Introduction
Facial feminization surgery (FFS) is commonly sought by transfeminine patients experiencing gender dysphoria 1.
As demand for gender affirming surgeries (GAS) increases, internet videos are frequently viewed by patients to manage their expectations, as well as trainees to supplement their learning 2, 3.
The information in these videos is outdated or biased.

Objectives
To quantitatively evaluate the quality and reliability of FFS YouTube videos regarding gender dysphoria.
To identify which video content variables are associated with educational quality scores.

Methods
APify.com and SocialBlade.com were used to collect data on FFS YouTube videos and channels.
Quality of educational content was scored using a modified DISCERN instrument with a final scores ranging from 15 to 75.
DISCERN scores were averaged between 2 reviewers.
Descriptive and inferential statistics were performed.

Results
A total of 40 videos were included in this analysis (Figure 1).

- There was a combined total of 10,406,335 views across all 40 videos.
- Most of the videos (65%) originated from the United States (Figure 2).
- The mean DISCERN rating was 38.2 (SD = 8.14) out of 75.

Table 1. Mean DISCERN Scores by Video Content Variables

<table>
<thead>
<tr>
<th>Video Content Variables</th>
<th>N (%)</th>
<th>With Mean Score</th>
<th>Without Mean Score</th>
<th>P</th>
</tr>
</thead>
<tbody>
<tr>
<td>Surgeon Presenter</td>
<td>20 (50)</td>
<td>41.55</td>
<td>34.85</td>
<td>&lt;0.01</td>
</tr>
<tr>
<td>Surgeon Involvement</td>
<td>30 (75)</td>
<td>40.02</td>
<td>32.75</td>
<td>&lt;0.01</td>
</tr>
<tr>
<td>Patient Presenter</td>
<td>10 (25)</td>
<td>32.95</td>
<td>39.95</td>
<td>&lt;0.01</td>
</tr>
<tr>
<td>Patient Testimonial</td>
<td>4 (15)</td>
<td>38.58</td>
<td>38.18</td>
<td>0.48</td>
</tr>
<tr>
<td>Other Presenter</td>
<td>10 (25)</td>
<td>36.75</td>
<td>38.68</td>
<td>0.26</td>
</tr>
<tr>
<td>Photos and Diagrams</td>
<td>21 (53)</td>
<td>39.5</td>
<td>36.84</td>
<td>0.16</td>
</tr>
<tr>
<td>Animations</td>
<td>5 (13)</td>
<td>39.5</td>
<td>38.01</td>
<td>0.35</td>
</tr>
<tr>
<td>Surgical Footage</td>
<td>2 (5)</td>
<td>40.25</td>
<td>38.09</td>
<td>0.36</td>
</tr>
<tr>
<td>Narration</td>
<td>35 (88)</td>
<td>39.21</td>
<td>31.1</td>
<td>0.02</td>
</tr>
<tr>
<td>Self-promotion and Marketing</td>
<td>27 (68)</td>
<td>37.63</td>
<td>39.38</td>
<td>0.27</td>
</tr>
<tr>
<td>NAM* accreditation</td>
<td>6 (15)</td>
<td>43.44</td>
<td>38.69</td>
<td>0.02</td>
</tr>
</tbody>
</table>

**NAM** was the mean number of views included the content variable.
All P-values ≤ 0.05 were statistically significant.

Conclusion
FFS YouTube videos are of low to moderate educational quality, according to DISCERN scoring criteria.
Videos featuring surgeons, videos including verbal narration, and videos from channels accredited by the National Medical Association are typically of higher quality.
Common themes in the highest-rated videos included:
1) an introduction in which the presenter stated their credentials
2) the presenter dressed professionally in either an office or clinical setting
3) the presenter shared learning objectives near the beginning of the video;
4) the presenter described the perioperative course, operative risks, and recovery tips
5) the video incorporated visual tools.
The future direction of this study is to review more transfeminine GAS videos and perform a regression analysis to identify the independent video content characteristics that affect educational quality scores.

References
6. Kelly A. Harmon, BS; Natalia Whitney, BS; Loren S. Schechter, MD; Amir H. Dorafshar, MD, FACS, FAAP1
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