GO TOPLESS!
ONCE A YEAR

BREAST/CHEST HEALTH GUIDE

PROMOTING LESBIAN, BISEXUAL, TRANS, QUEER, AND NON-BINARY BREAST/CHEST HEALTH

Equitas Health Institute
Why do LGBTQ+ people have a higher cancer risk?

**Break the cycle**

Commit to regular mammograms and breast/chest self-exams

Find LGBTQ+ friendly providers
Research shows that due to past negative experiences with healthcare providers, LGBTQ+ individuals tend to delay regular health screenings, which results in later stage cancer diagnoses and worse outcomes.

That’s why we’re training mammography staff across Ohio to provide culturally competent services to LBTQ+ patients.

Visit mamm.equitashealth.org for LBTQ+ affirming mammography and primary care providers.
WHY COMMIT TO ROUTINE BREAST/CHEST SCREENINGS?
According to the American Cancer Society:

- The 5-year relative survival rate for diagnosed with stage 0 or stage 1 breast cancer is 100%.
- The 5-year relative survival rate for diagnosed with stage 2 breast cancer is 93%.
- The 5-year relative survival rate for diagnosed with stage 3 breast cancer is 72%.
- The 5-year relative survival rate for diagnosed with stage 4 breast cancer is 22%.

Because early detection makes all the difference.
RISK FACTORS FOR LGBTQ+ PEOPLE
THE THREE MAIN RISK FACTORS FOR BREAST CANCER ARE:

1. Having breast tissue
2. Aging
3. Having a family history of breast cancer

There are no biological differences that put LBTQ+ individuals at risk of breast cancer, but factors like discrimination, stigma, and isolation do impact health outcomes in our community.

Lesbian and bisexual cisgender women do experience breast cancer at higher rates than heterosexual cisgender women. Why? In addition to factors like stress caused by stigma and isolation:

- Lesbians and bisexual women are more likely to put off regular mammograms due to previous negative experiences.
- Before the Affordable Care Act, many lesbians and bisexual women did not have insurance to cover the cost of preventative care. Lesbians and bisexual women are less likely to be pregnant or breastfeed, which reduce the risk of breast cancer.
- Lesbians and bisexual women have higher rates of smoking and obesity, which increase the risk of breast cancer.
Breast Cancer Prevention
Starts with You!

Who:
Lesbian, bisexual, & trans women, trans men, and non-binary folks with breast tissue

When:
Ages 25-40

What:

**KNOW YOUR BODY**
Conduct monthly breast/chest self-exams (see last page of this booklet for instructions). If you notice any changes or anything unusual, call your doctor or nurse practitioner right away.

**ATTEND REGULAR PHYSICALS**
Schedule a well-check appointment with your doctor or nurse practitioner every year. They will check your breasts/chest for changes or concerns.

**ASSESS YOUR RISK**
Talk to your doctor or nurse practitioner about your breast cancer risk. A family history of breast cancer, a BMI greater than 35, and other factors increase your risk. Your doctor or nurse may recommend that you start mammograms before age 40.

**PLEASE NOTE:** The screening guidelines in this guide are for those of normal or average risk for breast cancer.
**Screening Guidelines for Lesbian & Bisexual Cisgender Women (of normal or average risk).**

<table>
<thead>
<tr>
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</tr>
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SCREENING GUIDELINES FOR TRANS MEN AND NON-BINARY PEOPLE
## Screening Guidelines for Trans Men and Non-Binary people with Breast Tissue (of normal or average risk).

Those who have had chest reconstruction top surgery. Beginning at age 40:

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Those who have had breast reduction top surgery. Beginning at age 40:

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Those who have not had top surgery. Beginning at age 40:

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SCREENING GUIDELINES FOR TRANS WOMEN
Screening Guidelines for Trans Women who have had 5 or more years of hormone replacement therapy.

Those who have had 5 or more years of hormone replacement therapy.

Beginning at age 50:

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How to cover the cost of mammograms.

The Affordable Care Act requires insurers to cover the cost of mammograms for any patient who is at least 40 years old and any patient under 40 who has been referred by a primary care doctor or nurse practitioner due to a family history of breast cancer or other risk factors.

VISIT EQUITASHEALTHINSTITUTE.COM/YESMAMM TO LEARN ABOUT

1. Applying for public insurance
2. Applying for private insurance
3. Finding an LGBTQ+ affirming provider
4. Scheduling a mammogram
Standing Up

YOU WILL USE THE PADS OF YOUR FINGERS TO EXAMINE EACH BREAST OR EACH SIDE OF YOUR CHEST FROM YOUR COLLARBONE TO YOUR RIBS.

• Starting in the middle of your armpit, make small circles with your fingertips. Make the circles going up and down the area, moving from top to bottom. Continue this motion all the way across to the middle of your chest.

• Feel for any lumps, thickening, or hardened knots.
In A Mirror

LOOK AT YOUR BREASTS/CHEST WITH YOUR ARMS AT YOUR SIDES. NEXT, RAISE YOUR ARMS HIGH OVERHEAD.

- Look at the size and shape of each nipple and the tissue around it. Check for swelling, lumps, dimpling (looks like an orange peel), scaly skin, or other skin changes.
- Put your hands on your hips and press firmly to flex your chest muscles. Look for any dimpling, puckering, or changes, particularly on one breast or one side of your chest.

Lying Down

WHEN YOU LIE DOWN, YOUR BREAST/CHEST TISSUE SPREADS OUT EVENLY ALONG THE CHEST WALL.

- Place a pillow below your right shoulder and put your right arm behind your head.
- Using your left hand, move the pads of your fingers around your right breast/chest in small circular motions covering the entire breast area and armpit.
- Use light, medium, and firm pressure to feel the different levels of your tissue.
- Squeeze the nipple, check for discharge and lumps.
- Repeat these steps for your left breast/chest.
Equitas Health Institute’s LGBTQ+ breast/chest health awareness campaign is sponsored by the Ohio Department of Health.

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