1. **Breast Cancer**
Lesbians are more likely to have risk factors for breast cancer yet less likely to get screening exams. This combination means that lesbians may not be diagnosed early when the disease is most curable.

2. **Depression/Anxiety**
Lesbians may experience chronic stress from discrimination. This stress is worse for women who need to hide their orientation as well as for lesbians who have lost important emotional support because of their orientation. Living with this stress can cause depression and anxiety.

3. **Heart Health**
Heart disease is the leading cause of death for women. Smoking and obesity are the biggest risk factors for heart disease among lesbians. All lesbians need yearly medical exams for high blood pressure, cholesterol problems, and diabetes. Health care providers can also offer tips on quitting smoking, increasing physical activity, and controlling weight.

4. **Gynecological Cancer**
Lesbians have higher risks for certain types of gynecological (GYN) cancers compared to straight women. Having regular pelvic exams and pap tests can find cancers early and offer the best chance of cure.

5. **Fitness**
Research shows that lesbians are more likely to be overweight or obese compared to heterosexual women. Obesity is associated with higher rates of heart disease, cancers, and premature death. Lesbians need competent and supportive advice about healthy living and healthy eating, as well as healthy exercise.

*Resources Cited: GLMA’s Top 10 Things Lesbians/Gay Men/Trans Should Discuss with their Healthcare Provider*
6. **TOBACCO**
Research also shows that lesbians use tobacco more often than heterosexual women do. It is easy to get addicted to smoking, even if smoking if it’s only done socially. Smoking has been associated with higher rates of cancers, heart disease, and emphysema — three major causes of death among women.

7. **ALCOHOL**
Heavy drinking and binge drinking are more common among lesbians compared to other women. While one drink a day may be good for the heart, more than that can be raise your risk of cancer, liver disease and other health problems.

8. **SUBSTANCE USE**
Lesbians may use drugs more often than heterosexual women. This can be due to stress from homophobia, sexism, and/or discrimination. Lesbians need support to find healthy ways to cope and reduce stress.

9. **INTIMATE PARTNER VIOLENCE**
Contrary to stereotypes, some lesbians experience violence in their intimate relationships. However, health care providers do not ask lesbians about intimate partner violence as often as they ask heterosexual women. Lesbians need to be asked about violence and have access to welcoming counseling and shelters when needed.

10. **SEXUAL HEALTH**
Lesbians can get the same sexually transmitted infections (STDs) as heterosexual women. Lesbians can give each other STDs by skin-to-skin contact, mucus membrane contact, vaginal fluids, and menstrual blood. It is important for sexually active lesbians to be screened for STDs by a health care provider.

*Resources Cited: GLMA’s Top 10 Things Lesbians/Gay Men/Trans Should Discuss with their Healthcare Provider*
6. COME OUT TO YOUR HEALTH CARE PROVIDER
In order to provide you with the best care possible, your clinician should know you are gay. It should prompt him/her to ask specific questions about you and offer appropriate testing. If your provider does not seem comfortable with you as a gay man, find another provider.

7. HIV/AIDS, SAFE SEX
Many men who have sex with men are at an increased risk of HIV infection, but the effectiveness of safe sex in reducing the rate of HIV infection is one of the gay community’s great success stories. If you are HIV positive, you need to be in care with a good HIV provider. Safe sex is proven to reduce the risk of receiving or transmitting HIV. You should also discuss and be aware of what to do in the event that you are exposed to HIV (Post-Exposure-Prophylaxis)—contacting your provider IMMEDIATELY following an exposure to explore your options. If you are in a relationship where one of you is positive, you should discuss options for prevention with your provider as well.

8. TOBACCO
Gay men use tobacco at much higher rates than straight men, reaching nearly 50 percent in several studies. Tobacco-related health problems include lung disease and lung cancer, heart disease, high blood pressure, and a whole host of other serious problems. All gay men should be screened for and offered culturally sensitive prevention and cessation programs for tobacco use.

9. FITNESS (DIET & EXERCISE)
Problems with body image are more common among gay men, and gay men are much more likely to experience an eating disorder such as bulimia or anorexia nervosa. While regular exercise is very good for your health, too much of a good thing can be harmful. The use of substances such as anabolic steroids and certain supplements can be dangerous. Obesity also affects many gay men and can lead to a number of health problems, including diabetes, high blood pressure, and heart disease.

10. SUBSTANCE ABUSE/ALCOHOL
Gay men use substances at a higher rate than the general population, and not just in larger cities. These include a number of substances ranging from amyl nitrate (“poppers”), to marijuana, Ecstasy, and amphetamines. The long-term effects of many of these substances are unknown; however, current wisdom suggests potentially serious consequences as we age. If your drug use is interfering with work, school, or relationships, your healthcare provider can connect you to help.

*Resources Cited: GLMA’a Top 10 Things Lesbians/Gay Men/Trans Should Discuss with their Healthcare Provider
1. DEPRESSION/ANXIETY
Depression and anxiety appear to affect gay men at a higher rate than in the general population. The likelihood of depression or anxiety may be greater, and the problem may be more severe for those men who remain in the closet or who do not have adequate social supports. Adolescents and young adults may be at particularly high risk of suicide because of these concerns. Culturally sensitive mental health services targeted specifically at gay men may be more effective in the prevention, early detection, and treatment of these conditions.

2. STDs
Sexually transmitted diseases (STDs) occur in sexually active gay men at a high rate. These include STD infections for which effective treatment is available (syphilis, gonorrhea, chlamydia, pubic lice, and others), and for which no cure is available (HIV, Hepatitis, Human Papilloma Virus, herpes, etc). There is absolutely no doubt that safe sex reduces the risk of sexually transmitted diseases, and prevention of these infections through safe sex is key. The more partners you have in a year, the more often you should be screened. You can have an STD without symptoms, but are still able to give it to others.

3. PROSTATE, TESTICULAR, AND COLON CANCER
Gay men may be at risk for death by prostate, testicular, or colon cancer. Screening for these cancers occurs at different times across the life cycle, and access to screening services may be harder for gay men because of not getting culturally sensitive care. All gay men should undergo these screenings routinely as recommended for the general population.

4. HEPATITIS IMMUNIZATION & SCREENING
Men who have sex with men are at an increased risk of sexually transmitted infection with the viruses that cause the serious condition of the liver known as hepatitis. These infections can be potentially fatal, and can lead to very serious long-term issues such as liver failure and liver cancer. Immunizations are available to prevent two of the three most serious viruses. Universal immunization for Hepatitis A Virus and Hepatitis B Virus is recommended for all men who have sex with men. Safe sex is effective at reducing the risk of viral hepatitis, and is currently the only means of prevention for the very serious Hepatitis C Virus. If you have Hepatitis C there are new, more effective treatments for that infection.

5. HPV (VIRUS THAT CAN CAUSE WARTS AND LEAD TO ANAL CANCER)
Of all the sexually transmitted infections gay men are at risk for, human papilloma virus (HVP) — which cause anal and genital warts — is often thought to be little more than an unsightly inconvenience. However, these infections may play a role in the increased rates of anal cancers in gay men. Some health professionals now recommend routine screening with anal Pap Smears, similar to the test done for women to detect early cancers. Safe sex should be emphasized. Treatments for HPV do exist, but recurrences of the warts are very common, and the rate at which the infection can be spread between partners is very high.

*Resources Cited: GLMA’a Top 10 Things Lesbians/Gay Men/Trans Should Discuss with their Healthcare Provider
1. ACCESS TO HEALTHCARE
A healthcare provider who knows how to treat transgender people. Sometimes it is difficult to find someone who will agree to treat you. Some providers may feel that there is something wrong with you because you are a transgender person. They are not correct, of course. They may not understand that you have always been this way. Even if you do find someone who will treat you, your insurance may not pay for the treatment. Ask your provider if your costs will be covered by your insurance. If they will not, ask if they will reduce your bill so you can pay.

2. ALCOHOL AND TOBACCO
Transgender persons who drink alcohol may drink too much and risk damage to the liver or other organs. Too much alcohol may also cause a person to treat themselves or other people badly, or to drive unsafely. Alcohol and hormones may be more dangerous when taken together. Many transgender people smoke cigarettes. This increases their risk of heart and lung disease, especially in persons taking hormones. Transgender persons who care about their health should not smoke, and they should drink only small amounts, if at all.

3. HORMONES
Talk with your provider about hormone treatment. If you are starting hormones for the first time, ask about the things you need to watch out for while taking these medicines. If you are a transgender woman, ask about estrogen and blood clots, swelling, high or low blood pressure and high blood sugar. If you are a transgender man, ask about the blood tests you will need to be sure your testosterone dose is safe. Be sure and take only the hormones prescribed by your provider.

4. CARDIOVASCULAR HEALTH
Transgender persons may be at increased risk for heart attack or stroke, not only from hormone use but from cigarette smoking, overweight, high blood pressure and diabetes. Transgender women may fear that their provider may make them stop estrogen if they develop heart trouble, and so they may not report feelings such as chest pain or trouble breathing. Be sure to tell your provider if you do have these feelings.

5. CANCER
It is very rare to develop cancer due to hormone treatment, but your provider will evaluate you for this possibility when he or she sees you for check-ups. Your provider will also check for possible cancer of your sex organs, if they have not been removed. Again this is very rare but it should be checked along with the rest of your physical examination.

*Resources Cited: GLMA’s Top 10 Things Lesbians/Gay Men/Trans Should Discuss with their Healthcare Provider
6. SEXUALLY TRANSMITTED DISEASES AND SAFE SEX

Transgender people, particularly young transgender people, may be engaging in sexual activity. Just like anyone else, transgender people may get a sexually transmitted disease. It is very important to practice safe sex, so you will not become infected with HIV or other sexually transmitted diseases. Ask your provider about safe sex practices.

7. HEALTH HISTORY

It’s important for you to be able to trust your healthcare provider. Tell them about the medicines you have taken and the surgeries you may have had. If your provider knows what has happened with you in the past, he or she will be better able to give you the best treatment today.

8. DEPRESSION

It is very easy for transgender persons to become sad and depressed. If our families or friends don’t want to see us anymore, it is a very depressing time. Even after transition, depression can still be a problem. When someone is depressed, they cannot be happy no matter what they are doing. Depressed persons may make bad choices and may harm themselves. Please talk with your provider or your therapist about your feelings and tell him or her if you feel sad or depressed. Many good treatments are available for depression.

9. INJECTABLE SILICONE

Some transgender women want to look feminine and beautiful without having to wait for the effects of estrogen. They expect injections of silicone to give them “instant curves.” The silicone, sold at “pumping parties” by non-medical persons, may move around in the tissues and cause ugly scars years later. It is usually not medical grade, may be contaminated and is often injected using a shared needle. You can get hepatitis or HIV through shared needles. Silicone is dangerous and should not be used.

10. FITNESS (DIET & EXERCISE)

Many transgender people are overweight and do not exercise. It is hard to make time for exercise if you have to work long hours. A healthy diet and a frequent exercise routine are just as important for transgender persons as for anyone else. If you are planning to have surgery, your surgeon will want to be sure you are in good physical condition to do well during and after surgery. Try to eat a healthy diet and try to exercise for at least 20 minutes three times a week.

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