

TO: Chair Carpenter and members of the House Health and Human Services Committee

FROM: Charles Peters, MD, OFS

DATE: January 28, 2025

WRITTEN TESTIMONY IN FAVOR OF HB 2071, THE HELP NOT HARM ACT

Chair Carpenter and members of the committee:

Thank you taking time to consider my testimony in favor of HB 2071, the Help Not Harm Act. I am a Board-certified Pediatric Hematologist/Oncologist and Pediatrician who has worked in both academic medical centers and a large multi-specialty clinic in a large Midwest hospital and clinic system during my career. I am currently retired.

Most recently I worked as a general pediatrician and was the medical director of the Child Development Services (CS) program. The purpose of the CDS program was to evaluate and coordinate treatment of children with a wide variety of developmental and psychological issues including school problems, ADD/ADHD, anxiety, depression, mood disorders and gender dysphoria. Many of the children evaluated in CDS had experienced one or more adverse childhood events (ACEs), had neurocognitive diagnoses and lived in stressful home environments. Of those with gender dysphoria, such co-morbidities were the rule rather than the exception. I support HB 2071, The Hep Not Harm Act, for many reasons including the solemn obligation as a healthcare professional to do no harm and to refer children for treatment of serious underlying psychopathology with cognitive behavioral therapy and/or psychiatric consultation. I and the medical community recognize the problem is not with the body of child but rather with the mind. I have followed the medical literature closely and attended medical conferences at which respected leaders in the field such as Dr. Paul Hruz, MD, PhD have spoken and eloquently expressed that reason, sound medical care and research DO NOT support treating children with cross-sex hormones and/or surgeries for gender dysphoria. Furthermore, the long term follow-up studies in this field from Europe (especially ,Sweden, Finland, The Netherlands, and England) have demonstrated that suicide rates are profoundly higher among individuals who have undergone these horrific treatments. In the case of England, their principal major clinic for such treatments (i.e., The Tavistock Clinic) has been closed by The National Health Service.

I wish to thank the committee for allowing me to provide this written testimony. I am available for questions by email ([cjpeters2011@gmail.com](mailto:cjpeters2011@gmail.com)) or phone (612-760-6192).

Sincerely,

  
Charles Peters, MD, OFS

Board-Certified in Pediatric Hematology/Oncology (#1157) and Pediatrics (#38575)

MO Medical License No. 2005029313, expiration January 31, 2026

WI Medical License No. 57086-20, expiration October 31, 2025