THE ROLE OF SEX HORMONES IN THE DEVELOPMENT OF CONSTIPATION. A CLINICAL PROSPECTIVE STUDY IN SUBJECTS WITH GENDER INCONGRUENCE ASSIGNED MALE AT BIRTH AND ASSIGNED FEMALE AT BIRTH DURING GENDER AFFIRMING HORMONE THERAPY

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A 24-week study of 22 persons undergoing gender-affirming hormone therapy found that oestrogen therapy was associated with worsening constipation symptoms and harder stools in AMAB individuals, while testosterone therapy was associated with improvement in AFAB individuals.

KEY POINTS

- All 10 AMAB persons receiving oestradiol valerate gel showed increased PAC-SYM scores for rectal and stool subscales, with 60% reporting harder stools (Bristol types 1-3), compared to baseline.
- AFAB persons receiving testosterone reported decreased PAC-SYM scores across all subscales and 100% had soft stools (Bristol types 4-7), with statistically significant differences from AMAB persons (p=0.01 for abdominal, stool subscales, and stool consistency; p=0.02 for rectal subscale).
- No significant association was observed between achieved hormonal levels and variation in PAC-SYM scores or stool consistency.
- The authors suggest sex hormones may play a role in gastrointestinal functional symptoms, with oestrogen potentially slowing colonic transit and testosterone potentially improving constipation symptoms, though this was an observational study in a specific population.

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