

Position Statement on Orchiectomy or Treatment with Anti-Androgen Medications as a Condition of Release from Incarceration

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“Policy documents are approved by the APA Assembly and Board of Trustees. . . These are . . . position statements that define APA official policy on specific subjects. . .” – *APA Operations Manual*

Issue:

Since 1996, several states have enacted legislation that allows courts to require orchiectomy (i.e., surgical removal of the testicles) or treatment with anti-androgen medications as a condition of release from incarceration for individuals who have been convicted of certain sex offenses. The laws typically apply to those who have been convicted of a sex offense against a child or to repeat sexual offenders. Some states’ laws are limited to treatment with anti-androgen medications such as medroxyprogesterone in order to decrease testosterone levels and sex drive, though others allow individuals to choose orchiectomy in lieu of medication.

Individuals subject to these laws are required to accept orchiectomy or treatment with anti-androgen medications prior to release on probation or parole and to maintain such treatment until the court or Department of Correction determines the treatment is no longer necessary. The state’s Department of Correction or Department of Public Health is typically required to administer the treatment, and the individual may be required to cover the cost. Refusal or failure to undergo such treatment is punishable by revocation of probation/parole, fines, and/or felony charges.

Although these laws are intended to protect the public from sexual violence, they can be problematic if they do not adequately consider the medical indications and contraindications to surgery or treatment with anti-androgen medications. For example, some of the laws contain no provision for assessment by a psychiatrist or other physician when determining whether anti-androgen treatment is appropriate, instead assigning the responsibility for informing individuals about the risks and benefits of treatment to the court. In addition, some laws mandate anti-androgen treatment for a specified period of time, up to the entire term of probation or parole, without any provision for follow-up assessment by a psychiatrist or other physician to determine whether the benefits of treatment continue to outweigh the risks.

This court-driven, one-size-fits-all approach to anti-androgen treatment is inconsistent with contemporary medical practice, which requires a thorough assessment and an individualized approach to patient care. It also raises ethical concerns for physicians working in public sector settings such as prisons and state health departments, where they may be asked to violate the principle of nonmaleficence by prescribing medications that are not in the best interest of the patient. Such ethics considerations, in addition to significant human rights concerns, have led other Western countries to

eschew similar castration laws, instead offering only voluntary treatment with anti-androgen medications that is unlinked to decisions about release from custody.

APA Position:

The APA opposes laws that require orchiectomy (i.e., surgical removal of the testicles) or treatment with anti-androgen medications as a condition of release from incarceration. Orchiectomy or treatment with anti-androgen medications is appropriate only in cases where a psychiatrist has diagnosed a paraphilic disorder for which such treatment is indicated and where the patient has provided informed consent.

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