



Written by [Michael Tennant](#) on February 8, 2026

Major Medical Groups Reverse Course on Gender Surgery for Minors

In the wake of a [landmark case](#) finding medical professionals liable for a detransitioner's distress, two major medical organizations are now urging their members not to perform gender surgeries on minors.

On Tuesday, the American Society of Plastic Surgeons (ASPS) issued a [position statement](#) recommending that "surgeons delay gender-related ... surgery until a patient is at least 19 years old." The next day, the American Medical Association (AMA) [concurred](#).



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Damage Control

The groups made their announcements just days after a New York jury [ordered](#) psychologist Kenneth Einhorn and plastic surgeon Simon Chin to pay \$2 million in damages to Fox Varian, a young woman who now regrets the double mastectomy she underwent at age 16. Einhorn wrote a letter to Chin recommending Varian for surgery, which Chin then performed. According to [The Epoch Times](#), Varian claims "she experiences ongoing pain, has post-traumatic stress disorder, and requires corrective surgery" as a result of the procedure.

Varian's case is just one of "dozens of lawsuits filed by people who came to regret the gender-related procedures they underwent as teenagers," [The New York Times](#) reported Wednesday.

It is, therefore, difficult not to view the ASPS's and AMA's sudden reversals as responses to these lawsuits. The ASPS statement declares:

Consistent with ASPS's August 2024 statement that the overall evidence base for gender-related endocrine and surgical interventions is low certainty, and in light of recent publications reporting very low/low certainty of evidence regarding mental health outcomes, along with emerging concerns about potential long-term harms and the irreversible nature of surgical interventions in a developmentally vulnerable population, ASPS concludes there is insufficient evidence demonstrating a favorable risk-benefit ratio for the pathway of gender-related endocrine and surgical interventions in children and adolescents. **ASPS recommends that surgeons delay gender-related breast/chest, genital, and facial**



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surgery until a patient is at least 19 years old. [Emphasis in original.]

Uncertainty Principle

The ASPS based its position primarily on two major government-sponsored studies of gender medicine: the United Kingdom's 2024 [Cass Review](#) and the U.S. Department of Health and Human Services' 2025 [Treatment for Pediatric Gender Dysphoria: Review of Evidence and Best Practices](#).

"These reviews," wrote the ASPS,

have not resolved earlier uncertainties regarding treatment benefit; in some areas they have contributed to a clearer understanding of potential harms, while also highlighting limitations of the available evidence, including gaps in documenting long-term physical, psychological, and psychosocial outcomes.

Both reports highlighted the fact that the overwhelming majority of kids who experience gender dysphoria eventually outgrow it — if they are *allowed* to outgrow it instead of being "affirmed" in their confusion by adults who should know better. As Varian told the court, the responsibility for preventing her from making a dangerous, life-altering decision "falls on the shoulders of the adults that were supposed to guide" her.

The "uncertainty" about which children will outgrow their gender issues and which won't, observed the ASPS,

has significant ethical implications: when the likelihood of spontaneous resolution is unknown and when irreversible interventions carry known and plausible risks, adhering to the principles of beneficence and non-maleficence (i.e., promoting health and well-being while avoiding harm) requires a precautionary approach.

Ethic Cleansing

Giving patients anything they demand, particularly if they are minors and don't understand the full implications of their requests, runs counter to long-standing medical ethics, the ASPS stated. Those ethics, however, went out the window when doctors became convinced of the righteousness of the cause of making kids feel better about themselves in the short term — unknown long-term consequences be damned.

Thus, the ASPS "affirms that truly humane, ethical, and just care, particularly for children and adolescents, must balance compassion with scientific rigor, developmental considerations, and concern for long-term welfare."

A significant portion of the ASPS statement reads like a brief addressing the Varian case. Noting that "surgical decision-making carries heightened ethical, clinical, and legal risk" in adolescent gender procedures, the society cautioned against:

- relying on "letter[s] of support" (such as the one Einhorn sent Chin);
- making treatment decisions under the [false notion](#) that "withholding or delaying the intervention substantially increases suicide risk" (as Einhorn led Varian's mother to believe); and



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- assuming that post-surgery outcomes can “be confidently attributed to surgery” (as Chin did in finding that the mastectomy had improved Varian’s outlook).

The ASPS argued against laws prohibiting gender procedures on minors, contending that “professional self-regulation” is the best approach. Of course, had professionals regulated themselves properly in the first place, they would not now need to worry about laws — or lawsuits.

Second Opinion

The AMA, likely concerned about the same things, issued a [statement](#) Wednesday saying that, while it still supports “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.

Whether other medical organizations will follow suit remains to be seen. There are [billions of dollars](#) to be made from gender treatments. It is a sad commentary on the medical profession that, apparently, only the threat of even bigger malpractice claims can bring many doctors to their senses. As [Dr. Mary Talley Bowden](#) put it on X:

My profession is filled with weak cowards. This never should have happened We don’t live in the Middle Ages and we shouldn’t need a statement from a medical society to tell us mutilating children is wrong.



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