From: Matthew Breeze
To: medboardconsultation

Subject: Public consultation on Good medical practice
Date: Sunday, 19 August 2018 9:29:38 PM

Dear Sir/Madam,

I am writing to remind you that Doctor's should have the right to share their opinion medically and personally, no matter what the personal or cultural beliefs of the patient are.

We are seeing a battle of cultures. On one hand, centuries of cogent medical research and best practice, with the aim to help and heal. On the other, cultural views that could be merely a few years old as a result of hanging out with the wrong crowd, or some backward cultural expectation.

Should doctors' be forced to conduct permit female circumcision if a Muslim husband brings his wife for the surgery and seeks to control his wife as some kind of property? Should a doctor be compelled to write a prescription for a euthanasia drug if the patient arrives having been brainwashed by their family that they are a burden and that they should be euthanised, so perhaps the family may get the inheritance or simply a more comfortable life?

If a person is coming to visit with gender dysphoria, and they wish to identify as a gender different to their non-birth sex, should their blood biochemistry results be compared against the cohort of their birth sex or their chosen gender? Obviously, it should be their birth sex, so as to be given the best possible medical care - without question. The doctor shouldn't need to be challenged in their decision to record the test or other matters using the patient's birth sex, even if there is a real case of gender dysphoria. It is a case of respecting the person's physical health, when the person may not understand the consequences of how they are feeling. Furthermore, feelings change, desires changes, emotions change (daily) and psychology changes with the right help. The brain is always learning and in the process of thinking about anything, the neurons themselves change - we never have the same thought about a subject twice. A study of surgical transitions by pioneering surgeons in gender reassignment at Johns Hopkins showed after 20 years there was no strong reason to have done the surgery in the first place, the patients were never really satisfied - and these are serious cases of gender dysphoria. If a doctor conscientiously objects to gender transitions because, in their belief, gender dysphoria can be managed well by other means, shouldn't their opinion be respected? What if someone doesn't like their limb and wants to have it surgically removed - should doctors simply comply to whatever mad wishes come their way?

Plenty of alternative health practitioners have strong opinions about their therapy, even if is not scientifically proven. So why shouldn't doctors, using scientifically proven literature, not promote what they believe both medically and as a matter of conscience.

General Practitioners these days in particular are seen now as not only doctors but family mediators, counsellors, psychologists, life coaches, and take many other roles for those who are vulnerable in our society, that same society that is often too busy to notice or care for vulnerability, or jumps on the ideology bandwagon, the convenient mob mentality, rather than taking a deep interest in the person. Why not then should GPs be allowed in their own conscience to make recommendations against the cultural beliefs of those coming to visit?

We are living in an age of emotional immaturity where people are neither taught to hold a respectful debate nor are willing to be challenged as to what they believe. They would rather be spoon fed whatever tickles their fancy at any particular time. Doctors should be able to take a rational stance and lead their patients towards better health physically, emotionally and psychologically, in the best way they believe is right. That is why Doctors are trusted so much: an enemy multiplies kisses but wounds from a friend can be trusted.

I am happy to discuss this with you furthe
--

Yours Sincerely,

Matthew Breeze

