

# A summary guide to Prescribing Requests for Gender Dysphoria and Transgender Care Patients

The following Guidance contains information about:

- **Prescribing and Monitoring Hormone Therapy in Primary Care on Advice from NHS Gender Identity Clinics (GICs).**
- **Prescribing GnRH analogues**
- **Prescribing Bridging Prescriptions for those awaiting an appointment with a NHS GIC.**
- **Requests by Private Service Providers to Prescribe Hormone Treatments for Transgender People - Primary Care Responsibilities**

## Background

If a patient requests treatment for gender dysphoria, referring them to a Gender Identity Clinic (GIC) or an experienced gender specialist without delay will likely be the best option. An experienced gender specialist will have evidence of relevant training and at least two years' experience working in a specialised gender dysphoria practice such as an NHS GIC.

Every patient's treatment journey will be different and GICs aim to provide care packages tailored to individual need. GPs should collaborate with experienced colleagues and GICs to provide effective care and a positive experience for the patient<sup>1,2</sup>.

All GPs in England may refer their patients directly to a GIC and do not need to refer them to a mental health service for assessment beforehand<sup>1</sup>. GPs don't need to seek prior approval from their Integrated Care Board (ICB).

## A. Prescribing and Monitoring Hormone Therapy in Primary Care on Advice from NHS GICs.

Medications recommended for the treatment of gender dysphoria are usually used outside the licensed indications approved by the Medicines and Healthcare Products Regulatory Agency<sup>1,3</sup>. As is typically the case in respect of old drugs repurposed for new indications, these products are unlikely to be licenced for this indication in the future. However, they are widely used medicines in other contexts, with which GPs are generally familiar. Medicines used outside the terms of the licence are considered 'off-label' or sometimes referred to as unlicensed. The General Medical Council advises GPs that they may prescribe 'unlicensed medicines' where this is necessary to meet the specific needs of the patient and where there is no suitably licensed medicine that will meet the patient's need<sup>1,3,4,5</sup>.

GICs are not currently commissioned by NHS England to prescribe treatment or provide / arrange any investigations, however, the specialists at the Gender Identity Clinic make recommendations. Therefore, it is not possible to initiate or continue hormone treatment without the support of primary care. Existing GMC guidance is supportive of these arrangements for prescribing<sup>1,3,4,5</sup>.

Some GPs have expertise, or an extended role, in the area of transgender care and act in their patient's best interests, within the limits of their competence. For many GPs, without this expertise or extended role there may be limitations to their provision of monitoring and prescribing for a patient seeking transgender care<sup>6</sup>.

General Practitioners should collaborate with the specialist Gender Identity Clinics and/or an experienced gender specialist within the limits of their competence and prescribe hormone therapy (feminising or virilising endocrine therapy) recommended for their patients<sup>1,5,6</sup>.

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If an individual GP within the practice is uncertain about their competence to take responsibility for prescribing on the recommendation of the GIC, they should seek further information or advice from the Specialist or from another experienced colleague within the practice.

If the GP is still not satisfied, the care may be provided by another GP within the practice. It is the intention of the national commissioned service that patients should be able to obtain their medication and monitoring from their GP practice.

## B. Prescribing GnRH analogues

From 26 June 2024 General Practitioners (GPs) in England will only be able to supply prescriptions for GnRH analogues in the following circumstances:

- The patient is aged 18 years or over; or
- The patient is under 18 years old, and the purpose of the prescription is for a medical condition other than gender incongruence or gender dysphoria; or
- The patient is under 18 years old and has started treatment with these medicines, and for these purposes they will be treated as having started treatment if they have been issued with a prescription for these medicines since 3 December 2023, even if they have not yet started taking the medicines.

### April 2025 – from NHSE circular - **Suppression of pubertal development**

*A GP must refuse to support the private prescribing or supply of GnRH analogues. It is a criminal offence for a healthcare professional to privately prescribe or dispense this drug to patients under the age of 18 as a puberty-suppressing treatment option for gender incongruence or gender dysphoria unless that treatment had begun before 3rd June 2024.*

*A GP should refuse to support **an unregulated** provider in the prescribing or supply of alternative medications that may be used to suppress pubertal development.*

## C. Prescribing Bridging Prescriptions for those awaiting an appointment with a NHS GIC.

Transgender and gender diverse patients can face long waiting times before their first appointment with a NHS-commissioned Gender Identity Clinic. Prescriptions will not be issued by the NHS-commissioned service until it has assessed and diagnosed the individual in accordance with the current commissioning protocol<sup>1,5,6</sup>.

Patients may opt to self-medicate with hormones and/or anti-androgens and this is likely to cause harm. The GMC advises GPs that if the patient is distressed, or the GP believes them to be at risk from self-harm, the GP should offer them support and consider the need for referral to local mental health services<sup>1</sup>. The Royal College of Psychiatrists guidelines suggest patients presenting on illicit hormones **could be issued a bridging prescription** by their GP while they await assessment at a Gender Identity Service<sup>6,7</sup>.

GMC guidance suggests, bridging prescriptions should only be considered where<sup>1</sup>:

- Someone is **self-medicating** hormones or seems highly likely to self-medicate from an unregulated source (over the internet or otherwise on the black market) OR,
- The bridging prescription is intended to mitigate a risk of **self-harm or suicide** AND,
- The doctor has sought **specialist advice** and prescribes the **lowest acceptable dose** in the circumstances.

It is advisable to conduct a documented risk assessment of the individual with due consideration of the above points and is the GP satisfied that:

- in their opinion as a non-specialist that the patient suffers from gender dysphoria?

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- the prescription is needed, in the patient's best interest and likely to be of benefit?
- They are practicing within their competencies for the best interest of the patient?

Guidance, checklists and further information about prescribing in Gender Dysphoria, produced by the GICs can be found in the links below:

- (i) Leeds Gender Identity Service Hormone Clinic [Leeds and York Partnership NHS Foundation Trust -Gender Identity Service](#)
- (ii) The Nottingham Centre for Transgender Health Network Guide to the prescribing of Hormone Treatment and collaborative working arrangements with GPs [NCTH-Network-Guide-to-prescribing-of-Hormone-Treatment-v5-05.22.docx](#)
- (iii) Sheffield Health and Social Care - [Trans woman Prescribing Guidelines \(2022\) \(002\).pdf](#)
- (iv) Sheffield Health and Social Care - [Transman Prescribing Guidelines \(2022\).pdf](#)
- (v) South West GIC - [Downloads and publications for Clinical protocols and prescribing guidelines | DPT](#) – choose Gender Dysphoria.

It is in the best interest of the patient to obtain this medication and support from their GP practice whilst awaiting further support from a GIC.

If an individual GP within the practice is uncertain about their competence to initiate a bridging prescription, they should seek further information or advice from a GIC or from another experienced colleague. If the GP is still not satisfied, the care may be provided by another GP within the practice.

#### **D. Requests by Private Service Providers to Prescribe Hormone Treatments for Transgender People - Primary Care Responsibilities<sup>8,9</sup>**

- **NOTE:** [NHSE Press Release Dec 2024](#)- Medicines (Gonadotrophin-Releasing Hormone Analogues) (Restrictions on Private Sales and Supplies) Order 2024 came into force on 1<sup>st</sup> January 2025. This prevents the Sale and supply of **puberty blockers via private prescriptions** for the treatment of gender incongruence and/or gender dysphoria **for under 18s**. [NHSE has produced guidance](#) for prescribers on this legislation change which includes a useful table (on p4-9).

Prescribers are responsible for the prescriptions they sign. When prescribing based on the recommendation of another doctor, nurse or other healthcare professional, the prescriber should assure themselves that the person providing the recommendation<sup>9</sup>

- has the necessary qualifications, experience, UK registration, knowledge and skills to be making the recommendation and
- are working for a CQC-regulated service. This may be confirmed by searching the full list of services CQC regulate at: <https://www.cqc.org.uk>

**NHS England's advice in regard to requests by [private on-line providers](#)<sup>8</sup> (adults):** GPs are advised to consider each request to prescribe hormone treatment in gender dysphoria on a case-by-case basis to satisfy themselves that

- (i) the request is from a reputable company that provides a safe and effective service; and
- (ii) the circumstances of the request for the particular individual meets the general principles of the General Medical Council's "Good Practice in Prescribing and Managing Medicines and Devices"; and
- (iii) that the health professional making the request is an appropriate "gender specialist" (the term that is used in the General Medical Council guidance).

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**Note:** For children and young people under 18 years, the above advice has been replaced by [NHSE Guidance To Primary Care About Unregulated Providers Who Supply Hormone Medications To Children And Young People For Gender Incongruence](#) April 2025<sup>12</sup>

## Local Guidance and Checklists

Below is a list of local support tools for Practices – [available on Knowledge NoW](#).

- Am I able to provide NHS prescriptions for patients seeking transgender care? – **a Pragmatic guide for practices.**
- Private Gender identity Clinics - **suggested checklist** for practices asked to prescribe and provide care for a patient (over 18 years) recommended by a private Gender Identity Clinic
- A **template letter** is available to share with private and online providers to assist GP Practices and Prescribers obtain the relevant information required to make an informed decision.

## References:

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11. [Trans Health Transcript – GMC](#) [Accessed Nov 2024]
12. NHSE April 2025 [Guidance To Primary Care About Unregulated Providers Who Supply Hormone Medications To Children And Young People For Gender Incongruence](#)

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