



Choice Health Network  
**Harm  
Reduction**  
Health. Equity. Hope.  
a Positively Living program

## MAIN LOCATION

1925 AILOR AVENUE  
KNOXVILLE, TN 37921  
865.208.7356

## OUTREACH LOCATIONS

CAMPBELL COUNTY, TN  
COCKE COUNTY, TN  
865.208.7356

## WEBSITE

[CHOICEHEALTHNETWORK.ORG](http://CHOICEHEALTHNETWORK.ORG)

## FACEBOOK

[@CHNHARMREDUCTION](https://www.facebook.com/CHNHARMREDUCTION)

## INSTAGRAM

[@CHNHARMREDUCTION](https://www.instagram.com/CHNHARMREDUCTION)

## TWITTER

[@HR\\_CHOICEHEALTH](https://twitter.com/HR_CHOICEHEALTH)

# GAHT/HRT FAQS

## WHAT IS GAHT OR HRT?

Gender-affirming hormone therapy (GAHT) is something many transgender people use as a tool for medical transition. Not all trans people use hormones or have medical procedures. GAHT is a more accurate and inclusive term, but many trans people use hormone replacement therapy (HRT) as shorthand.

Cisgender people may inject hormones to build muscle. Some people inject hormones to compensate for lower naturally occurring levels of estrogen or testosterone.

## HOW OFTEN DO PEOPLE INJECT HORMONES?

This varies from person to person – most people usually inject weekly or twice a month, but some people perform injections on a different schedule. Not everyone who uses hormones injects them – there are also pill, patch, and cream varieties.

If cisgender people are performing testosterone injections to build muscle, they may inject more frequently, often daily.



## HARM REDUCTION STRATEGIES TO MAKE INJECTING HORMONES SAFER:

- ☆ Syringe service programs may be able to provide sterile syringes free of charge.
- ☆ Alternate injection sites: using a different location for injecting can help limit scarring and discomfort. For example, if someone injects in the thigh fat or muscle, alternating left and right thighs can be a good method.
- ☆ Use new needles each time: not reusing or sharing syringes can prevent infections, damage to the skin, scarring, and transmission of HIV and hepatitis C.
- ☆ Wash hands and injection site prior to injecting hormones to prevent infection.
- ☆ Use gauze instead of fingers to stop leaking in order to prevent infection.



☆ SAM ARMBRUSTER COLLECTED AND ORGANIZED THIS INFORMATION. ☆ LESLY-MARIE BUER EDITED AND FORMATTED THE ZINE.

## WHAT ARE LOW-DOSE HORMONES?

Low-dose hormones (sometimes called microdosing), involve taking a smaller dose of hormones than would typically be prescribed. It's often done by people who are non-binary, who are interested in medically transitioning but don't necessarily want to reach typical cisgender hormone levels, or who want to transition more slowly. Hormones have a cumulative effect, and everyone's body reacts differently to GAHT, so what is a low dose for someone may not be for someone else.

1cc syringes may be easier for low-dose hormones than a 3cc syringe, because 1cc syringes make it easier to precisely measure lower volumes of liquid.

### LINKS WITH INFO ABOUT LOW-DOSE HORMONES:

[www.genderconfirmation.com/non-binary/](http://www.genderconfirmation.com/non-binary/)

[www.vice.com/en/article/z3v4nj/beginners-guide-to-microdosing-testosterone-during-transition](http://www.vice.com/en/article/z3v4nj/beginners-guide-to-microdosing-testosterone-during-transition)

## WHAT'S THE DOSE?

Dose varies from person to person because people's bodies are different, so there is not a one-size-fits-all dose, but it's usually between .2 mg and .7 mg per injection.



## DO ALL PEOPLE USING GAHT/HRT HAVE MEDICAL PROVIDERS?

Not all people see medical providers to get hormones. Some people may not like going or have access to medical providers due to negative past experiences, fear of transphobia, cost, or other reasons, and instead get hormones from other sources like friends, family, or the internet.

Because do it yourself (DIY) hormones or "street" hormones are not from a medical provider, it's important to know that expired hormones may be less effective. Using hormones after they have been open for more than 28 days may increase chances of infection. Make sure that a vial of hormones has a preservative if it is being used multiple times. Doing shots on a schedule can help keep hormone levels as consistent as possible.



## WHAT'S THE DIFFERENCE BETWEEN SUBCUTANEOUS AND INTRAMUSCULAR INJECTION?

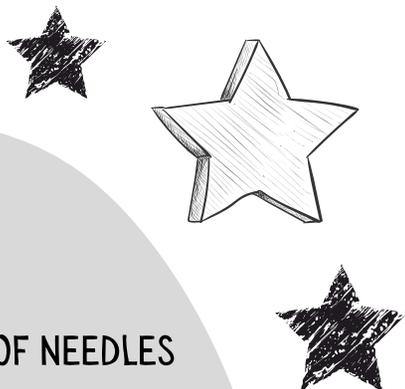
Subcutaneous injection is a shallow injection given in the fatty tissue just beneath the skin. Usually needles for subcutaneous injection are between 5/8" and 1/2" long. These injections are usually done at a 45-degree angle, but if using a 1/2" needle, a person can inject at a 90-degree angle.

Intramuscular injection is a deeper type of injection that is given in the muscle tissue. Usually needles for intramuscular injection are between 1" and 1 1/2", although people with more body fat may use a longer needle. These injections are generally done at a 90-degree angle.

There's research that shows there's no difference in the maintenance of hormone levels between subcutaneous and intramuscular injection, but some prescribers may not prescribe or be comfortable with subcutaneous hormone injections because it's untraditional.

### DO PEOPLE NEED DIFFERENT KINDS OF NEEDLES TO INJECT ESTROGEN AND TESTOSTERONE?

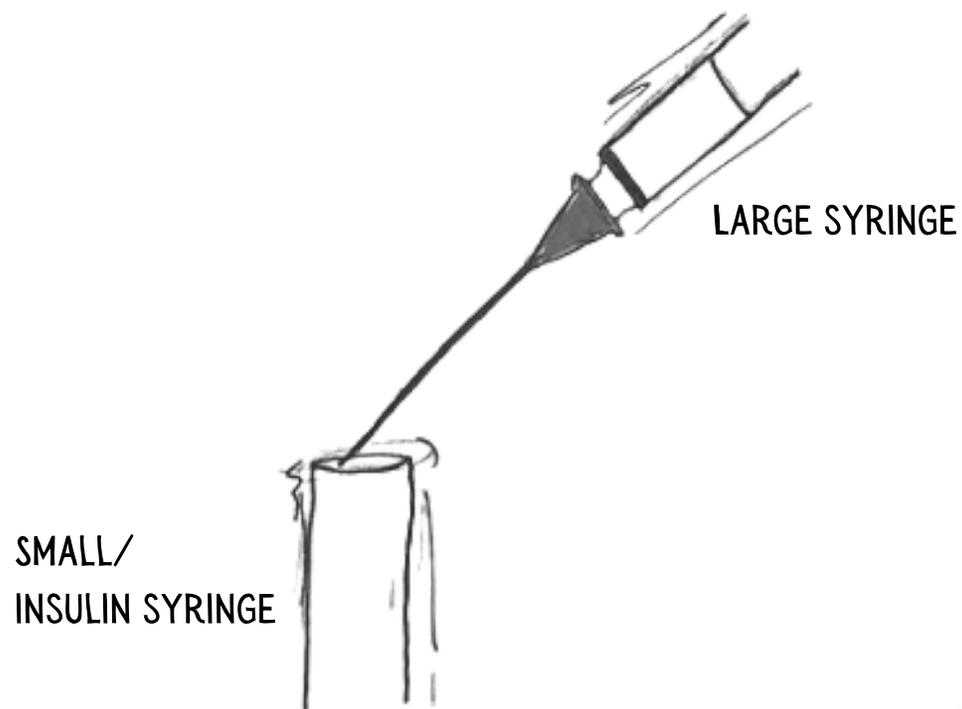
No, the size and gauge of needles is based on the type of injection that a person wants to perform and their comfort with the size of the needle.



## WHAT IS BACKLOADING?

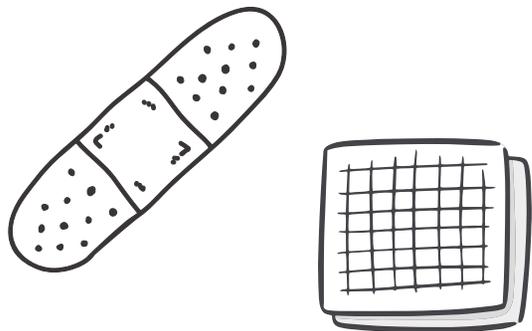
To backload a syringe, two syringes/needles are needed: a 1cc (fixed needle) insulin syringe and a Luer lock syringe with a larger gauge needle (@18g).

Remove the plunger from a 1cc insulin syringe and set it to the side. Follow the steps of drawing the dose of hormones into the larger syringe using the larger gauge needle. Inject the contents of the larger syringe into the back of the insulin syringe. Replace the plunger into the insulin syringe and perform the hormone injection as usual.



## HOW DOES SOMEONE STOP HORMONES FROM LEAKING OUT OF THE INJECTION SITE?

It's normal for a small amount of liquid to leak out of the injection site or a small bead of blood to form after injecting. Apply pressure to the injection site with a gauze pad for 30 seconds to a minute before applying a band-aid.



## WHAT OTHER SUPPLIES ARE NEEDED BESIDES NEEDLES AND SYRINGES?

- ☆ Alcohol swabs (to clean the top of the vial of hormones and the injection site)
- ☆ Gauze pads (to apply pressure to the injection site to limit leakage)
- ☆ Band-aids
- ☆ Sharps containers

## WHERE CAN SOMEONE DO INJECTIONS?

The most common places that people inject hormones are the outer thigh (intramuscular or subcutaneous), stomach (subcutaneous), or butt (intramuscular or subcutaneous). It's also possible to perform hormone injections in the shoulder, but that can be hard to do to oneself. The butt can be a dangerous site for injection, particularly for people who are doing injections themselves, due to the risk of hitting the sciatic nerve.



## WHAT ARE THE MOST POPULAR TYPES OF NEEDLES?

- ☆ Draw needle: 18g 1" (these often come already attached to syringes)
- ☆ Intramuscular (IM) needles: 23g 1 ½"; 23 g 1"; 25g 1"; or 25g 1 ½"
- ☆ Subcutaneous (SubQ) needles: 25g 5/8"

Some people use fixed-needle syringes, like insulin syringes, that are 27g – 30g for subcutaneous injections. For syringes that use interchangeable needles, it's important to make sure the tips are compatible – Luer lock connections create a seal that doesn't leak and won't pop off during injection.

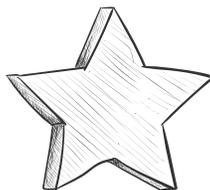
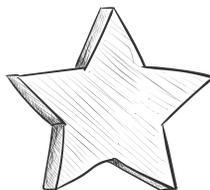
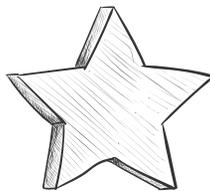
## WHAT'S THE DEAL WITH NEEDLE GAUGE?

The gauge of a needle is how big around or thick the needle is – the higher the number, the thinner the needle. Needles also have length measurements, listed in inches. People use shorter needles for subcutaneous injection.

Some people do injections with smaller gauge needles (25g or smaller) because they're uncomfortable with larger gauge needles (such as 23g). Also, because hormones are suspended in pretty thick oil, using a smaller gauge needle may mean the injection takes longer. If using an insulin syringe, backloading the syringe (see page 8!) may be faster.

## WHAT IS A DRAW NEEDLE?

A draw needle is an interchangeable larger gauge needle (often 18g) that is used to draw up a dose of hormones into a syringe with changeable needles (not an insulin syringe!). The larger gauge needle makes it possible to draw up a dose of hormones more quickly. After drawing up a dose of hormones with a draw needle, the draw needle can be removed from the barrel of the syringe and swapped for the smaller gauge needle that will be used for injection.



## HOW TO DRAW HORMONES FROM THE VIAL:

- ☆ Hold the vial in your hands for a few minutes to warm the contents so the medication doesn't crystalize
- ☆ Wipe the vial top using an alcohol swab and let dry
- ☆ Pull air into the syringe before inserting it into the vial – it will make it easier to draw the correct dose
- ☆ When inserting the draw needle into the vial, insert the needle bevel up and at a slight angle to avoid coring the vial stopper (making a hole in the rubber stopper)
- ☆ Once the needle is inserted, push the air from the syringe into the vial
- ☆ Invert the vial so that the air rises to the top of the vial and the hormones are at the bottom
- ☆ Keep the tip of the needle covered in liquid and pull the plunger out to draw hormones into the syringe
- ☆ When reading the dosage, read from the part of the rubber plunger that is closest to the needle
- ☆ After the dose is correct, remove the needle from the vial at a 90-degree angle
- ☆ Push air bubbles out of the syringe by gently tapping the side of the syringe and pushing in the plunger slightly
- ☆ If using a draw needle, swap it out for the smaller size injection needle