



Cancer Prevention Is a Year-Round LGBTQ Issue

LGBTQ disparities exist in cervical cancer prevention—including the HPV vaccine—and in rates of anal cancer, notably among those with HIV.

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LGBTQ+ Pride Month is coming to a close, but cancer prevention for the LGBTQ+ community is a year-round focus for Stony Brook Cancer Center's Cancer Prevention in Action (CPiA) Program, in Stony Brook, New York. People who identify as lesbian, gay, bisexual, transgender and queer (LGBTQ+) face numerous health disparities in comparison to those who identify as heterosexual and cisgender. LGBTQ+ individuals have a higher risk of certain cancers as well as disparities in access to cancer screenings and preventative care.

LGBTQ+ individuals are more likely to be uninsured, lack access to health care and delay health care, including preventative care and cancer screenings. The LGBTQ+ community also experiences higher rates of discrimination in health care settings compared to patients who are heterosexual and cisgender.

Disparities in cervical cancer prevention exist among lesbian and bisexual women, and transgender individuals with a cervix. These patients are less likely to receive provider recommendations for cervical cancer screening and have higher rates of inadequate and abnormal results when tested. Lesbian and bisexual women are also less likely to receive provider recommendations for the human papillomavirus (HPV) vaccine, which can prevent cervical cancers.

There are also disparities among gay and bisexual men, who have higher rates of anal cancer, especially if they are HIV positive. Gay and bisexual men also have higher rates of skin cancer, as well as higher rates of tanning bed use, which is a known risk factor for skin cancer.

Access to cancer prevention care, such as vaccinations and screening, is vital in reducing cancer disparities in the LGBTQ+ community. The HPV vaccine prevents 90 percent of cancers caused by the human papillomavirus (HPV), including cervical and anal cancers, as well as vaginal, vulvar, penile and oral cancers. This vaccine is recommended for people of all genders and is safe beginning at age nine, and through age 45, for those not vaccinated in childhood.

Increasing awareness of cancer prevention strategies, such as avoiding indoor tanning, practicing

sun safety and staying up to date with cancer screenings and vaccinations, is also essential to help reduce the cancer burden in the LGBTQ+ community.

Stony Brook Cancer Center's Cancer Prevention in Action (CPiA) Program works to build awareness and promote cancer prevention for people of all gender identities, expressions, and sexual orientations. CPiA provides education and resources to community organizations, schools and universities, health care organizations, and others about strategies to help reduce cancer rates and disparities on Long Island. Learn more at www.takeactionagainstdcancer.com.

Addressing cancer disparities among the LGBTQ+ community is one of the many ways Stony Brook Medicine demonstrates commitment to providing high quality, equitable care. Learn more about LGBTQ+ care at Stony Brook Medicine at stonybrookmedicine.edu/LGBTQ and about cancer prevention for the LGBTQ+ community at stonybrookmedicine.edu/LGBTQ/Education/Cancer.

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