



*Presidenza del Consiglio dei Ministri*

**NATIONAL BIOETHICS COMMITTEE**

**MINOR'S SEXUAL DIFFERENTIATION DISORDERS:  
BIOETHICAL ASPECTS**

(25th February 2010)

*abstract*

In this Opinion the National Bioethics Committee deals with the pathologies – that can occur in children in different degrees of gravity and frequency – of “sexual ambiguity” (also called an “intersex” condition), that is, a not harmonious development of the different components of sex (genetic, gonadal, hormonal, phenotypic), where it is difficult for the doctors and parents to immediately assign sex as male or female.

The Opinion, after placing the problem within a historical and clinical framework, highlights the principle elements of international bioethical guidelines, and makes the following recommendations: 1) each medical intervention must have the objective to harmonise elements of disharmony in physical, psychological and social terms; 2) the physician must pay particular attention on a diagnostic level (from the prenatal stage) to each objective sign for the early detection of appropriate therapeutic paths; 3) any intervention on the body must be guided by the principle of the best interests of the child, avoiding unnecessary mutilation (permissible only in emergencies, taking care, as much as possible, not to involve the loss of fertility potential and the conditions for possible satisfactory sexual activity), it is considered preferable to wait until the individual reaches a maturity which allows the expression of consent; 4) the family and the child himself/herself (if able to understand) should be given adequate psychological support and the communication must be careful and gradual, with appropriate counselling; 5) research in this field and long-term studies must be encouraged, the observance of equity ensured in the accessing of the most advanced diagnostic methods and equipment, and appropriate training of health personnel guaranteed; 6) in “difficult” and exceptional cases, where objective indications for the assignment of sex are missing, the parents together with the physician must make a shared choice and educate the child as male or female, paying particular attention to the emergence of spontaneous inclinations (avoiding a “neutral” education which could also have unpredictable psychological and social consequences); 7) in these cases, it is considered appropriate that current Italian legislation governing the declaration of sex at birth should be integrated by an “annotation” based on rigorous and comprehensive medical certification of the pathology which afflicts the newborn, so as to allow subsequently – if the case – rectification of the registry indication by way of a more simplified procedure compared to the law now in force on sex correction which requires surgical medical treatment.