**Stay Informed**

**Your Best Defense**

Clinical exams during your routine annual physical are the best way to monitor breast tissue changes whether or not you have had breast surgery of any type.

**What about mammograms?**

While clinical exams are the first line of prevention starting as soon as there is any breast tissue present, starting at age 50, mammograms are also an important part of preventing breast cancer.

**Who should get them?**

- Transgender women over the age of 50 who have undergone HRT for 5 or more years should get a mammogram annually.
- Transgender men who have not had chest reconstructive surgery should get mammograms annually after age 50; those who have had top surgery still need annual breast tissue exams by a health care professional. Those with family risk factors may need to begin mammograms earlier. Discuss when to start mammograms with your health care provider.

**Sources**

- Medical advisory bulletin: Breast cancer in transgender and transsexual persons. Gender Education & Advocacy, Inc.
- Transgender and transsexual individuals: Access to care and cancer disparity fact sheet. American Cancer Society

**Fenway Health**

617.267.0900
888.242.0900
617.859.1256 TTY
1340 Boylston Street
Boston, MA 02215

**Fenway: South End**

617.247.7555
142 Berkeley Street
Boston, MA 02116

**Medical Appointment Line**

617.927.6000

**Transgender Health Program**

Email transteamcoordinator@fenwayhealth.org or call Fenway’s Behavioral Health Department at 617.927.6202.

**HIV Testing**

617.267.0159

**GLBT Helpline**

617.267.9001
888.340.GLBT (4528)

**Peer Listening Line**

617.267.2535
800.399.PEER (7337)

**Violence Recovery Program**

617.927.6250
800.834.3242

**The Fenway Institute**

617.927.6450

**Know Your Risks**

**Breast Cancer Facts for Transgender Women & Men**

The best defense against breast cancer is early detection.
Breast Cancer Risk for Transgender People

The risk of breast cancer in transgender and transsexual individuals is not well known. There have been no studies of breast cancer incidence in transgender and transsexual individuals. This does not mean that trans people are not at risk. The best defense against breast cancer is early detection. The earlier breast cancer is detected, the easier it is to treat.

Risks for MTF Spectrum People

- Transgender and transsexual people may be less likely to undergo regular screening for breast cancer for many reasons:
  - Transgender people may receive lower quality medical care due to stigma, discrimination, or lack of knowledge by medical professionals.
  - Transgender people may not be aware of risks for cancer in body parts that are disliked or altered.

- Hormone replacement therapy (HRT) has been shown to increase cancer risk in non-transgender women. Transgender women who have undergone HRT may be at increased risk for cancer.

- Two percent (2%) of all breast cancer occurs in the breast tissue of non-transgender men. Being born male does not protect a person from breast cancer.

- Development of breast tissue due to hormonal treatment may increase breast cancer risk. Use of progesterone in hormone treatment may increase this risk.

- Transgender women who have taken hormones may be at increased risk for breast cancer.

Risks for FTM Spectrum People

- Excess testosterone in the body can be converted to estrogen. Excess estrogen increases the risk of breast cancer. Transgender men taking testosterone may be at increased risk for breast cancer.

- Some breast tissue will remain after chest reconstruction. Remaining tissue is still susceptible to breast cancer.

- Transgender men may feel disconnected from their breasts, or assume chest reconstruction protects them, and therefore neglect to do breast tissue self exams.

- Transgender men taking testosterone may be at increased risk for breast cancer.