



Pre-natal Myth-busters Information Sheet

Klinefelter Syndrome (47 XXY) is a chromosomal variation in which a male is born with an extra copy of the X chromosome.

A prenatal diagnosis is often an overwhelming and scary time for any parent. The need for robust and accurate information is so important to help alleviate preconceived ideas or fears parents may have. Unfortunately, too many parents who have an XXY prenatal diagnosis have been provided with inaccurate advice and information, creating false perceptions and unnecessary anxiety about the future of their unborn son.

Whilst there is no 'cure' for Klinefelter Syndrome, many symptoms can be successfully treated through early intervention, minimising the impact of the condition. It's likely your son will have an independent and fulfilling life.

Here are some common myths that have been busted around XXY:

Myth: XXY is a very rare and uncommon condition.

Busted: XXY is one of the most common chromosomal conditions affecting males. It affects between 1 in 500 and 650 males born each year in Australia.

Myth: XXY boys are intellectually disabled.

Busted: IQ in XXY boys and men is generally in the normal range. Some may be 10 points lower than that of their siblings. Early intervention is key.

Myth: XXY boys will be infertile.

Busted: Whilst infertility is a common symptom of XXY, some XXY males have biological children through assisted reproductive technology such as IVF. The technology improves every year and many general health professionals are not up-to-date with latest research in this specialised area. In addition, XXY men often become fathers through adoption, sperm donation and step-parenting. There are many ways to build a family.

Myth: Due to your son having two or more copies of the X chromosome he is actually not male.

Busted: This is false. XXY males have a Y chromosome, making them physically male, with male characteristics.

Myth: Your friends and family will be able to tell that your son has XXY.

Busted: This is incorrect. XXY is not a syndrome that will define your son. People will only know your son has XXY if you or your son choose to tell them.

Myth: Individuals with XXY will know straight away that they have this syndrome.

Busted: Incorrect. An alarming 70% of males go through life undiagnosed.

Myth: Your son will be autistic due to having XXY.

Busted: There is no solid research that confirms the link between autism and XXY.

Myth: Your son may have complex behavioural issues leading to higher impulse decision making, causing negative contact with the law.

Busted: There is no research indicating that XXY boys have an increased predisposition to complex behaviour issues. Some boys with XXY may display some challenging behaviours; this is also true of XY boys. This myth is an inaccurate generalisation.



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Myth: It is either your fault or your partner's fault that your son has XXY.

Busted: XXY typically occurs randomly where there is an error made when the cells are dividing and one or more copies of the X chromosome are made, this can occur from either the mother or father.

Myth: You should terminate your XXY son as he will lead a poor quality of life.

Busted: Males with XXY can go on to lead a normal and happy life. A prenatal diagnosis and early detection and intervention is good knowledge; if/when symptoms appear, interventions can be implemented and you can have a positive impact on your child's life.

Myth: All boys with XXY will have motor and language delays.

Busted: XXY is a very broad spectrum. Some boys do experience motor and/or language delays; others experience no delays at all. Early intervention can greatly assist with any delays.

Myth: Don't even try to breastfeed your newborn XXY boy as he will be unable to due to low muscle tone.

Busted: Breastfeeding is a personal choice and whether a mother is able to successfully feed her child is due to a number of factors. There is no evidence to suggest that a newborn is unable to attach due to having XXY.

Myth: Boys with XXY will be homosexual or transgender.

Busted: Research shows that XXY males are homosexuality and transgender at around the same rate as in the general population.

Myth: A parent of a XXY will go on to conceive another child with chromosomal variations.

Busted: In most cases a male with XXY will be the only person affected by the condition in that family. It is extremely rare that other siblings will have a chromosomal defect.

Myth: Boys with XXY will grow to be giants.

Busted: Males with XXY may grow to be taller than the average but remain in the 'normal height' spectrum in association with their parent's height. The extra height may be up to three inches above the predicted height based on parental height.

Myth: Boys with XXY will have breasts.

Busted: Gynecomastia (prominent breasts in a male) is one symptom of XXY, but not all XXY males will experience this.

Please celebrate your pregnancy or baby's birth and seek reliable, research based information. For further information and support, please contact us on:

- **Email:** contact@axys.org.au - we'll get back to you very quickly, normally same day
- **Telephone hotline 0412 038 142:** we are volunteers and answer when we can or will call you back as soon as we can, normally same day
- **Facebook:** View the public Facebook portal (message us on contact@axys.org.au for entry into the Secret group)
- www.axys.org.au **Australian X&Y Spectrum Support**