



Written by [Michael Tennant](#) on March 31, 2026

AMA: We Didn't Mean It When We Said Kids Shouldn't Get Gender Surgery

Does the American Medical Association (AMA) support or oppose gender surgery for minors? It depends on when you ask.

In early February, the AMA told multiple news outlets including the [New York Times](#) that “surgical interventions in minors should be generally deferred to adulthood.” In a recent [newsletter](#), however, the AMA’s board of trustees categorically denied that the AMA had changed its policy on gender surgery and accused “reporters” of mischaracterizing the organization’s stance.

What gives?



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Off to See the Wizard

In January, Centers for Medicare and Medicaid Services Administrator Mehmet Oz convened a meeting of the heads of America’s major medical organizations to discuss gender treatments for minors. The conference attracted little attention at the time, but two weeks ago, the [Times](#) published a story on it, writing:

Dr. Oz pressed on a question that hangs over the entire field: Why did these organizations recommend medical intervention for young patients — including hormone treatment, puberty blockers and surgery — when the research on whether it helped young patients in the long term, especially on mental health, was inconclusive?

The medical-society leaders almost unanimously defended their decisions to push “gender-affirming care” despite the lack of evidence in its favor. Only one, representing the American Society of Plastic Surgeons (ASPS), was willing to follow the evidence where it led. The ASPS, he said, was changing its position and now recommending that gender surgery not be performed on children and adolescents.

Shortly thereafter, the ASPS issued a [statement](#) explaining that, given the lack of evidence and “emerging concerns about potential long-term harms,” it recommended “that surgeons delay gender-related breast/chest, genital, and facial surgery until a patient is at least 19 years old.”

Contacted for comment on the ASPS’ policy shift, the AMA issued a statement saying it concurred with the ASPS’ position. Thus, reporters naturally told their readers the AMA had reversed course on gender surgery for minors.

Agree to Disagree

That seemed to be the end of the story — that is, until the AMA board’s March newsletter came out. The newsletter included a section stating, “AMA policy on gender-affirming care is unchanged.”

The board recalled that it crafted its February statement in anticipation of press inquiries following the



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ASPS' announcement. "The Board agreed on language to be used only if the AMA was contacted by the media, and for the AMA President to use in interviews," it wrote. "During our Board discussion, we were clear that we were not changing AMA policy."

According to the [Times](#), the full statement read thus:

Our colleagues at ASPS concluded that the evidence supporting gender-related surgery in minors is insufficient and of low certainty. The American Medical Association respects the expertise and dedication of surgeons who care for patients every day. The AMA supports evidence-based treatment, including gender-affirming care. Currently, the evidence for gender-affirming surgical intervention in minors is insufficient for us to make a definitive statement. In the absence of clear evidence, *the AMA agrees with ASPS* that surgical interventions in minors should be generally deferred to adulthood. [Emphasis added.]

Yet the board had the audacity to assert:

While some media coverage characterized this as agreement with the ASPS statement, *that phrasing did not come from the AMA*. Unfortunately, how reporters frame their stories is beyond our control. [Emphasis added.]

So, according to the board, the phrase "the AMA agrees with ASPS" — which, contrary to its assertion, came directly from the AMA — does not actually mean "the AMA agrees with ASPS." Only agenda-driven reporters — such as those notorious right-wingers at the *New York Times* — could possibly have interpreted it that way.

Doctors' Orders

As if that weren't confusing enough, the board went on to state:

Our recent response to questions about ASPS's position statement was intended to preserve — not diminish — access to gender-affirming care, and to clarify and reinforce what our policy has long reflected and standards of care. The AMA supports gender-affirming care as medically necessary per our policy.

In other words, saying that "the AMA agrees with ASPS" was really intended to say that the AMA *disagrees* with the ASPS and believes surgical mutilation of children should continue [despite all the evidence to the contrary](#), not to mention the potential for [multimillion-dollar malpractice judgments](#).

On top of all that, the board wrote:

In recent days, AMA communications to the *New York Times* have requested a correction on their part to reflect the actual language the AMA used in response to their inquiry. Additionally, a letter to the editor has been submitted requesting a public correction — this was neither a policy change nor was it an endorsement of a position taken by another medical society.



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Paddling the Board

Fed up, the *Times* published a [“fact check”](#) Friday eviscerating the AMA’s claims. The paper’s reporting on the AMA’s gender-surgery shift was “accurate and factual,” while the board’s newsletter “contradicts the A.M.A.’s own statements,” declared the *Times*. Furthermore,

The Times has received no requests to correct, clarify or update our articles from the A.M.A. After the board chair’s comments, Times reporters also confirmed with the A.M.A. spokesperson that the statements reflected in our previous reporting remain accurate in reflecting the association’s stated positions. The board chair’s claims are not based in fact, and are in contradiction to both the association’s own statements provided to The Times.

It seems clear that the AMA is still in thrall to the gender cult. Between that and the board’s completely counterfactual claims, why should anyone trust this organization?



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