

RULING

UK: Judge gives go-ahead for transgender child trials

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The trial of puberty-blocking drugs, authorised by the UK's National Health Service (NHS), will go ahead despite concerns from parents and detrainers. This was confirmed by the UK High Court on 31 July when it rejected an application for an

injunction by the Bayswater Support Group. The group represents parents of gender-confused children, as well as other applicants, and sought to suspend the trial. King's College London has received £10.7 million in funding for its Pathways project, which includes the controversial trial of puberty-blocking drugs. From 1 August 2026, the project may recruit children aged between 11 and 16 who exhibit 'gender incongruence'. These children and young people will be monitored for two years using brain scans and other tests. Commissioned by the National Health Service in collaboration with the National Institute for Health and Care Research (NIHR), the Pathways project is intended as a **direct response** to the gaps in the scientific literature highlighted by the 2024 Cass report (on which the trial is **based**). In reality, however, it amounts to a trial on human subjects.

In the ruling handed down on Friday 31 July, Judge Chamberlain stated that the decision to approve the 'pragmatic' trial was 'par excellence a matter of judgement' for public health authorities. They may therefore proceed immediately to recruit children and adolescents for the NHS-funded Pathways study, in which up to 226 minors are expected to participate. This follows a two-day hearing prompted by an appeal lodged by the Bayswater Support Group, Keira Bell — who began taking puberty blockers at 16 but later regretted it, 'returning to her birth sex' — and James Esses, a psychotherapist.

In recent days, Esses told the press that he was 'deeply saddened' by the court's decision to deny permission for a full judicial review, which could have halted the trial of puberty-blocking hormones.

This ruling paves the way for vulnerable children and young people to be seriously harmed by being used as guinea pigs in medical trials. Such prolonged drug administration carries a high risk of causing irreversible physical, physiological and emotional harm, including infertility. The ruling upholds the government's and the Labour Party's decisions, demonstrating a disregard for the protection of minors and the fundamental principle of medicine to safeguard against foreseeable harm.

Keira Bell, a British woman who underwent a double mastectomy after taking puberty blockers for several years, subsequently became one of the leading advocates in the fight to protect children from this type of experimentation. She **described** the ruling as 'a tragedy'. The 'Bell v Tavistock' court case arose because Keira Bell filed a **complaint** in 2019 against the London clinic for its indiscriminate and scandalous experiments on sexually confused children of all ages – experiments to which she herself had been subjected. A spokesperson for the Bayswater Support Group **said** they were 'extremely disappointed' by the outcome. They noted that the Regulation on Medicinal Products for

Human Use (Clinical Trials) and the principles of the Declaration of Helsinki should ensure that children, who cannot give their own consent, are only included in trials offering a realistic prospect of direct benefit, based on sound scientific grounds. These two medical guidelines were not designed to authorise experimental interventions on highly vulnerable children for the sole purpose of determining whether there are any benefits.

According to Stephanie Davies-Arai, the founder of Transgender Trend, the medical trial could undermine public trust in the medical profession because it introduces a new, very low safety standard and sets a worrying precedent for the protection of children in future medical trials. Furthermore, it should be noted that puberty is a healthy and natural process, not a disease to be treated with potentially damaging drugs. However, for the British Labour Party, experimenting on mice or children makes little difference.