Colorectal Cancer Screening and LGBTQ* Individuals

Colorectal Cancer (CRC) is the fourth most commonly diagnosed cancer and the second leading cause of cancer deaths in the United States. [1]. Many of these deaths are preventable! Screening is a powerful tool that can be used to detect colorectal cancer early when it’s most curable.

### Screening Guidelines

The United States Preventive Task Force recommends that average-risk adults should be screened for colorectal cancer from ages 50-75. [2] Screening tests include:

- **Stool-based Tests**
  - gFOBT-every year
  - FIT- every year
  - Fit-DNA - every 1 or 3 years

- **Direct Visualization Tests**
  - Colonoscopy-every 10 years
  - CT colonography- every 5 years
  - Flexible sigmoidoscopy- every 5 yrs
  - Flexible sigmoidoscopy (with Fit)- every 10 years with a FIT test every year

### Risk Factors

- Age
- Medical and family history
- Race/Ethnicity
- Being overweight or obese
- Physical inactivity
- Diet
- Smoking cigarettes
- Heavy alcohol use

Research suggests that obesity, cigarette smoking and heavy alcohol consumption may be common among sexual minority individuals when compared to heterosexuals, [3,4]

### Barriers to cancer screening

- Fear of discrimination-30% of LGBTQ* adults do not seek health care because of fear of discrimination [5]
- Distrust of physician/health care setting
- Cost
- Lack of health care knowledge
- Lack of health insurance

### How can you increase screening in LGBTQ* populations?

- Post the hospital’s nondiscrimination policy
- Display posters that are inclusive of LGBTQ* patients
- Designate a gender inclusive or single stall restroom
- Use inclusive language during patient interactions
- Increase access to health insurance-Out2enroll is a resource for LGBTQ* people to help them enroll in health insurance options available under the Affordable Care Act
- Utilize patient navigation systems-navigation systems can increase patients’ knowledge and risk perception [6]

### References