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DISORDERS OF SEX DEVELOPMENT: MAKING AMBIGUITY LESS AMBIGUOUS

CHRISTOPHER P. HOUK, MD

*Department of Pediatrics
Backus Children's Hospital
Savannah, Georgia*

PETER A. LEE, MD, PhD

*Department of Pediatrics
Penn State College of Medicine
Hershey, Pennsylvania
Indiana University School of Medicine
Indianapolis, Indiana*

INTRODUCTION

The recent consensus conference^{1,2} on intersex, subsequently referred to as disorder(s) of sex development (DSD), made several important in-roads towards the establishment of an internationally endorsed intersex management guideline; nevertheless, some very fundamental questions remain.

Some of the most contentious topics simply were not considered for consensus because of a lack of outcome data on which to anchor objective assessment. Other topics, such as how to make management decisions in the absence of objective data, were not approached.

The recent controversy in the medical management of DSD has arisen primarily due to the complaints of adult DSD patients about the lack of full disclosure, absence of participation in treatment decisions, minimal privacy about their condition, and the consequences of genital surgery. There has also been criticism centered on the use of the “optimal gender” concept for gender assignment, an approach that viewed gender as a largely social construct whose predominant influence was sex of

From The Editor's Desk

Dear Colleague:

The publication of this issue was made possible through an unrestricted medical education grant from Pfizer, Inc. We also received support from Pediatric Sunshine Academics, Inc. and from many individual donations from our loyal readers. This allowed us to close the year with a big bang; the printed issue of Volume 23, Number 3 of GGH was expanded to 28 pages. On behalf of the editorial board and all of our readers I want to express my deep and most sincere appreciation to the sponsors who made possible the publication of this highly regarded journal.

The lead article of this issue was written by Drs. Christopher Houk and Peter Lee—it deals with a subject of great current interest, “Disorders of Sexual Development: Making Ambiguity Less Ambiguous.” In addition there are 22 reviews of peer-reviewed papers published in the recent literature, each one of them with erudite editorial comments. Additionally, we will be offering the capability of obtaining CME credits for reading GGH. CMEs will be available online at our website www.GGHjournal.com—click CME.

We will continue to search for the support that is needed to produce a high quality medical education journal for pediatric endocrinologists and for all those interested in the field. The long-term support through a single sponsor that GGH enjoyed in the past is currently not available, thus we will hope to elicit partial funding from multiple sources to be able to provide you with GGH throughout 2008 and thereafter.

Should you wish to contribute to the journal's success please make a special year-end tax-deductible contribution either on line (www.GGHjournal.com or www.PedsAcademics.org) and click make a donation, or send a check to Pediatric Sunshine Academics, Inc. 1040 Alston Road, Santa Barbara, CA 93108.

Thank you for your interest in and support of GGH.

Fima Lifshitz, MD
Editor-in-Chief