

Table S1 Results of the survey study of international gender surgeons

Questions	N	%	Median (range)
1. How long have you been practicing since completion of your training?			
<5 years	4	8.89	
5–10 years	11	24.44	
>10 years	30	66.67	
2. In what region of the world do you practice?			
United States	31	68.89	
Canada	2	4.44	
Europe	10	22.22	
Asia	1	2.22	
Central America	0	0.00	
South America	1	2.22	
Africa	0	0.00	
3. Approximately how many transgender patients have you surgically treated with a gender-affirming surgery in your practice (excluding facial feminization or masculinization)?			
Less than 25	7	15.22	
25–50	3	6.52	
50–100	3	6.52	494.02 (12.00–2,000.00)
100–200	11	23.91	
200–500	9	19.57	
500–1,000	5	10.87	
1,000–1,500	2	4.35	
1,500–2,000	3	6.52	
Greater than 2,000	3	6.52	
4. Do you require two independent mental health evaluations prior to genital surgery?			
Yes	34	75.56	
No	7	15.56	
I do not perform genital surgery	4	8.89	
5. Do you require one mental health evaluation prior to chest/breast surgery?			
Yes	28	62.22	
No	6	13.33	
I do not perform chest/breast surgery	11	24.44	
6. Have you ever encountered a patient who regretted their gender transition (including patients operated on elsewhere)? If yes, please specify how many. If your answer is no, please skip to question 15			
I have not encountered a patient who regretted their gender transition	18	42.86	
1	12	28.57	
2	6	14.29	
3	1	2.38	
4	3	7.14	
5	0	0.00	
5–10	1	2.38	
10–20	1	2.38	
>20	0	0.00	
Total	62	100.0	
7. Of those patients who experienced regret, how many were trans-male, trans-female, and non-binary?			
Trans-male	19	30.65	
Trans-female	37	59.68	
Non-binary/other	6	9.68	
Total identified patients	62	100.0	
8. Of those patients who expressed regret, how many have there been in each category of surgery below?			
Chest surgery	13	22.41	
Bottom surgery	45	77.59	
9. In trans-female patients who sought detransition, did they experience any major complications with their initial gender affirming procedures (excluding facial feminization)? If yes, please specify what the complications were. If no, please select N/A			
Vaginal stenosis	7	58.33	
Recto-vaginal fistula	2	16.67	
Other complications			
Pain	2	16.67	
Neuroma	1	8.33	
Total number of complications in trans-females	12	32.43	
10. In trans-male patients who sought detransition, did they experience any major complications with their initial gender affirming procedures (excluding facial masculinization)? If yes, please specify what the complications were. If no, please select N/A			
Flap failure	0	0	
Urethral fistula	2	66.66	
Urethral stricture	1	33.33	
Total number of complications in trans-males	3	15.79	
11. To your knowledge, did patients seeking detransition undergo pre-operative mental health assessment prior to their initial surgery (not including facial feminization or masculinization)? Please specify how many did, how many did not, and how many unknown			
Number of patients who did have pre-operative mental health assessment	56	78.87	
Number of patients who did not have pre-operative mental health assessment	4	5.63	
Number of patients whose pre-operative mental health assessment is unknown	11	15.49	
12. If you have experienced patients with regret, how many have you performed a detransitioning procedure on?			
0	18	50	
1	5	13.89	
2	1	2.78	
3	0	0	
4	0	0	
5	0	0	
6	0	0	
7	1	2.78	
8	0	0	
9	1	2.78	
10	0	0	
Greater than 10	1	2.78	
Total number of patients	36	100.0	
13. If you have performed a detransition procedure, please specify how many of the following you have performed			
Reversal of mastectomy	0	0	
Reversal of breast augmentation	6	26.09	
Reversal of phalloplasty	16	69.56	
Reversal of vaginoplasty	1	43.34	
Total	23	100.0	
14. Of the patients you've met who detransitioned, what were the reasons they cited for their detransition? Please specify how many for each of the reasons below. If a patient had more than reason, please select each reason			
Change in gender identity	22	39.3	
Fear for safety due to societal judgment	1	1.79	
Concern for health	1	1.79	
Problems associated with employment or professional life	1	1.79	
Difficulty in marriage or romantic/sexual relationships	7	12.50	
Rejection or alienation from family, emotional, or social supports	9	16.07	
Spiritual or religious conflict or pressure	5	8.93	
Other (please specify)			
Complications due to surgery	1	1.79	
Change in sexual response	1	1.79	
Misdiagnosis	4	7.14	
Missed their natal genitals	1	1.79	
Desired pregnancy	1	1.79	
Unknown	3	5.36	
Total	56	100.0	
15. What are, or what would be, your requirements for surgical detransition? Please check all that apply			
Mental health evaluation	41	91.11	
A certain amount of time spent in regret	31	68.89	
Consideration of reasons cited for detransition	37	82.22	
Feasibility of obtaining desired outcome	33	73.33	
Other (please specify)	5	11.11	
Three letters of recommendation	1	2.22	
A specialized therapist	1	2.22	
Expectation of outcome	1	2.22	
Total number of respondents for this question	45	100.0	
16. Do you think WPATH SOC 8 should include a chapter on detransitioning?			
Yes	38	88.37	
No	5	11.63	