

Gay and bisexual men have an increased risk for cancer.

The most common types of cancer among all men are skin, prostate, lung, and colon – but several factors put gay and bisexual men at higher risk.

- ▼ Many health insurance policies do not cover unmarried partners. This makes it harder for many gay and bisexual men to access quality health care.
- ▼ Some men may not want to tell their health care providers that they are gay or bisexual because they don't want discrimination to affect the quality of health care they receive. (A gay, lesbian, bisexual, and transgender community center may be able to refer you to GLBT-friendly health care providers.)
- ▼ Past negative experiences with providers may cause gay and bisexual men to wait too long before seeking health care. As a result, they may miss out on early detection tests and have cancers diagnosed at a later stage, when the disease is more difficult to treat.
- ▼ Gay men are more likely to smoke, increasing their risk for lung cancer.
- ▼ Smoking accelerates the start of AIDS among people with HIV¹, and HIV accelerates smoking-induced emphysema.²
- ▼ Smoking is common in bars and clubs, where gay and bisexual men may socialize. This increases the risk of lung cancer and other diseases caused by second-hand smoke.



Notes

- 1 Nieman RB, Fleming J, Coker RJ, Harris JR, Mitchell DM. "The Effect of Cigarette Smoking on the Development of AIDS in HIV-1-seropositive Individuals," *AIDS* 7, no. 5 (1993): 705-710.
- 2 Diaz PT, King ER, Wewers MD, Gadek JE, Neal D, Drake J, Clanton TL, "HIV Infection Increases Susceptibility to Smoking-induced Emphysema," *Chest* 117, (May 2000): 285S.
- 3 Stall RD, Greenwood GL, Acree M, Paul J, Coates TJ. "Cigarette Smoking Among Gay and Bisexual Men," *Am J Public Health* 89, no. 12 (1999): 151-60.

Cancer Facts for Gay and Bisexual Men

Share this with someone you care about.



Mission Statement

The American Cancer Society is the nationwide community-based voluntary health organization dedicated to eliminating cancer as a major health problem by preventing cancer, saving lives, and diminishing suffering from cancer, through research, education, advocacy, and service.

1.800.ACS.2345
www.cancer.org

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The best defense against cancer

Early detection – finding a cancer early before it has spread – gives you the best chance to do something about it. Knowing about these cancers and how they can be prevented or found early can save your life.



Lung cancer

Who is at risk?

People who smoke are at the greatest risk of getting lung cancer, and current evidence suggests that gay men are more likely to smoke (41.5%) than men in the general population (28.6%).³ Smoking is responsible for 80% of all lung cancers, as well as a host of other tobacco-related diseases such as heart disease, stroke, and emphysema. Exposure to secondhand smoke also increases lung cancer risk. Other risk factors include exposure to radon and asbestos, particularly for smokers.

The best defense: prevention

Lung cancer is one of the few cancers that can often be prevented, because it is usually caused by smoking. If you are a smoker, ask your doctor or nurse to help you quit. If you don't smoke, don't start. If your friends or loved ones are smokers, you can help them quit. Quitting can be difficult. For help, see your health care provider or call 1-800-ACS-2345. If you don't smoke, reduce the amount of secondhand smoke you breathe by seeking smoke-free places.

Skin cancer

Who is at risk?

People with fair skin, especially those with blonde or red hair, have a greater risk for skin cancer than people with darker coloring, although anyone who spends a lot of time in the sun is at risk. People who have had close family members with a melanoma and those who had severe sunburns before the age of 18 are at higher risk for this type of skin cancer.

The best defense: prevention and early detection

You can prevent most skin cancers by avoiding being out in the midday sun for long periods of time. Wear hats with brims, long-sleeved shirts, and sunglasses. Use sunscreen on all exposed parts of the skin. If you have children, protect them from the sun and don't let them get sunburned. Examine your skin from time to time, and have a skin exam during your regular health checkups.

Prostate cancer

Who is at risk?

Most cases of prostate cancer occur in men older than 50, and more than 70% of these cases are in men 65 or older. African American men are more likely than white men to develop prostate cancer and are more than twice as likely to die from it. Having one or more close relatives with prostate cancer also increases a man's risk of getting this disease, as does eating a diet high in animal fat.

The best defense: early detection

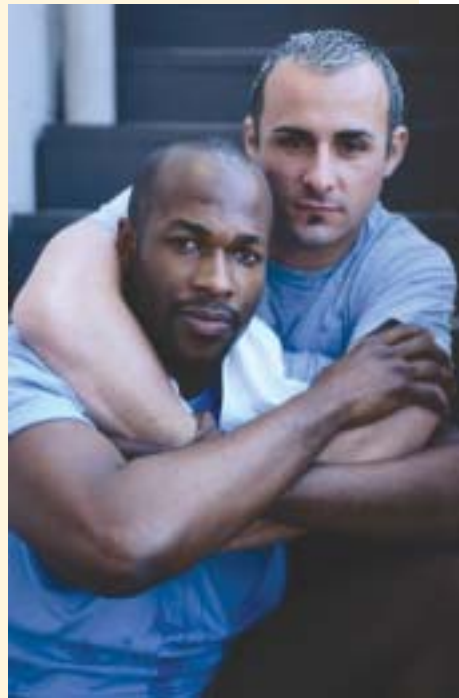
Prostate cancer can usually be found in its early stages by having a prostate-specific antigen (PSA) blood test and a digital rectal exam (DRE). Talk to your health care provider about what's right for you.

Your doctor should offer you the PSA blood test and DRE every year starting when you are 50. Talk about the benefits and limitations of testing with your health care provider so that you can make an informed decision. If you are at high risk for prostate cancer (if you are African American or have a father or brother who had prostate cancer at a young age), you should begin having these tests at age 45.

Colon cancer

Who is at risk?

Most colorectal cancers (commonly known as "colon cancers") are found in people age 50 and older. People with a personal or family history of the disease, or who have polyps in the colon or rectum or inflammatory bowel disease, are at greater risk than the general population. A diet mostly of high-fat foods (especially from animal sources), being overweight, smoking, and being inactive also increase a person's risk for this disease.



The best defense: prevention and early detection

Colon cancer almost always starts with a polyp. Testing can save lives by finding polyps before they become cancerous. If precancerous polyps are removed, colon cancer can be prevented. Eating a low-fat diet with lots of fruits and vegetables may also lower the risk of colon cancer.

The American Cancer Society recommends one of these five testing options for all people beginning at age 50:

- ▼ Yearly fecal occult blood test (FOBT), also known as a stool blood test
- ▼ Flexible sigmoidoscopy every five years
- ▼ Yearly FOBT and flexible sigmoidoscopy every five years (preferred over either of the first two options alone)
- ▼ Double-contrast barium enema every five years
- ▼ Colonoscopy every 10 years

Your health care provider can help you make an informed decision about the best testing method for you. If you are at higher risk for colon cancer, talk with your doctor about a different testing schedule.

Anal cancer

Who is at risk?

Exposure to human papillomavirus (HPV) increases the risk of anal cancer. HPV risk is increased by having anal intercourse and having a higher number of lifetime sexual partners. Smoking is also a risk factor; current smokers have an anal cancer risk that is eight times higher than that of nonsmokers. Other risks include long-term problems in the anal area, such as fistulas (abnormal openings); reduced immunity due to HIV infection or other factors; and age. Most cases occur in people between ages 50 and 80.

The best defense: prevention and early detection

The best way to reduce your risk of anal cancer is to always use condoms during anal intercourse. (While condoms will not always protect a person from HPV, they can from HIV.) Quitting smoking will also lower your risk of anal cancer, as well as many other cancers.

Finding anal cancer early depends on the location and type of the cancer. A digital rectal exam (DRE) will find some cases of anal cancer early, and the American Cancer Society suggests this be performed each year on all men over 50 to look for prostate cancer (because the prostate gland is next to the rectum).

Recently doctors have tested people who are at high risk for sexually transmitted diseases for anal intraepithelial neoplasia. With a test known as an "anal Pap smear," the anal lining is swabbed and cells that come off on the swab are examined under a microscope. Some doctors recommend doing this regularly for people at high risk for anal cancer, particularly HIV-positive men who have sex with men.

Testicular cancer

Who is at risk?

Most testicular cancers occur in men between the ages of 15 and 40, and white men have a higher risk than men of other races. Some evidence has shown that men infected with HIV, especially those with AIDS, are at greater risk. One risk factor for testicular cancer is a condition called cryptorchidism, or undescended testicle(s). A family history of testicular cancer also increases a man's risk.

The best defense: early detection

About 90% of testicular cancer cases start with a lump on a testicle that is often painless but can be uncomfortable. Men may also notice testicular enlargement or swelling, or have a sensation of heaviness or aching in the lower abdomen or scrotum. Any of these signs or symptoms should be brought to a health care provider's attention right away.