are in a rather difficult situation... we are struggling to be accepted as women, and yet we have been conditioned all of our lives to be men. Even if we can overcome this "programming", we still must face the fact that the vast majority of us have little or no experience in the arts of fashion and makeup. This problem is further complicated by having to hide certain male traits as well as having to create certain female traits.

Almost from the moment of birth, we are classified as male by the "plumbing" that we come equipped with. From that moment on, we are taught and expected to act like little boys. We are given blue blankets and our parents pass out the "Its a boy" cigars. As our lives progress, we are given toy soldiers and model planes. We are encouraged to be tough, not to cry, and to play sports. All along, movies, tv, comics, and just about all other forms of media images serve as role models for our behavior. Although we are "women trapped in a male body" we really have none of the social skills or mannerisms of women. There is however, a bright side to all of this: Anything that can be learned can be unlearned. If we keep in mind that once we learn female mannerisms and unlearn male ones, we are well on our way to being accepted as women.

While there is no one sure-fire way to learn how to act, walk, and talk like a woman, I can offer some advice: Watch how other women act, walk, and talk. I know this sounds silly and over simplified, but it is one of the most effective methods that I have found. We all stand to learn a great deal about human nature just by observing others. Unlearning male habits (such as compulsively holding the door open for EVERYONE ALL OF THE TIME) is something that will certainly help.

To the general male population, fashion sense is largely unimportant. In fact, a male who shows too much interest or knowledge of fashion is many times branded as effeminate. This has the effect of keeping us ignorant of even the most simple and obvious rules of how to dress. The solution to this problem isn't quite as simple as watching other women to see how they dress. The reason for this is that there are many women out there who have absolutely no idea how to dress themselves. Keep in mind that the styles that we like are not always the styles that make us look our best. Following the latest fashion trends is not always a good idea, as the colours and styles never seem to flatter YOUR body in the same way as the 17 year old girl on the magazine cover! It may help to go out and purchase a book on fashion and colour coordination. ("Colour Me Beautiful" is an excellent example.)

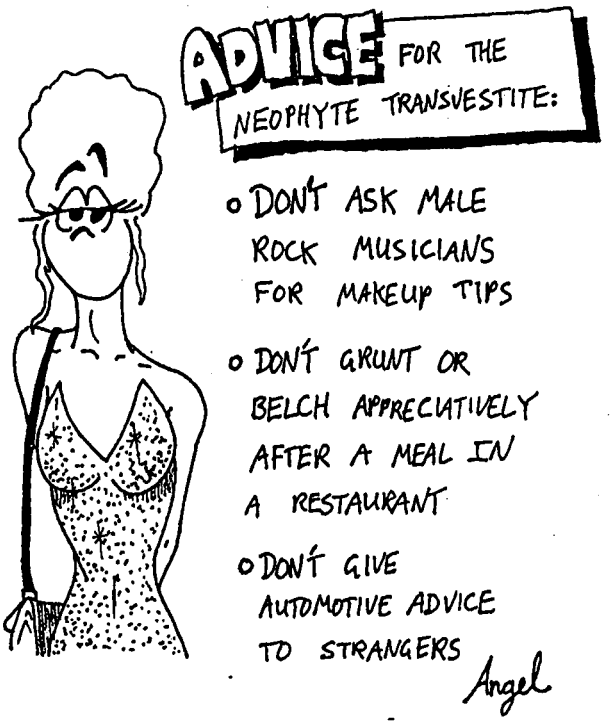
We as transsexuals are least likely to have experience in the area of makeup. Again, it is not a good idea to rely solely on observing others for the same reasons as stated above. There are numerous books on the market which go into great detail on this subject. It is also advisable to get a subscription to a girl's or women's magazine such as "Seventeen" or "New Woman". The most important part of learning makeup and hairstyle is to practice, practice, practice.

Much has been said on the subject of "tucking", "gaffing", and other methods of hiding the male organ. While it is certainly necessary to keep this particular body part out of sight, there is something that can be done without physically torturing one's self in the process. Staying away from tight skirts and jeans is a good starting place; after all, why make the problem bigger by wearing clothing that is designed to show off your body. In fact, if you really want to cut down on visibility, try wearing pleated skirts and pants which, by their natural bulk and bagginess, will help to hide the offending member.

For those who are cursed with being rather tall, wearing longer and baggier styles should help to eliminate some height. Another effect this style creates is the illusion of fuller hips. Staying away from one peice outfits (such as jump suits and dresses) and/or wearing belts whenever possible will help to hide height as well as tone down a long waist.

Do not slouch to reduce the appearance of broad shoulders and/or height, as this will only serve to attract (negative) attention. Strangely enough, outfits that have shoulder pads can help to deemphasize broad shoulders. This is because these outfits were DESIGNED to look good with broad shoulders; simply adding shoulder pads to an outfit that was not designed for the "broad shoulder look" will end up looking ridiculous.

In summary, there is no one simple solution to being accepted as a woman by the general public. There are some obvious things that should be avoided, and many things that can help our appearance. What you do will depend upon your individual desires, strengths, and weaknesses. As the song goes, "...You got to accentuate the positive, eliminate the negative..." That was certainly a bit of very good advice.



TOP 10 EXCUSES...
To get Saturday off for the XX Club Meeting

by Sonia

10- Family is out of town.
9- Have an audience with the Pope.
8- Uncle Gus died.
7- Close friend died.
6- Car died.
5- I died.
4- My dog ate it. (ED. note- this was accidentally mixed with #4 in next month's top 10 column entitled "How to Explain Your M-F Re-assignment Surgery to Complete Morons. We apologize for any confusion.)
3- Have the flu.
2- Mars & Venus are at a critical juncture, and there's bad karma for you concerning money today.
1- Have to get a haircut (only works if your boss is constantly complaining about the length of your hair.)

MICHAEL NEE LAURA

(The Story of the World's First Female-to-Male Transsexual)

by Liz Hodgkinson

Columbus Books, London, U.K., 1989

Reviewed by Rupert Raj

Not only the world's first "woman" to surgically transform into a man (complete with functional artificial penis by means of a series of operations from 1942 through 1949), but also the world's first and perhaps the only, Westerner to become a Tibetan-ordained-Buddhist-monk, Liz Hodgkinson deserves a pat on the back for penning this comprehensive and enlightening account of the shy, aristocratic, British ship doctor, Dr. Laurence Michael Dillon (born Laura Maud Dillon in 1915), whom she introduced three years earlier in BODYSHOCK: The Truth About Changing Sex.

Hodgkinson first heard of Michael Dillon (he later dropped Lawrence) from Roberta Cowell an intersexed English "man" who underwent sex-reassignment surgery to become a complete female, and whose story was published in 1954. Ironically, Michael fell madly in love with Roberta, whom he met in 1950. His feelings, however were not reguited even though she had greatly admired him and thought him to be "not bad-looking, a very masculine type." A greater irony would have been if she had felt the same way, thus making them the first married transsexual couple in history - a scandal that certainly would have chagrined the impeccable upper-crust of Anglo-Irish aristocracy. In fact, Michael's older brother, Robert, Jr., the eighth baronet of Lismullen (in Ireland), refused to accept his new brother and did not allow him to visit him.

According to the author, Dillon had been a feminist before his "change", but became a misogynist and a chauvinist, afterwards. And, after his rejection by Roberta, he continued in his "confirmed bachelorhood". This was partly due to his intrinsic shyness, and partly to his mortal fear of his "secret" being found out. Thus, it is small wonder that he never had a sexual experience as either man or woman.

However if Dillon was a chauvinist then Cowell (with her prior male conditioning and patriarchal bias) was similarly guilty of sexism as evidenced by her statement that one of the reasons she would not marry Dillon was because she would regard this as "two females getting married." And, this was after the fact of Dillon's phalloplasty and before Cowell's own "change over" was complete. This elitist attitude of seeing female-to-male transsexuals as (still being female is one that is adopted by a number of today's male-to-female transsexuals).

The book chronicles the various events that make up the personal history of Dr. Dillon from nursery days to his last days, including his ordination as a Buddhist monk (as Lobzang Jivaka) in Rizong, Tibet in 1960, some two years prior to his untimely death (caused by malnutrition) in Dalhousie, India. The author spins a good yarn based on her research of Dillon's journals, unpublished memoirs, letters, manuscripts, and published works (now out-of-print), as well as interviews with those who knew him.

Overall as transsexual biographies go it makes for engrossing reading despite this reviewer's disturbing sense of an underlying attitude on the writer's part of a real inability to accept let alone empathize with Dillon's unique sexual dilemma and his chosen surgical solution.

" THE NEWSLETTER THAT "

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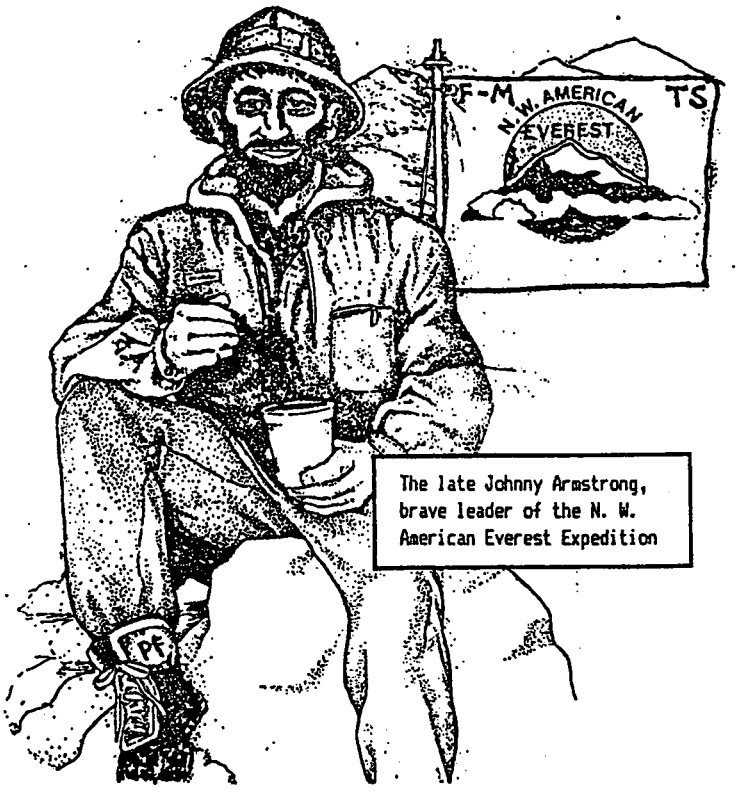

The late Johnny Armstrong, brave leader of the N. W. American Everest Expedition

Twenty Minutes is a great transsexual newsletter for all kinds of transsexuals, even those who love the great outdoors and especially those macho F-M guys who like to show off their new testosterone modified bodies by performing feats of great daring - like climbing Mt. Everest.

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Unfortunately, as the daring team approached the summit on the Northwest face of the lofty rock, a sudden gale sprang up and blew everyone off the mountain and to their untimely deaths in the glacial crevasses below.

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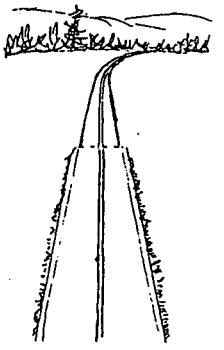

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