

#### Screening guidance for trans patients

Trans patients may not be invited to routine screenings and therefore can miss out on important health checks. Please check and see if you're due a screening and call to book an appointment or to discuss how we can make your appointment most comfortable for you (by bringing a friend or advocate, requesting a clinician of a particular gender etc).

### **Cervical Screening**

If you were assigned female at birth and have not had a hysterectomy or have had a partial hysterectomy, you should have a cervical screening:

- When you turn 25
- Every three years when you are 25 49 years old
- Every five years when you are 49 64 years old

If you were assigned male at birth and have had a vaginoplasty that included the creation of a cervix (this is rare), you should attend cervical screening:

- When you turn 25
- Every three years when you are 25 49 years old
- Every five years when you are 49 64 years old

# **Breast/Chest Screening**

If you were assigned male at birth, some research suggests hormone replacement therapy (HRT) may increase your risk of breast cancer. If you are or have been on hormone therapy you should have a breast screening:

- Every three years when you are 50 70
- At any time if you experience breast pain or discover a lump in your breast

If you were assigned female at birth and have not had top surgery or still have breast tissue following chest reconstruction surgery you should have a chest screening:

- Every three years when you are 50 70
- At any time if you experience pain in the tissue of your chest or discover a lump in the tissue of your chest

#### **AAA Screening**

If you are registered with a GP as female, regardless of your gender identity, you will not be invited for screening. If you are someone who was assigned male at birth <u>or</u> if you are someone who was assigned female at birth and has been or is currently on testosterone you should have an AAA screening:

When you turn 65

## **Prostate Screening**

There is no prostate screening programme. However, if you are someone who was assigned male at birth, you most likely have a prostate. If you have not had any genital surgery, symptoms of prostate cancer include:

- Needing to urinate more frequently
- Difficulty starting or straining to urinate
- Weak flow of urine
- Feeling that your bladder is full when you have emptied it

If you have had genital surgery, particularly a vaginoplasty, you may not show any symptoms of prostate cancer. If you're worried, please talk to us about booking an appointment. Prostate screening is usually done via a rectal examination but some genital surgeries mean the prostate is far easier to check with a vaginal examination instead. If you have a prostate and started HRT aged 50 or later, it is recommended that you have a PSA prostate cancer check, which is a blood test:

Once a year

## Pelvic Screening

There is no pelvic or ovarian screening programme. However, if you were assigned female at birth, have not had a partial or total hysterectomy and have been taking testosterone for more than two years, it is recommended that you should have a pelvic ultrasound scan:

Every three years