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reference will surface to betray them.

Said Wendy [redacted] an attractive transsexual who runs a music service for composers and song writers: "Sometimes you hear the dumb remark that you have the best of both worlds. More often than not, you have the worst."

Carol Katz, for example, said her salary is \$6000 a year less since her sex reassignment. As a man she worked in law enforcement but as a woman has been unsuccessful in returning to that field. Now clerking is the only job she can find. (Title 7 of the Civil Rights Act forbids discrimination on the basis of sex but no court case has interpreted the law to include transsexuals.)

Though many staunchly insist they have no regrets, only two out of ten transsexuals make a happy adjustment, according to estimates from the Erickson Educational Foundation, an informational clearing house on the subject in Baton Rouge, La.

Female-to-male transsexuals seem to have an easier time because, even with slight builds, they blend into society. Some male-to-females with strong features and rangy bodies stand out.

Erickson director Zelda Suplee said with compassion: "They feel like Marilyn Monroe and look like Johnny Cash."

Bizarre and bewildering though it may seem to some, transsexualism is not a new phenomenon. It has existed in mythology, Greek and Roman history and the tribal cultures of North American Indians.

However, it was two Californians, Renee Richards, a Newport Beach ophthalmologist, and, to a lesser degree, Steve Dain, an Emeryville gym teacher, who brought the subject to national consciousness.

Such cases present a tangle of

Determining Who Is a Transsexual

Los Angeles

It's estimated there may be as many as 20,000 transsexuals in the United States but no one can say for sure.

Nor can experts agree on the cause. One theory holds transsexualism may be the result of prenatal hormonal influences.

Another lays the blame on smother-mothers who pick out beautiful male infants and keep the children close to their bodies.

The mothers may be latent homosexuals, one researcher believes, and the male infants never do develop a sense of masculinity. The data simply aren't conclusive support to either claim, however.

Generally, transsexuals are defined as men or women whose mental representation of themselves — their gender identity — is in conflict with their anatomy. That is, a man with a male body believes

medical, legal and social issues and, almost inevitably, stir moral repugnance.

"Especially disturbing — and not to the religious alone — is the body mutilation and destruction of fertility that must accompany sex-transformation procedures," writes psychiatrist and gender identity pioneer Robert J. Stoller in his book, "Sex and Gender."

Dr. Charles Stone, a psychiatrist at the University of California at Los Angeles, believes many people are personally and emotionally threatened in contemplating transsexuals wanting their genitals removed. "And it is typical that rather than be in touch with those

he is a woman; a woman with a female body believes he is a man.

Transsexuals differ from homosexuals who, if they are men, know they are and want to have sex with another man. Transsexuals know they have a male body but regard themselves as women.

Dr. Charles Stone, a psychiatrist at the University of California at Los Angeles who screened 100 patients in a sex-change program, makes the distinction easily:

"A (male) homosexual wants to use his penis. A transsexual does not. He considers his external genitalia a grotesque excess."

Transvestites are altogether different, Stone said. They derive sexual satisfaction from dressing in the clothes of the opposite sex. Transsexuals cross-dress only to feel more comfortable.

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feelings and expressing them, people take a moral or legal view."

Despite the supposed blurring of sex roles these days, transsexuals say they could not feel complete without the surgery to match mind and body.

Though cosmetically remarkable, surgical results are far from physically perfect. The Stanford University Gender Dysphoria Program in 1974 reported 18 of 38 patients had postoperative complications. (In female-to-male surgeries, complications were further broken down to include rejection of testicular implants, infection and

"desire to shoot the genitals of the surgeon with a shotgun.")

More than a dozen university hospitals and private clinics around the country offer the operations.

Reputable centers require psychiatric evaluation, a period of living in the new role and hormonal treatment. Surgical techniques vary but the usual male-to-female procedure is to remove the penis and testes and use the penile tissue to form a vagina. Cosmetic surgery, including breast augmentation may follow.

A hysterectomy and mastectomy are performed in female-to-male patients. Artificial testicles are implanted and a penis is constructed from skin grafts.

In one common procedure two prostheses are fitted postoperatively, one that provides sufficient rigidity for penetration during intercourse, another that serves as a urinary conduit.

The legitimacy of surgery for true transsexuals is not open to question, especially since there is no psychiatric treatment for them, Stone said. "These people are not freaks. They are not delusional. They have a dilemma."

But at the same time Stone, other specialists and a growing number of transsexuals fighting for their civil rights claim there are an excessive number of surgeries today.

Too many are being done on the wrong people and too few cases are adequately followed up, they say.

At least ten times as many people apply for surgery as should have it, Stone estimated. The gender clinic at Stanford rejects 75 per cent of its applicants. Stone approved only 13 of the 100 people he screened.

"That means 87 people were mad at me," he said. Many said they would commit suicide if he did not approve them. He told them threats were unacceptable. Stone screened out effeminate homosexuals who wanted the surgery to please their lovers, men who wanted to only imitate women, and psychotics.

"What is really deplorable and shocking to the medical profession is that there are places where people just show up and the surgery is done," Stone said.

Such practices invite malpractice suits and the risk of patients becoming "mentally out — psychotic," said Stone, adding that he has seen postoperative instances of both.

Irresponsible sex-change surgery may doom some individuals to social suicide, transsexuals said. Consider the men who simply don't pass as women.

"They should have just tried to live the way they were because they were at least more successful that way," one transsexual said. Unless they shut the door and never look in the mirror, they are going to be detected every time.

"They have to go to the gas station, the drugstore, the grocery, and they're going to be called 'sir' in all those places. That's the horror story.

"There are a lot of transsexuals who are mistakes."