



Commentary to: “Transdisciplinary Management of Patients with Disorders of Sex Development in Colombia. Limiting Factors for an Appropriate Management”

Comentario a: “Manejo transdisciplinario de pacientes con desórdenes del desarrollo sexual en Colombia. Limitantes para un manejo oportuno e integral”

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As the first author of the manuscript¹ commented here, it is my responsibility to open to discussion a critical topic that has gained more awareness and will continue to evolve over time, given the participation of patients in this debate. Since the Chicago Consensus in 2005, the terminology for “disorders of sex development” (DSDs) was established.² Ever since that moment, the academic interest was to universalize the terminology to reduce confusion and to improve the academic utilization of a unified language. It also looked to reduce the stigmatization suffered by individuals with the use of the previous terminology.

Recently, the participation of patients and associations has become of critical importance, and a need discuss this subject has made the current terminology for DSDs undergo scrutiny.³

The Colombian population is unique in a way because there are specific legislations for the intervention of patients with such conditions, and also because our results clearly show significant limiting factors to a proper comprehensive and transdisciplinary management.

It is critical to implement the new terminology, for it results less confusing and stigmatizing to patients and their families. Other centers with great experience in this field have proposed the use of the term: “atypical genital development” (AGD).⁴

Along with the use of this new terminology, I invite all caregivers treating patients with AGD to stress the importance of the transdisciplinary management and of promoting management in referral centers for these patients.

Conflicts of Interests

The authors have no conflict of interests to declare.

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