Guidelines for Preventative Health Care in LGBT Populations

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Objectives

- Understand CDC screening guidelines for this population
- Analyze the importance of screening for anal cancer and possibly anal dysplasia
- Learn specific risks related to WSW sexual health
- Summarize screening guidelines for trans* identified people
- Recognize health disparities to target screening and health promotion counseling
Taking a comprehensive history

- Use inclusive, gender-neutral language
- Avoid assumptions
- Avoid using identity or labeling terms
- Be welcoming and affirming
- Show respect and empathy
Taking a sexual history

- **Behavior**
  - “Have you been involved with anyone during the past year including oral, vaginal, anal sex or other kinds of sexual practices?”
  - “Have you ever been sexually involved with men, women, or both?”
  - “How many sexual partners have you had in the past year?”

- **Identity**
  - “Do you have any concerns about your sexual identity?”

- **Desire**
  - “Do you desire to be involved sexually with men, women, or both?”
MSM CDC Screening Recommendations

- Annually
  - HIV
  - Syphilis
  - Gonorrhea
    - Urethral (urine), rectal, pharyngeal
  - Chlamydia
    - Urethral (urine), rectal

- Increase screening intervals to 3-6 months if:
  - Multiple partners
  - Anonymous partners
  - Illicit drug use (methamphetamines, poppers, etc)

MSM CDC Screening Recommendations

- Hepatitis A
- Hepatitis B
- Hepatitis C
  - If history of drug use
- Anal Dysplasia
HIV Negative MSM and Anal Cancer

- Rates of anal HPV is 60% (compared to 36% in heterosexual men)
- 20x more likely than heterosexual men to be diagnosed with anal cancer
- Rates of anal cancer similar to that of cervical cancer in women prior to pap smears (37/100,000)
- Increasing age does not decrease rates of anal HPV

HIV Positive MSM and Anal Cancer

- Rates of anal HPV is 90%
- 40x more likely than heterosexual men to be diagnosed with anal cancer
- Rates of anal cancer higher than the highest incidence of cervical cancer anywhere around the world (75-137/100,000)
- Anti-retroviral therapy does not seem to decrease rates of anal cancer
“Guidelines” for Screening for Anal Dysplasia/Cancer in MSM

- No national or international guidelines
- Screen for dysplasia with Anal pap test
- Screen for cancer with DRE
- HIV negative with risk factors:
  - MSM > age of 40
  - Perianal condyloma
  - Every 2-3 years
- HIV positive
  - Annually

Anal Pap Preparation and Materials

- Cytology obtained prior to using lubrication
- No receptive anal intercourse or enema treatment within 24 hours of sampling
- Dacron (synthetic) Swab
- Thin Prep pap smear medium
- Patient side-lying

Abnormal Anal Pap

- Results analogous to cervical pap smear
  - If ASCUS or LSIL or more
    - Refer for High Resolution Anoscopy with biopsy
    - Not available at UIHC
  - Refer to UIHC Colorectal Surgery for surveillance with anoscopy and early treatment (resection) of cancer

- Treatment of AIN 2/3
  - Not proven to prevent anal cancer = Lack of studies
    - Infra-red coagulation
    - 85% trichloracetic acid
    - Topical 1% cidofovir for peri-anal disease

MSM Vaccination Recommendations

- HPV (ages 9-26)
  - 78% reduction in any grade anal intraepithelial neoplasia
  - CDC recommendations for males 11-21
    - MSM specific recommendation through age 26

- Hepatitis A
  - Can perform serology first

- Hepatitis B
  - Can perform serology first
WSW Risk Assessment

- Do not presume low or no risk based on sexual orientation or current behavior
  - Up to 70% of WSW have had sex with men
  - Increased rates of anal sex with male partners as compared to “straight women”
WSW and STIs

- High prevalence of BV among monogamous WSW
- Cervical dysplasia
- Genital condyloma
- HSV-1, HSV-2
- Gonorrhea, Chlamydia
- Syphilis
Screening for Cancer in Lesbians

- Increased rates of breast and ovarian cancer
  - Increased rates of obesity, alcohol, smoking, decreased parity and breastfeeding, less likely to have used OCPs
  - Decreased utilization of cancer preventive services

- Identical guidelines as for heterosexual women
  - Breast: mammograms every 1-2 years starting at age 40-50
  - Ovarian: screening not recommended
  - Cervical: pap tests every 3 years starting at age 21, every five years at age 30
  - HPV vaccination ages 9-26

HealthyPeople.gov. Lesbian, gay, bisexual, and transgender health. www.healthypeople.gov/2020
Transgender Women

- **Breast Cancer screening with mammography**
  - Over the age of 50 with additional risk factors:
    - Estrogen/progestin use >5 years
    - Positive family history
    - BMI > 35

- **Prostate cancer screening**
  - PSA test is usually falsely low with androgen blockade
    - May multiply PSA x 1.5-2 and interpret with caution
    - Consider in high risk patients
  - Perform a DRE to evaluate the prostate in all transwomen

- Pap smears in neovaginas are not indicated

Transgender Men

- Breast cancer screening
  - Prior male chest reconstruction
    - Annual chest wall/axillary exam
    - Mammograms not indicated
  - Breast reduction only or no history of top surgery
    - Clinical breast exams and mammograms per usual guidelines

Transgender Men

- Cervical Cancer screening
  - As per guidelines for assigned sex at birth females
  - Inform pathologist of current or prior testosterone use

- Endometrial Cancer evaluation
  - Spontaneous vaginal bleeding with identifiable cause evaluated as for post-menopausal bleeding
  - Consider hysterectomy if >40 years
Prevention Pearls

- Health disparities
  - Depression/anxiety/suicide
    - Youth and transgender persons with highest rates
  - HIV/STI
    - MSM and transgender women of color most affected
  - Obesity
    - Lesbian and bisexual females
  - Tobacco, alcohol, substance use
  - Victimization
    - Trans* persons
- Lack of social support/increased isolation
  - Elderly LGBTQ persons

HealthyPeople.gov. Lesbian, gay, bisexual, and transgender health. www.healthypeople.gov/2020
Prevention Pearls

- Lesbian and Bisexual Women
  - Diet, exercise, healthy weight
  - Tobacco and alcohol use
  - Preventive services for cancer screening
  - STI, contraception, pre-conception counseling

- Gay and Bisexual Men
  - STI risk assessment and safer sex counseling
  - Mental health
  - Tobacco, alcohol, substance use
  - Anal cancer or anal dysplasia screening
Prevention Pearls

- Trans* persons
  - Mental health and suicide
  - STI/HIV risk assessment
  - Victimization and IPV

- LGBTQ Youth
  - Bullying
  - Safety of home and school environment
  - Reliable housing

- LGBTQ Elderly
  - Support system
  - Long-term care facilities
  - DPOA/Living Will
Need more information?

- **LGBT Health Care**
  - National LGBT Health Education Center
    - [http://www.lgbthealtheducation.org](http://www.lgbthealtheducation.org)
  - CDC Lesbian, Gay, Bisexual and Transgender Health
    - [http://www.cdc.gov/lgbthealth/](http://www.cdc.gov/lgbthealth/)

- **Transgender Health Care**
  - Center of Excellence for Transgender Health
    - [http://transhealth.ucsf.edu](http://transhealth.ucsf.edu)
  - World Professional Association for Transgender Health
    - [http://www.wpath.org](http://www.wpath.org)
Questions?

UIHC LGBTQ Clinic
- Tuesdays from 5-8 PM at Iowa River Landing
- Culturally competent staff
- Comprehensive Primary Care
- [www.uihealthcare.org/lgbt/](http://www.uihealthcare.org/lgbt/)
- 319-384-7444 (option 1)

- Ages 10 and above including OB care
- Health Maintenance Exams
- Acute visits
- Contraception
- STI testing and treatment
- Hormones