

Cosmetic Endocrinology: (Re)constructing femininity in 'tall' girls

*Exploring the risk for depression among women
assessed and/or treated for tall stature as adolescents*

Oestrogen treatment to reduce the adult height of tall girls

- In normal pubertal development oestrogen leads to epiphyseal fusion of long bones
- Synthetic oestrogens used for treatment of tall stature since the 1950s
- 'Psychosocial' indications for treatment in girls with predicted height >177cm (taller in later years)
- DES (stilbestrol) used <1972 then Ethinyl Estradiol (EE)
- Common side effects: weight gain (10kgs), heavy painful menstrual periods, nausea and vomiting.

Tall Girls Study (2000-2003)

- Retrospective cohort study
- To examine the long-term health & psychosocial effects of oestrogen treatment in tall Australian girls
- One of many outcomes of interest: **Mental health**
- Traced participants (n=1243/1432)
- Mixed methods:
 - Focus groups x5 tx & untx women
 - Postal questionnaire (n=846)
 - CATI (n=779)
 - Medical record data abstraction (n=618 available)

Was treatment associated with mental health outcomes?

	Treated (n=370)		Untreated (n=409)		p value	Population
	No.	%	No.	%		%
CIDI						
12-month Depression	29	11.2	42	10.7	0.9	7.4#
Lifetime Depression	113	30.5	120	29.3	0.7	21.3*

- # Blazer et al. 1994 The prevalence and distribution of major depression in a National community sample: The National Comorbidity Study
- *Henderson et al. 2000 Australia's mental health: an overview of the general population survey

Methodology

- Qualitative: focused individual reality, women's experiences & feelings about interactions they have with people & events
- Methods:
 - review of the empirical height literature
 - discourse analysis of medical literature (3 decades)
 - 2 separate interviews with 35 women
 - analysis of data from TG study postal questionnaire
- Participants (25 assessed and/or treated & 10 tall women)
 - Stratified into 3 age groups
- Sampling strategy – facilitates comparisons

Findings

- Women interviewed were categorised into 3 groups
 - Never depressed (n=16)
 - Women who attribute their depression to known associations (n=6)
 - Women who depression is not attributable (n=13)
- Confirmed through CIDI diagnoses (Tall Girls Study)
- Tall women never assessed were more resilient – family supportive and never assessed

Findings

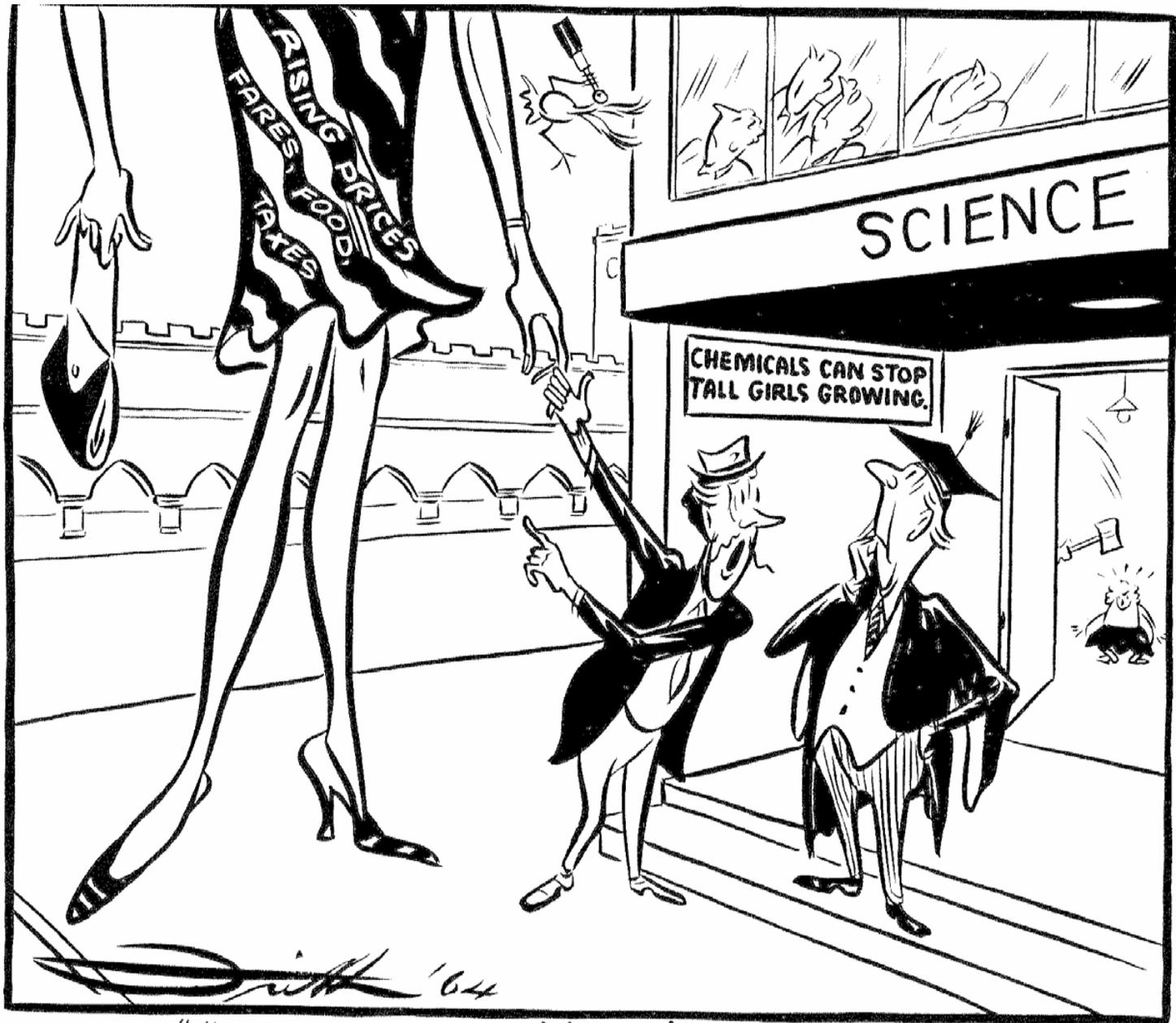
- Tall stature culturally associated with masculinity (height literature)
- The ‘tall’ girl as a concept developed in the medical discourse in response to a technology – pathologising of tall stature (discourse analysis)
- The reactions of significant others (family & friends) to tall stature stigmatised ‘tall’ girls –problematizing their tall girls as ‘unfeminine’ (interviews) - *failed femininity*
- The height assessment (examinations and procedures) exacerbated the stigma -shame and humiliation – medicalising ‘tall’ girls (interviews) - *the medical gaze*

Failed Femininity

I had a very happy childhood but I was tall and then I was abnormal and my mother panicked when I was 14 [years] because I grew two inches in two months and 'Oh my God we're going to have this dreadful giant' (in a voice to describe mother's fears) 'She's not marriageable if she's too tall, for God's sake' (Helen, 49 yrs, 176cm, untreated)

The Medical Gaze

I remember this sort of DARK room and...there was an examination room and I had to strip off and be examined and that was really humiliating. I don't know why...I must have only been five but I had this real sense of shame about being naked and stuff. There was a mirror...because I remember he had to examine...he examined your BREASTS and stuff and weight and height and I can remember being sort of...being felt and it was just...yucky. Just the doctor and there was a mirror so that they [parents] could sit in the other room and watch and I think he told me that Mum and Dad can see and that was worse that they could see. I can remember standing there naked and ended up having my genitals examined and stuff and that was pretty horrific (Vivienne, 29yrs, 177.8cm, untreated).



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BODY PILL CASE HISTORY **GIRL, 13**
WITH FIGURE
35-24-35



By JOHN YEOMANS

Last night I met and talked with two of Australia's growth-controlled girls.

They are happy, pretty teenagers who have been prevented from growing embarrassingly tall by daily doses of the artificial female hormone stilboestrol.

But now these schoolchildren have the bodies of women.

One, 13 years and three weeks old, has the measurements 36, 27, 35; the other, aged 16 years and two months, measures 35, 24, 35.

The girls have fully developed bodies because the hormone dosage caused them to enter puberty much earlier than usual. It also caused them to pass through it to full physiological womanhood much faster than is normal.

This was intentional and, in fact, the method used to check their too-rapid upward growth.

One result of the onset of puberty—natural or artificial—in the human male or female is to bring about bone maturation.

'Consent'

With the drug treatment, a quick brake is put upon the bone growth which makes children too tall.

Thus, the girl of 13 (who seemed likely to grow more than 6ft) is still only 5ft 9 7-8in.

The other girl, who without treatment was expected to reach 5ft 7in, is still only 5ft 3in.

Both girls live with their parents in Melbourne and get their hormone treatment from a famous Melbourne paediatric specialist who has pioneered this form of growth control in Australia.

His work made world medical news this week after his recent successes had been revealed in a report issued in Canberra by the National Health and Medical Research Council.

Mothers' problem

Since 1959, this doctor, with the full knowledge and consent of the girls and their parents, has treated about 25 too-tall girls with stilboestrol.

A relationship existed between high dosage of the drug and some forms of cancer in women, a scientist said in Canberra today.

Dr M. Silver, research fellow at the John Curtin School of Medical Research, said the relationship had been detected in tests on experimental animals.

Banned

"But there is no evidence on use of the drug, under strict medical safeguards, and the incidence of cancer in women," he added.

A Canberra gynaecologist today expressed the opinion that stilboestrol was not "a cancer-causing agent."

But he warned that stilboestrol would stimulate a dormant cancer.

The drug has been widely used by Australian poultry farmers to caponise and promote quick growth in chickens.

Its use has now been banned in N.S.W. because of the feminising side-effects retained in the flesh of the poultry and the possible cancer-stimulation from excessive dosage.

The youngest girl treated by the Melbourne specialist was 10 years old.

TEENAGE PATIENT

Melbourne's growth-retarded girl, "Miss X." Age 13, measurements 36, 27, 35, height 5ft 9 7-8in. Anticipated height 6ft.

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