

Transgender Patient Screening

Breast cancer risk assessment and screening recommendations

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BACKGROUND: When a discrepancy exists between an individual's biologic sex and the deeply felt sense of being male or female, a transgender orientation may result.

OBJECTIVES: The purpose of this article is to summarize breast cancer risk assessment and screening recommendations for transgender individuals.

METHODS: A review of the literature was done to determine if evidence-based screening guidelines exist for transgender individuals and how they can be applied to clinical practice.

FINDINGS: Most of the available research is descriptive of this patient population and identifies barriers in accessing healthcare services rather than how to provide care. The medical community must address transgender individuals' specific healthcare needs in a comprehensive and affirmative manner.

KEYWORDS

transgender; breast cancer screening; risk assessment; navigation

DIGITAL OBJECT IDENTIFIER

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GENDER IDENTITY HAS TRADITIONALLY BEEN DEFINED as an alignment of an individual's biologic sex and the deeply felt sense of being male or female. An aligned orientation known as *cisgender* happens to be the case for the majority of people. However, when incongruence is present in these two aspects of an individual, a transgender orientation may exist. About 700,000 transgender individuals are living in the United States today, representing 0.3% of the general population (Gates, 2011). Gender identification has become an ever-increasing gray area in society, requiring healthcare providers to understand and adapt to these changing societal norms. The purpose of this article is to summarize breast cancer risk assessment and screening recommendations for transgender individuals.

Background

The descriptive terminology for this patient population addresses the spectrum of gender identity. A transman refers to an individual who was identified as female at birth but who identifies and portrays his gender as male (FtM). A transwoman refers to an individual who was identified as male at birth but who identifies and portrays her gender as female (MtF) (Fenway Health, 2010). How these terms are defined here is limited to their use in this discussion and does not reflect the full gamut of terminology used in the community or literature. Clinicians caring for these individuals should be familiar with the ever-changing language for transgender concepts. This creates a patient care environment that is sensitive and welcoming to individuals who may otherwise be reluctant to access healthcare services. Levitt (2015) suggested that transgender affirmative language by a healthcare provider who is knowledgeable about patient needs can help to increase screenings, particularly those that are related to gendered cancers.

Review of the Literature

A limited body of research addresses standards of care for transgender individuals, including breast cancer screening guidelines. According to Austin et al. (2012), few epidemiologic studies are large enough and include appropriate measures of sexual identity to provide data on patterns of breast cancer incidence for this sociodemographic group. Phillips et al. (2014) attributed this to a historical bias in the healthcare system, resulting in a lack of scientific publications looking at this demographic. Much of the available