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# Commentary

## Beyond the Rainbow Flag: Topics and Outcomes From the First National LGBTQ+ Cancer Symposium

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### Commentary Overview

- The unique needs of LGBTQ+ patients require us to examine thoughtfully how cancer-related care is and will be delivered to them.
- Cedars-Sinai Cancer formed an LGBTQ+ community advisory board in 2019 to identify priorities for community outreach, research, and policy that might help reduce cancer disparities in this population.
- The first national LGBTQ+ cancer symposium, co-chaired by the authors, was held in Los Angeles in 2022.
- Symposium outcomes included recommendations for outreach at Pride events, closer collaboration between cancer prevention and control researchers and LGBTQ+ advocates, and development of research initiatives focused on community-driven priorities, such as HPV vaccination, tobacco cessation, data expansion to include sexual and gender minorities (SGM), and practice-changing care recommendations.

More than 20 million Americans identify as lesbian, gay, bisexual, transgender, queer, or otherwise non-heterosexual non-cisgender (LGBTQ+), according to the 2021 Human Rights Campaign Foundation report. The members of this community have faced generations of discrimination, trauma, medical mistrust, and provider discomfort that increases their risk of cancer; decreases their access to advances in cancer prevention, screening, and treatment; and also affects their therapeutic outcomes. As we celebrate LGBTQ+ Pride Month, the unique needs of these patients require us to examine thoughtfully how cancer-related care is and will be delivered.

These issues—and how best to address them—are priorities at Cedars-Sinai Cancer, where the LGBTQ+ community comprises six percent of the population we serve. Los Angeles has the second largest—and most racially and ethnically diverse—LGBTQ+ population in the country, making the needs of this community different from those in other cities.

Cedars-Sinai Cancer formed an LGBTQ+ community advisory board in 2019 to identify priorities for community outreach, research, and policy that might help reduce cancer disparities in this population in our catchment area and beyond. As that vision began to crystalize, we also began planning the first LGBTQ+ Cancer Symposium to create dialog with our peers in healthcare and research, policy, and outreach across the country.

As people who identify as LGBTQ+ and who have experience working with this population in patient care, outreach, research, and policy, we were delighted to co-chair the symposium in Los Angeles in 2022. More than 100 researchers, clinicians, community advocates and policymakers from across the nation gathered in person to dialog about issues affecting cancer-related health outcomes for LGBTQ+ persons.

The symposium covered a wide range of topics pertaining to this patient group, including these highlights.

### **Increasing Representation in Registries and Clinical Trials**

One area of special focus was the creation of national standards for the capture of sexual orientation, gender identity, sex, and sexual characteristics data in clinical records and research. Cedars-Sinai Cancer has partnered with the North American Association of Cancer Registries to address this gap. PRIDENet, co-directed by Juno Obedin-Maliver, MD, MPH, carries out its work via [The PRIDE Study](#)—a prospective longitudinal cohort of sexual and/or gender minority people that includes, but is not limited to, LGBTQ+ individuals—and the [All of Us Research Program](#) of the National Institutes of Health. Cedars-Sinai Cancer is a site for the *All of Us* Research Program.

### **Gender-Neutral Language and Screening Guidelines**

Gender-neutral cancer screening guidelines and gender-neutral language in community health education, clinical trials, breast cancer screening, and tailored tobacco cessation were discussed in the context of community engagement. Cedars-Sinai Cancer has implemented such guidelines and language to improve cancer prevention and control disparities in this population in Los Angeles.

### **Breast Cancer**

All people have risk of breast cancer, but comparatively little is known about the effects of hormone-modulating surgery and medications (HRT) on transgender patients' health risks compared to HRT in cisgender women. Screening guidelines are especially lacking for transgender men following mastectomy. To address discrepancies in breast cancer screening and treatment, priorities should include providing a compassionate and comfortable patient-centered treatment environment, training providers about challenges unique to sexual and gender minority (SGM) patients, and funding research for inclusive, evidence-based screening and treatment guidelines.

### **HPV-Related Cancers**

Human papilloma virus (HPV), most commonly transmitted through sexual contact, is the cause of nearly all cervical cancers, most anal cancers, and many head and neck cancers. Vaccination against HPV has been available since 2006, but uptake has been limited, with particularly low uptake in some LGBTQ+ populations.

The varied sexual practices of SGM populations and assumptions about sexual practices for individuals require medical providers to ask about practices that may make them uncomfortable. Despite this social challenge, guideline-creating agencies and medical training organizations must make clear the need for increased HPV vaccination efforts and HPV-related screening practices for all patients. This includes lesbian, bisexual and transgender or gender-nonconforming people with a cervix; HIV-positive individuals and those with exposure to high-risk anal HPV via anal sex; and lesbian and bisexual women at risk of HPV+ oropharynx cancer.

### **Tobacco Control**

Tobacco use is 20 percent higher in the LGBTQ+ community than in the general population, and in the case of transgender communities it's almost 80 percent. Yet there are very few tailored tobacco cessation interventions. Several presentations during the symposium were devoted to tailored interventions for those in the transgender population who may consider hormone use during transition as a motivating factor for becoming tobacco free.

## Survivorship

SGM communities experience disparities at every stage of the cancer continuum, including the transition from active treatment to survivorship. Clinicians and supportive care specialists should be aware of factors that lead to increased psychological distress in SGM survivors, including concerns about disclosing their sexual orientation and gender identity. SGM identities in survivorship must be understood in an intersectional framework alongside other minoritized identities in efforts to address this distress. Providers must be aware of the impact of side effects and toxicities, particularly those related to sexuality or gender identity, in SGM survivors. Diverse caregivers of SGM cancer survivors must be incorporated into care plans and other clinical encounters to ensure delivery of high-quality survivorship care to this population.

## Symposium Outcomes

As a result of the LGBTQ+ Cancer Symposium, Cedars-Sinai Cancer Community Outreach and Engagement (COE) collaborated with other cancer centers across the country to share best practices in outreach and to collaborate across the state to reach LGBTQ+ community members from diverse racial and ethnic communities to address data gaps, disseminate tailored cancer prevention information, and build trust and engagement in research.

Through community participation with LGBTQ+ leaders and advocates, and collaborating closely with cancer prevention and control researchers, the COE subsequently developed evidence-based interventions using a community participatory approach. These included an End HPV campaign developed in collaboration with the Art Center College of Design to increase vaccination rates; and Create Your Guide, a gender-neutral, organ inventory-based cancer-screening education tool developed in collaboration with Boostershot Media to improve discussions between community members and their providers. These interventions are currently being evaluated by researchers.

Investigators at Cedars-Sinai Cancer also collaborated with community members and leaders to develop several research initiatives that are focused on community-driven priorities such as HPV vaccination, tailored tobacco cessation and prevention efforts, and an LGBTQ+ Community Health in Los Angeles Survey administered at Pride events in 2022 in Los Angeles, with over 800 responses.

Two other major conferences recently added LGBTQ+ components. These included a roundtable discussion at the Cancer Community Impact Forum in 2022, and a conference on cancer research scheduled for this October on the east coast. Cedars-Sinai Cancer is also committed to hosting the second annual LGBTQ+ Cancer Symposium in LA in 2024. The work of Cedars-Sinai Cancer in this area has catalyzed movements across the country in cancer, cancer research, outreach, and community-based policy work that will improve cancer prevention, care and patient outcomes in the LGBTQ+ community.

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