

B. Abstract

Within the discourse on and care for polycystic ovary syndrome (PCOS) – an endocrine syndrome most commonly characterized by elevated testosterone levels and plurality of ovarian cysts – trans people with this diagnosis remain relatively invisible. However, due to the yet uncertain and controversial nature of PCOS, this absence can perpetuate the health-disparities resulting from medicine’s prevailing pathologizing and objectifying gaze on trans bodies and identities even further.

Through the lens of ontological politics sensitized by a focus on situated knowledge and STS frameworks on care, I conducted six narrative interviews with trans and gender-diverse people based in Germany in order to explore their enactments of PCOS, their needs, wishes, and strategies for the care thereof, as well as their experiences within the medical context, and thereby inquire into the broader implications for PCOS care within standardized medical practices. In so doing, my intention was to shed light on the tensions and discrepancies arising from medical practices that are fundamentally based on binary, normative and rigid standards, while giving my trans participants a voice in the discourse on affective and inclusive trans PCOS care.

As resonates within their stories, when seeking medical care, participants are confronted by a singularizing enactment of PCOS, which imposes a set of pathologizing and gendered norms upon their PCOS bodies, while neglecting, ignoring and de-problematizing their individual needs and concerns. Conversely, participants’ enactments of PCOS are multiple, situated, non-linear and embodied, unfold along different temporal trajectories and are embedded within diverse constellations of human and non-human actors. Along these multiple lines, participants embody a range of practices that twist, subvert and reinterpret medical and socio-cultural master narratives on their bodies and identities, ultimately queering PCOS.

Discussing the findings along the broader material infrastructures of care, I argue that tending to trans peoples’ embodied knowledge and their queered PCOS enactments bears potential of shifting the focus beyond the ambiguous singulars as produced through standardized medical practices, and, instead create tentative, flexible, and affective multiples that are tangible for the individual and thus offer a more inclusive PCOS care.