

Has Medicine Failed the Intersex Community?

DSD and Intersex Care: Past, Present, and Future

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Guiding Questions for Reflection

Use these questions to spark discussion or personal reflection before, during, or after the lecture.

Defining Intersex

- What historical, cultural, or structural factors have shaped the experiences of intersex individuals?
- “Intersex” is an umbrella term encompassing a wide range of variations in sex characteristics, experiences, identities, and health needs. What are the benefits of using an umbrella term? What important differences might it obscure?
- How are respect for bodily autonomy, informed consent, and individual language preferences expressions of medical professionalism?

Caring for Intersex Patients

- What can an individual clinician do to provide respectful, patient-centered care for intersex patients?
- What policies, practices, educational approaches, or research priorities should health care institutions examine?
- Where might routine clinical practices unintentionally limit patient autonomy or reinforce assumptions about sex and gender?

This guide accompanies the 2026 Imbasciani-DiSalvo LGBTQ Health Equity Lecture, “Has Medicine Failed the Intersex Community? DSD and Intersex Care: Past, Present, and Future,” presented as part of the Health C.A.R.E (Cultural Awareness, Research, and Education) Series. We invite you to reflect on the evolution of understandings of disorders of sex development (DSD) and intersex care, and how physicians and medical educators can support and advocate for intersex people and patients.

Recommended Resources

Explore these articles and tools to deepen your understanding:

When Emergency Pediatric Surgery is Anything But

In medical school, I was taught that a consult for what is often called “ambiguous genitalia” was considered an emergency. While it is true that one of the syndromes (Congenital Adrenal Hyperplasia) that falls under the intersex umbrella can be life-threatening if not treated, being intersex in itself is not a medical emergency. What most of my attendings felt, however, was that the parental anxiety surrounding intersex diagnoses was a psychological Defcon One.

[Read more at Scientific American](#)

Clinician Advocacy and Intersex Health

Throughout the history of Western culture, sex has been reflected as a binary rule, with this binary system affecting self-expression, lifestyle choices, and health outcomes of everyone, but especially those with intersex traits. Currently, people who identify as intersex or as having intersex traits are not provided with the appropriate care needed for their wellbeing. Intersex health care has undergone a great deal of change in the last century, led by intersex leaders and advocates. Clinician advocates have also played a vital role. This article will focus on this history of intersex health care evolution, the role of clinician advocacy, and suggestions for how clinicians can become advocates for improving intersex health care.

[Read more at Pediatric Annals \(UVM login required\)](#)

Living an Intersex Life

According to statistics cited by the U.N., .05 to 1.7 percent of the world's population is intersex, defined as having external or internal sexual organs that are not clearly male or female. As a matter of course, doctors in the past performed surgery on babies, ostensibly so that they would live a “normal” life. Correspondent Erin Moriarty talks with Pidgeon Pagonis (who was born looking female on the outside but also with testes and XY chromosomes) about Pagonis’ memoir, “Nobody Needs to Know”; with professor Elizabeth Reis, author of “Bodies in Doubt: An American History of Intersex”; and with urologist Dr. Ilene Wong, who believes the medical community has failed intersex patients.

[Watch on CBS News](#)