THE ABC MEDICAL COMMITTEE'S SUGGESTED GUIDELINES TO COMMISSIONERS CONCERNING THE HEALTH AND SAFETY OF COMBAT SPORTS PARTICIPANTS July, 2012
ABC MEDICAL
RECOMMENDATIONS/GUIDELINES FOR
THE IMPROVEMENT OF THE HEALTH
AND SAFETY OF COMBAT SPORTS
PARTICIPANTS

Date: July 2011-2012

Medical Chair: Sheryl Wulkan, M.D.
Transgender Policy
**ABC TRANSGENDER MEDICAL POLICY**

**Drafted 2011-2012**

Purpose: The policy is aimed at allowing combat sports athletes to participate in competition in accordance with their gender identity while maintaining the relative balance of competitive equity among competitors. The ABC medical committee feels it prudent to draft this document proactively. State and federal statutes prohibiting discrimination based on gender identity/expression mandate this issue be addressed. In addition, the number of transgender athletes requesting licensure for combat sports participation is increasing.

The gender issue is likely to arise as a result of:

a. Issues arising at the time of licensure
b. Suspicion raised as to an athlete’s gender as witnessed during the ringside physician’s examination
c. Suspicion raised as to an athletes’ gender as witnessed during an anti-doping control specimen collection

The matter should be reviewed both at the level of the ABC member Athletic Commission in whose jurisdiction the athlete wishes to compete and by the appropriate ABC Medical Committee participants.

Policy:

**Male to Female: Transexuals**

1. Individuals undergoing sex reassignment from male to female **PRIOR** to puberty should be regarded as girls and women (female).

2. Individuals undergoing sex reassignment from male to female **AFTER** puberty should be eligible for participation in female competitions under the following conditions:

   o Surgical anatomical changes have been completed, including external genitalia and gonadectomy. (required for grappling and MMA only)

   o Hormone therapy appropriate for the assigned sex (female) has been administered by a board certified endocrinologist or internist, pediatrician or D.O. or by any other specialist known to have significant knowledge and experience with transsexual and transgender individuals for a MINIMUM of TWO YEARS after gonadectomy. This is the current understanding of the minimum
amount of time necessary to obviate male hormone gender related advantages in sports competition.

- A letter from a board certified physician responsible for the care of this patient will need to be submitted to the medical review panel of TUEs will not be granted for HRT the athletic commission being petitioned for licensure and to the ABC Medical Review Board.

TUEs will not be granted for HRT. As with all competitors, the transsexual athlete may be subject to drug testing before, during and/or after competitions at the discretion of the licensing Commission. If drug testing is to occur PRIOR to an event, it is recommended that the sample be taken as close to the competition as possible to rule out performance enhancing use of androgenic steroids.

**Female to Male : Transexuals**

Individuals undergoing sex reassignment from female to male **AFTER** puberty should be eligible in male competition under the following conditions:

- Hormone therapy appropriate for the assigned sex (male) has been administered by a board certified endocrinologist or internist, pediatrician or D.O. or by any other specialist known to have significant knowledge and experience with transsexual and transgender individuals.
- A letter from a board certified physician responsible for the care of this patient will need to be submitted to the medical review panel of the athletic commission being petitioned for licensure and to the ABC Medical Review Board.

TUEs will be granted for FTM, providing the appropriate documentation has been submitted to, and accepted by, the licensing Commission. As with all competitors, the transsexual athlete may be subject to drug testing before, during and/or after competitions at the discretion of the licensing Commission. If drug testing is to occur PRIOR to an event, it is recommended that the sample be taken as close to the competition as possible to rule out performance enhancing use of androgenic steroids.

**TRANSGENDER POLICY**

**Trans Males**

1. A trans male (female to male) athlete who is on testosterone replacement therapy may compete only as a male. TUEs will be granted if the appropriate
documentation is provided, but random blood tests will be performed before, during, or after competitions at the discretion of the licensing Commission.

2. As with all competitors, the transgender athlete may be subject to drug testing before, during and/or after competitions at the discretion of the licensing Commission. If drug testing is to occur PRIOR to an event, it is recommended that the sample be taken as close to the competition as possible to rule out performance enhancing use of testosterone, as opposed to appropriate medical prescription for female to male transgender re-assignment.

3. A trans female (male to female) athlete being treated with testosterone suppression medication may compete as a male until completing two years of documented testosterone suppression therapy.
   
   ○ Hormone suppression therapy must be administered by a board certified endocrinologist or internist, pediatrician or D.O. or by any other specialist known to have significant knowledge and experience with transsexual and transgender individuals.

TUEs will not be granted for HRT. As with all competitors, the transgender athlete may be subject to drug testing before, during and/or after competitions at the discretion of the licensing Commission. If drug testing is to occur PRIOR to an event, it is recommended that the sample be taken as close to the competition as possible to rule out performance enhancing use of androgenic steroids.