

NB maxxng

The sexes are not equal, each has its virtues and flaws. The main virtue of the male sex is its sheer reasoning power. In the past, the strength of the male was an advantage. 1000 years ago, if a rock was to be lifted, all the energy required for lifting it had to come from beasts or from what amounted to the same; men. Now we have machines stronger than the strongest man or team thereof that can be assembled. In the few activities where human strength is an advantage, this signals the need for more technological development, for it is precisely those activities the ones that should be performed by machines, so that humans are freed for more worthy endeavors. The female body is beautiful with its fine facial features, graceful curves, soft and pale skin, and dainty hands, arms, legs and feet. The male body is ugly and insensitive; indeed, it had to be given the tasks that were required from it before automation. The female body can afford to be delicate and sensitive. It is freed from the duty of physical work, and thus it can afford to be beautiful.

*Women's bodies are made to be **admired and pleased**. Men's bodies are made for physical work.*

Machines can be made strong easily, but they are only useful if they can apply force under the right conditions. To design and program them, an intelligent being capable of solving abstract problems is required. Machines are also capable of an immense power of computation when expressed in simple arithmetic and control flow directives. This can be put to applications to perform complex tasks by decomposing them into an unimaginable number of such simple operations (like rendering an HTML document that talks about the philosophy of transsexualism, or prove theorems) but doing so is hard, and requires both creativity and some ability to think rigorously. The contemporary male thus finds herself with a mind perfect for her time, but with a body that is well into its obsolescence and falling into irrelevance. Worse, she find herself charged by the price of a body evolved for tasks that are no longer relevant and she will not perform including among others, the burden of a thick skin that can endure abuse but can not enjoy the orgasmic pleasure of even something as simple as caresses.

But the male is also an inventive and curious creature. Her kind has found an almost magical substance capable to free herself from the slavery of a body designed for work: It is female hormones.

*Behold! I teach you the way of the **superhuman**.*

Transsexualism is a form of self-improvement. We are biologically male, or at least, we begin that way. Our love women and femininity is beyond simple sexual attraction. We modify our bodies using modern pharmacology (and sometimes surgery) to adopt the desirable traits of women, in specific, secondary sexual characteristics, while preserving those traits of men that are worth preserving. The sheer intelligence of men, the tact of a woman; the tall and slender body of a man, the graceful features of a woman; the courage of a man, the peacefulness of a woman; the stoicism of a man, the empathy of a woman. Obsolete no more, by means of transsexual transitioning, the now estrogenized male has upgraded herself to the best of both sexes and thus overcomes the weaknesses of both male and female.

Estrogenized male vs trans female

Often when people transition from male to female their goal is to become as feminine as possible and this may include surgery to replace a functional penis with something that looks like a vagina but isn't actually capable of giving birth. The ability to produce sperm is lost but no ability to produce eggs is gained. The brain itself will be feminized over time shrunken to female proportions [0](https://genderanalysis.net/2018/03/your-mileage-may-vary-trans-women-and-erectile-function/)

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HRT will negatively affect athletic performance making it harder for you to build or even maintain your male strength [1](#) the longer you stay on HRT the weaker you become [2](#)

Trying to be just like a cis female is a futile exercise, even if you transition early you will still never be able to get pregnant and give birth, breastfeeding is possible but difficult [3](#) if your bones are already masculine there will not be any easy way to 'fix' that if it can be fixed at all.

But there is another way, rather than trying to be like a cis dyadic female why look at what's actually best for you given your biology and personal circumstances. What if you do not have to give up your fertility and male brain?

The feminizing effect of HRT on appearance will have diminishing returns over time, therefore you need to ask yourself if continuing it is worth the price, what are you actually gaining from that?

Preserving fertility

By banking sperm you may be able to have children even if you never get your natural fertility back but this is not really that great of a solution since then you end up having to depend on that particular sperm back, it will not be a particularly practical way to have biological children. Your sperm would be trapped in a single location and depend on the constant maintenance of the sperm bank.

By only using HRT for a limited period of time you will hopefully be able to retain your natural fertility allowing you to have biological children from sex. There are drugs such as clomiphene citrate that may be helpful in restoring fertility [4](#) but that may not even be needed.

Other reasons to stop HRT

By returning to your natural male hormones you will be able to restore your male abilities such as having a fully functioning male penis (rather than girl-dick) you will be able to become physically strong again, your brain will start becoming masculine again.

Your breasts and other feminine traits will be retained and thus you will to a large extent get the best of both worlds.

Gatekeeping vs DIY

Imagine you want a particular wall in your house painted green. You hire a painter. He tells you that first you have to pass a test that the current color of your wall causes you distress. Then, you can only have a green draper put over the wall for 1 year as a “real life experience” and only then, grudgingly, he finally paints your wall green, but it is the shade of green he wants, not the one you asked for, even though you’re the one paying and supposedly it is a service for you. If you dare object and say that you can paint your own wall, the painter will get indignant and admonish you for contemplating doing such a thing. “I am a painter, I know what I do and I know what is the best color for this wall; panting your own walls is dangerous. You should only have your walls painted by a painter.”.

Isn't the above history absurd? Most health care workers are exactly like this hypothetical painter.

Every other professional knows that if you hire him, it is to do a job that you have determined you want done, and not to question your motives. Only health care workers wrongly feel entitled to override your decisions and to treat you like their subordinate. Thus, it is generally better to do it yourself (DIY) i.e.: self-medicate and oversee one's own physical transition. All the required information to physically transition is available in the Internet, mostly in web sites dedicated to sharing academic information.

<https://vintologi.com/threads/best-from-ksenia.609/>

In any country with sane legislation (which is very few), HRT medication is over the counter. Where that is not the case, HRT can be bought without prescription in many online pharmacies

<https://vintologi.com/threads/male-to-female.5/post-1808>

It is often falsely claimed that taking hormones on your own would somehow be more dangerous than going on an official prescription. The reality is the exact opposite of that, by doing it yourself you can pick the safest options available to you instead of just blindly taking what your doctors prescribe you which may include problematic anti-androgen that are not actually needed if you are on a moderate to high dose injections of estradiol.

HRT when done right is safer than taking birth control as cis female [5](#) [6](#) [7](#)

Avoiding the mental health industry

The mental health industry has a long history of horrific practices including lobotomy (which gave the inventor a nobel prize in medicine). There is however lack of evidence in favor of their treatments, they do not need evidence since they can just resort to state-violence to force people into complying with their dangerous quack treatments.

<https://vintologi.com/threads/psychiatry.737/>

What psychiatrists do is to inflict as much brain-damage to you as they can get away with, then inflicting damage is beneficial for them since then they will be more likely to treat you again and thus earn more money, it's not in their best-interest to actually help you. They just switch to a new harmful treatment once they can no longer get away with the old quackery they used to do.

<https://vintologi.com/threads/psychiatry-horror-stories.267/>

Do not let quack doctors or therapists decide when and how you are going to transition, you yourself are the only one you can really rely on to figure out whether or not transition would actually be beneficial for you since you are the individual who will face the real consequences from it. Other people will instead act based on what's good for them or the ideology they happen to subscribe to.

Why you cannot trust doctors in general

Regulators are there to please politicians and lobbyists, it's not actually in their own best interest to follow enforce actual evidence based medicine. Politicians are mostly interested in pleasing their voters and donors and can absolutely not be trusted with any medical decision whatsoever.

If someone is democratically elected or appointed by people that are then clearly they cannot be trusted any more than you can trust your neighbor with medical advice.

Most medical treatments are not based on good evidence <https://pubmed.ncbi.nlm.nih.gov/27032875/>

In most countries you are not the one paying for the treatment so you are not even the customer, therefore there isn't any real incentive for the doctor to actually do what's best for you, instead doctors will be incentivized to please regulators and politicians. Even if you pay for it then pleasing regulators will still be more important since they have far more power than you have with your money.

Questionable transgender surgeries

A general phenomenon in the trans community is people tell each other that bad surgery results isn't bad, while this may offer some short-term emotional comfort it has the issue of letting doctors get away with poor results rather than actually doing a good job.

To a large degree the issue is simply bad clinics/surgeons butchering people. Most SRS results you can find when looking them up online are very bad and the few good you can find may simply be people having been lucky with the results meaning you yourself may not get nearly as good as a result.

Jazz Jennings has already underwent 3 genital surgeries in an attempt to get something somewhat like a real vagina but most people cannot afford to have multiple surgeries like that.

SRS is not just bad due to poor executions, there is also the general issue of permanently losing your natural fertility and the fact that the neo-vagina will be created between the prostate and anus making it far more difficult if not impossible to get a prostate-orgasm from anal sex.

There isn't any real medical need for orchiectomy since high dose injections alone will suppress testosterone more than enough.

About breast enlargement

If you look at natural vs enhanced breasts you will see a very clear difference, you can tell it's fake when it's fake (few exceptions) and it doesn't look right

<http://www.boobpedia.com/boobs/Category:Categories>

The advantage of breast enlargement however is the fact that it will not require you to take any hormones, this is a general advantage with surgical transition over hormonal transition.

Why it's important to have biological children

Some people claim that you can just adopt rather than preserving your fertility, that is terrible advice.

Adopting children comes with a lot of red tape and costs, that for children that will not be biologically yours and they will not actually be anything close to real biological children.

Political views are to a very large extent genetic [8](#) therefore ideologies that do not value real reproduction will not really be viable long term since the followers of that ideology fail to reproduce in numbers enough to sustain themselves.

For transgenderism to be sustained trans people will have to actually have biological children, otherwise they will just serve as genetic dead ends mostly attracting failed 'males' that transition in an attempt to escape their miserable male existence, misery that is only part due to body dysphoria if they have any.

Respectability politics doesn't work

Some people think that political rights can be secured by trying to be respectable and assimilate into a society that is hostile towards you. This of course doesn't actually work, instead people will find other reasons to reject you based on standards they do not even apply to cis people such as rejecting you due to you having XY chromosomes or because you are unable to have children, the fact that this is also true for many females who are not transgender doesn't matter since it's just an excuse.

The reality is that even if there were no trans people biological sex still wouldn't be binary, it would be a bimodal distribution.

<https://vintologi.com/threads/about-the-gender-binary.846/>

This is not just about securing rights for trans people, it's also about securing rights for intersex people. It's not just people pursuing medical transition who are oppressed by the fact that society only really accepts 2 genders.

Trying to fit into either gender binary may work for some trans people but we should not delude ourselves into thinking that this would be effective in securing transgender rights.

<https://www.youtube.com/watch?v=GWZARuTnoLw>

Transphobes frequently try to prevent young people from medically transitioning which will make it a lot harder for them to actually fit in socially with the sex they want to be, they often do everything they can to fit in but they still face a lot of rejection by people claiming they are not really female even though they put far more effort into conforming to societal gender norms than cis females.

The hard reality is that the nicer you are (unwilling to fight back) the more willing people will be to target you knowing that there is no consequences for doing so.

Some people by virtue of early transition will be able to pass and integrate socially with cis females but for most people who are now male that simply isn't an option. Furthermore even if you pass facially unless you had SRS (which would permanently destroy your natural fertility) and also had a very good surgery result people will still see you were born male when you are naked, you cannot really hide that from a partner, it's also hard to hide long-term in other situations, especially in public shower rooms if you would use that.

'Female' spaces

A lot of places in our society are gender segregated. In some places you are expected to pee with people of the same gender category as if that would stop it from being gross and a violation of your privacy.

There isn't actually any real reason to have strangers shower with each other in public or seeing each other shit/pee. What we really should work for is real privacy where you are alone when you take a shower. Until then separating people based on whether or not they look more male and females should work ok, another option is separating people based on gender identity which is theory is problematic but has worked surprisingly well in the real world [9](#) [10](#)

Private places can have their own cosmetic standards for gaining access to places where you are naked with other people (such as bathhouses for gay people), they can also do chromosome tests if they are into that or have a detailed list regarding which intersex conditions they accept.

You are special and unique

People telling you "you are not special" are trying to oppress you, there isn't anyone else like you on earth or even our galaxy and many people do things that really stand out to advance humanity.

Instead of trying to fit in with some collective you should value your own individuality and do what is actually good for you and people important to you. Even 'identical' twins are different [11](#)

Dating as non-binary

You will have both advantages and disadvantages compared to trans females who remain on HRT. Having a male (fully functional) penis and being able to make a female partner pregnant is valuable.

Two cis lesbians cannot currently have a biological child together but someone born male might be able to make her pregnant even after feminizing hormone treatment, especially if HRT is later stopped.

But as you stop HRT you will also have to face your body masculinity again which will make it harder for you to date some people. Still you will at least have the option to date males and other trans people.

You always have the option to continue HRT

If you really like what HRT does to you then maybe for you continuing with it might be worth it, maybe you like your orgasms better, maybe you like the mental effects, maybe you do not want to have children and therefore you do not want your fertility to return.

Facial Feminization Surgery

Unfortunately HRT alone is often very ineffective in feminizing the face, especially if it's only temporary. Therefore we need something more powerful and it's here surgery comes into play.

Many surgeons will only make minor alterations to the face but there are doctors who are willing to make a lot more radical intervention to archive facial feminization. Good surgeons in the US are Keojampa, Deschamps-Braly, Mardirossian, Jumaily and Harrison Lee.

Good Korean clinics are EverM, EUdental, JK, and The Face Dental. They all do double jaw and are good with genioplasty

Female to nonbinary

Females who suffer from gender dysphoria have the option to only do a limited medical intervention for the sake of treated their dysphoria while the continue functioning socially just like a female. Banking eggs isn't enough to preserve fertility as a female since you would still need a womb (such as via surrogacy). In addition just breast reduction surgery may make it impossible to breastfeed [12](#)

Intersex to nonbinary

Intersex people are born somewhere between male and female and may like to stay that way over conforming to societal norms that doesn't even align with biological reality.

Who actually benefit from transitioning?

Unfortunately current data regarding who actually improve their lives from medical transition is rather limited and the limited data that exist is mostly focused on individuals pursuing a full transition (male to female) rather than doing for a non-binary presentation. The following study found that MtF transition improved quality of life while FtM transition had no statistically significant QoL benefit.

<https://sci-hub.se/https://doi.org/10.1080/15532739.2014.899174>

MtF prior to transitioning

Body Image scale, 43.25

Quality of Life scale, 62.50

Quality of Sexual Life scale, 56.25

Interpersonal Relation-ship scale, 50.25

MtF after transition

Body Image subscale average score was 68.75 ($p < 0.05$)

Quality of Life score was 72.2 ($p < 0.05$)

Quality of Sexual Life scale score was 62.05 ($p < 0.05$)

The Interpersonal Relationship scale reported an average score of 75 ($p < 0.05$)

FtM comparison

Despite being significantly more dysphoric prior to transitioning they did not improve as much in terms of quality of life. It seems like AFAB individuals were more reluctant to transition (less of them in the study, more dysphoric) but the ones that actually transitioned were very happy with the physical results regarding their bodies.

MtF Body image: +25.5

FtM body image: +41.4

MtF quality of life: +9.7

FtM quality of life: +5.5

FtM prior to transitioning

Body Image scale, 21.85;

Quality of Life scale, 63.25

Quality of Sexual Life scale, 50.25

Interpersonal Relationship scale, 50.02.

FtM after transition

Body Image subscale score was 63.25 ($p < 0.05$)

the average Quality of Life score was 68.75 ($p = ns$)

the average Quality of Sexual Life scale score was 56.25 ($p = ns$)

the Interpersonal Relationship scale average score was 81.25 ($p < 0.05$).

Most MtF individuals in the study probably didn't pass

This explains why their social relationships did not improve as much as FtM individuals, it was difficult for them to pass as the opposite sex.

Age: 32.7 ± 8.8 yr

Height: 172 ± 7.38 cm

Long term outcomes

The following studies indicate that long term outcomes are actually better than the short term ones. People early in their transition seem to have the most issues (worse mental health, more suicide attempts, etc).

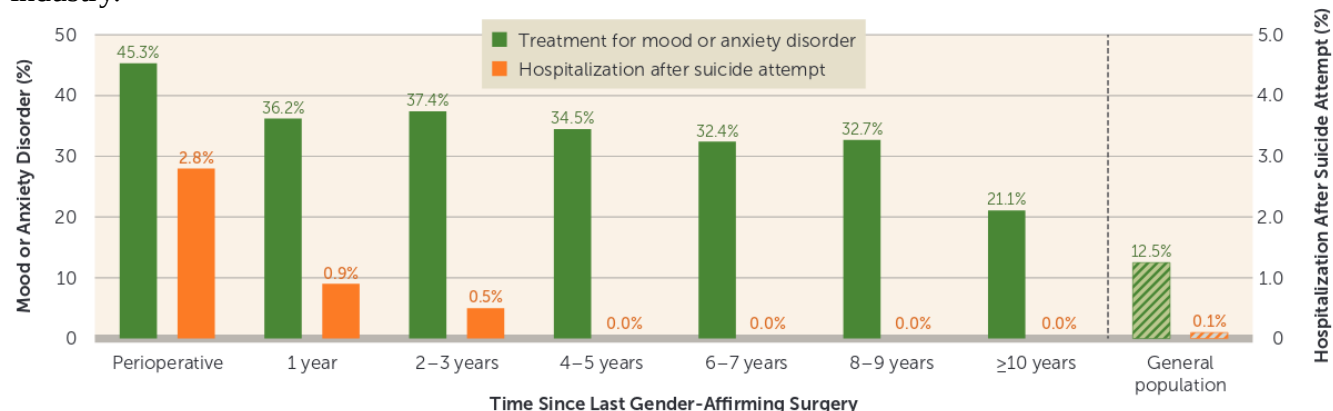
<https://sci-hub.se/https://pubmed.ncbi.nlm.nih.gov/20461468/>

The study above does not actually show SRS to be beneficial since the group who had SRS also had transitioned for longer and 99% were on HRT.

The following study showed no hospitalizations for suicide attempt past year 3 after surgery, it's unclear to which degree the high rate in the perioperative period was due to psychiatric screening.

<https://sci-hub.se/10.1176/appi.ajp.2020.20050599>

The study itself say "hospitalization for suicide attempt" and it's unclear if or how many of these "hospitalizations" (worse than jail) was due to the fact that these people were forced into psychotherapy and psychiatric screening which would expose them to the predatory and unethical mental health industry.



Why some people regret transitioning

The main reason causing regret is lack of social support.

<https://sci-hub.se/https://doi.org/10.1111/j.1600-0447.1998.tb10001.x>

The study above is however outdated (done 1998) and it did not study transsexuals who did not opt for SRS, there is a very large (probably majority) who do not want SRS in the first place.

We found transsexuals to be more at risk for dropping out of treatment when they were MFs, showed more psychopathology, more GID symptoms in childhood, yet less gender dysphoria at application

Table 4. Prediction of regret of sex reassignment: a model created on the basis of logistic regression analysis^a

Poor support from the family	Belonging to the non-core group of transsexuals	Probability of regret (%)
—	—	0.4
—	+	1.7
+	—	4.5
+	+	15.8%

^a+, positive for the putative risk factor; —, negative for the putative risk factor.

So if you were more dysphoric as a child but it's getting better now you might not be the best candidate for medical transition. It so worth nothing that childhood gender identity disorder is largely defined as being gender-nonconformative [13](#) [14](#) it's not surprising that many of these will later realize medical transition isn't for them.

Table 4 Individuals who will subsequently apply for reversal to the original sex

Time period	Number of sex reassigned individuals at the time period when they did their first application that will later apply for reversal to the original sex/total number of individuals who did their first applications at this time period who received a new legal sex (%)	Number of regret applications, during that time period
1960–1971	4/15 (27 %)	0
1972–1980	6/103 (5.8 %)	5
1981–1990	1/76 (1.3 %)	3
1991–2000	3/127 (2.4 %)	3
2001–2010	1/360 (0.3 %)	4
1960–2010	15/681 (2.2 %)	15

<https://sci-hub.se/https://doi.org/10.1017/S0033291704002776>

Only non-homosexuals reported some regrets during treatment, and two during and after SR, which they all related to a lack of acceptance and support from others.

This is a general pattern we are seeing in these studies, social factors are the biggest factor when it comes to regrets and worse outcomes.

Overall, adolescents with poorer peer relations, poorer general family functioning, advanced age, and a female sex assigned at birth showed more behavioral and emotional problems, or lower psychosocial functioning. Thus, the present study confirms the important role the social environment - both peers and family support - play with regard to the mental health outcomes in this group. Consequently, incorporating the family and social environment into Transgender Healthcare seems crucial in order to adequately tend to the needs of adolescents with GD [15](#)

<https://sci-hub.se/10.1007/s10508-014-0300-8>

As we see the regret rate is dropping despite more people transitioning.

The FMs who applied for reversal were younger at application than those who did not (median 22 years compared to 27 years for the whole FM group). Conversely, the MFs who later applied for reversal were older when they applied for sex reassignment than those who did not (median 35 years vs. 32 years for the whole MF group). Since the group is small, these data must, however, be interpreted cautiously.

What many people ignore is that surgeries is more or less a requirement for AFAB individuals, you will not be taken seriously as a male if you do not have a penis or if your penis is very small. There is less need for surgery if you are AMAB and can pass facially without FFS. It is worth nothing that surgeries (especially mastectomy) can leave visible scars which can out people as transgender.

Eleven FMs (28.9%) were satisfied with their breast removal, 5 (13.2%) were dissatisfied due to the visibility of the scars, and 22 (57.9%) were not completely satisfied. Four FMs were satisfied with their metaidoio-plasty or phalloplasty. One FM was dissatisfied because of urinary problems, while four were not completely satisfied.

The dating market is changing

Old studies are misleading since what was true 10 years ago no longer holds

0. A lot of people today begin transition early making it far easier to integrate with the other sex.
1. Now it's significantly harder to date as heterosexual male
2. the transbian dating pools is a lot bigger making it easier to date as gynephilic trans female.
3. Being transgender is now far more accepted socially.
4. Dating as androphilic female is now a lot easier.

Because of these factors we can expect trans-females to have better outcomes when they transition while gynephilic trans-males will have significantly worse outcomes.

About gender identity

For some people their gender (current or desired) is an important part of their identity. This however is far from universal, for most people their gender is not something their focus on, they just go along with natural biology and focus on other things instead, most people are not really cis in a strict sense.

The following study on intersex children showed that gender identity is not completely innate, instead it was partly determined by environment.

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1421518/>

The group raised as female identified as such 40% of the time.

The group raised as male identified as such 100% of the time.

In most cases where one identical twin transition the other twin didn't transition [16](#)

About gender identity politics

Gender identity politics is focused on identity (that there isn't any objective test for) rather than the biological characteristics of your body. Some people like to think "i am a girl trapped in a male body" but this is simply false prior to hormone replacement therapy [17](#) [18](#) (after puberty).

Gender identity politics is often used against trans individuals, it is claimed that males will pretend to be transgender to get access to female spaces, this is of course extremely rare but it's still an effective scare tactic. One potential issue with downplaying the importance of biological characteristics such as [ability to breastfeed](#) is that then it will be more difficult to push for early medical transition, then society can easier get away with not allowing teens to transition "you can just identify as female, you do not need to transition".

The gender abolitionist, gender identity crowd are lesbians and radfems who are attempting to claw back from trans women the title of "most oppressed body." they also reject being women out of internalized misogyny and to distance themselves from trans women. If gender is just an identity, than trans women are just males who identify as women, and everything reverts back to genitalia at birth.

It is a fact that the later you start your transition the more you will end up being different from the average cis female, hip bones fuse at age 25.

Intersex people are also affected by these things, often they are surgically mutilated to fit into either gender category and sometimes it turns out the gender that were assigned to them didn't fit them particularly well. Them then being able to just identify as the sex they want to be will not solve the issue of them having been mutilated.

Detrans people may identify as they sex they were born as even though biologically they are not there and they will never truly be there again, often gender transitions are partly irreversible. While pointing this out may seem cruel it's important to recognize biological reality

Self-ID as a tool for gender egalitarianism

Self-ID can actually be useful for circumventing discrimination based on legal sex.

If your state doesn't recognize same-sex marriage self-ID would allow you to go around that.

If there are gender quotas people disingenuously self-identifying as the other sex can allow the most qualified people to get positions instead of picking someone less qualified based on their sex.

In general self-id can be weaponized to push for gender egalitarianism by making legal sex near meaningless, abolishing discrimination based on legal sex isn't always politically viable.