

Understanding Prostate Cancer Screening & Prevention Among Transgender Women



Prostate health is often overlooked in transgender women’s care, but it matters. Anyone with a prostate is at risk for prostate cancer. The prostate is a small, walnut-sized gland in the male reproductive system, located below the bladder. Prostate cancer occurs when cells in the prostate gland grow abnormally and multiply without control. These cells form a mass or a tumor in the prostate gland. For many people diagnosed with prostate cancer, the tumor is only in the prostate and has not spread to other parts of the body.

Transgender means a person whose gender identity (how they feel and see themselves) is different from the sex they were assigned at birth. Transgender women were assigned male at birth but identify and live as women. Many transgender women still have a prostate, even after gender-affirming surgery.

This fact sheet explains why prostate cancer screening matters for transgender women. It covers risk factors, screening recommendations, hormone therapy considerations, and tips for finding affirming care. Affirming care uses respectful, clear, and inclusive language to support your gender identity and expression.



To learn more about prostate cancer screening and prevention, visit:
www.CancerSupportCommunity.org/Prostate-Cancer



Learning that you or someone you love may be at risk for prostate cancer can raise many questions, especially for transgender women. **You may wonder:**

- Am I at risk for prostate cancer?
- Does hormone therapy affect my prostate?
- Do I need screening?
- What does screening involve?
- How will screening or treatment affect my body and sexual health?
- What should I share with my doctor about my transition or hormones?
- Who can support me during appointments or treatment?

Early stage prostate cancer usually causes no symptoms. Advanced prostate cancer can cause symptoms such as:

- Weak urine stream
- Blood in urine or semen
- Back pain
- Discomfort or evidence of swollen lymph nodes in the pelvic area
- Bone pain
- Weight loss
- Tiredness

The good news: prostate cancer can often be detected early and treated successfully. Understand your personal risk, and talk openly with your healthcare team to protect your health.





SCREENING AND PREVENTION FOR TRANSGENDER WOMEN

Anyone with a prostate is at risk for prostate cancer. This means transgender women who have a prostate should understand their risk and recommended screening.

Even with hormone therapy, the prostate remains and can develop cancer. Specifically, if you take gender-affirming hormone therapy (GAHT), the prostate gland is usually not removed during transition-related surgeries. Regular check-ups and open conversations with your provider can help detect problems early, when treatment works best. A trusted relationship with your doctor also supports your overall well-being. You deserve care that sees and respects all of who you are.

Screening involves simple tests that can find changes before symptoms appear. Early detection makes treatment more effective and improves survival.

For more information about cancer screening, prevention, and early detection, visit www.CancerSupportCommunity.org/Screening-Prevention.



RISK FACTORS

Anyone with a prostate can develop prostate cancer, but some people are at higher risk:

- **Age:** Risk increases after age 50.
- **Family history:** A father, brother, or close relative with prostate cancer may increase your risk.
- **Late hormone therapy:** Starting GAHT after age 50 may mean the prostate was exposed to testosterone for a longer time.
- **Lifestyle:** A diet high in fat, smoking, and obesity can increase risk.
- **Race and ethnicity:** Black and African American individuals have higher rates of prostate cancer and are often diagnosed later.

Understanding your personal risk helps guide when and how often you should be screened.

Are you a veteran?

Prostate cancer is one of the most common cancers among veterans. Your risk goes up if you are older, have family members with prostate cancer, or are Black. Black veterans have the highest rates and are more likely to die from prostate cancer. If you are a transgender woman who has served in the military, talk with your doctor about getting screened.

For more resources about veterans, visit:

www.CancerSupportCommunity.org/Blog/Cancer-Resources-Support-Veterans

RECOMMENDED SCREENINGS

If you have a prostate, recommended screenings may include:

- **PSA blood test:** A simple blood test that measures a protein made by the prostate called prostate-specific antigen (PSA). Higher levels can sometimes be a sign of prostate cancer, but they can also happen for other reasons. A high result should be discussed with your doctor.
- **Digital rectal exam (DRE):** A quick check of the rectum and nearby organs using a doctor's gloved, lubricated finger. This exam is optional, based on shared decision-making between you and your provider.
- **Imaging:** An MRI (magnetic resonance imaging) uses magnets and radio waves to take pictures inside your body. This may be used after a high PSA test result to help decide if a biopsy is needed.

Your doctor should work with you to determine the best approach for screening based on your specific risk factors, anatomy (body parts), and needs.



HORMONE THERAPY AND PSA LEVELS

Hormone therapy may impact your PSA test results. Estrogen and androgen blockers lower testosterone levels, which also lowers PSA levels. Current PSA guidelines are based on cisgender men (people who were born male and identify as men) and may not be appropriate for transgender women. It's important for you and your doctor to monitor your PSA levels over time — even a small rise could be important.

Your doctor will consider:

- Which organs you have
- How long you've been on hormone therapy
- Your family history and other risks

It's important for your doctors to know that PSA results need to be interpreted differently for transgender women on hormone therapy. If your PSA level is higher than expected, your doctor may repeat the test in 6–12 months or refer you to a urologist. A urologist is a doctor who takes care of the urinary system (kidneys, bladder, and urethra), prostate, and testicles.



BARRIERS TO CARE

Transgender women often face challenges when it comes to prostate health. Challenges that delay or prevent prostate cancer screening may include:

- If your doctor isn't aware of whether you still have a prostate
- Limited knowledge about how hormone therapy impacts PSA levels
- Fear of misgendering or discrimination
- Doctors lacking transgender health training
- Insurance gaps for gender-affirming or preventive care
- Limited access to LGBTQ+-friendly clinics
- Few screening guidelines for transgender people



TIP: Share your medical and hormone history with your doctor. Bring records of surgeries and hormone use, so your care plan fits your needs.

SAFE AND AFFIRMING CARE

You deserve respectful, inclusive, and knowledgeable healthcare. Finding affirming doctors and other care team members can make screening and prevention easier and less stressful. Look for:

- Clinics trained in LGBTQ+ health
- Providers who use your correct name and pronouns
- Patient navigators or social workers who can help with appointments, education, and insurance

If you ever feel uncomfortable or disrespected, it's OK to seek a second opinion or switch providers.

NEED HELP FINDING AFFIRMING CARE?

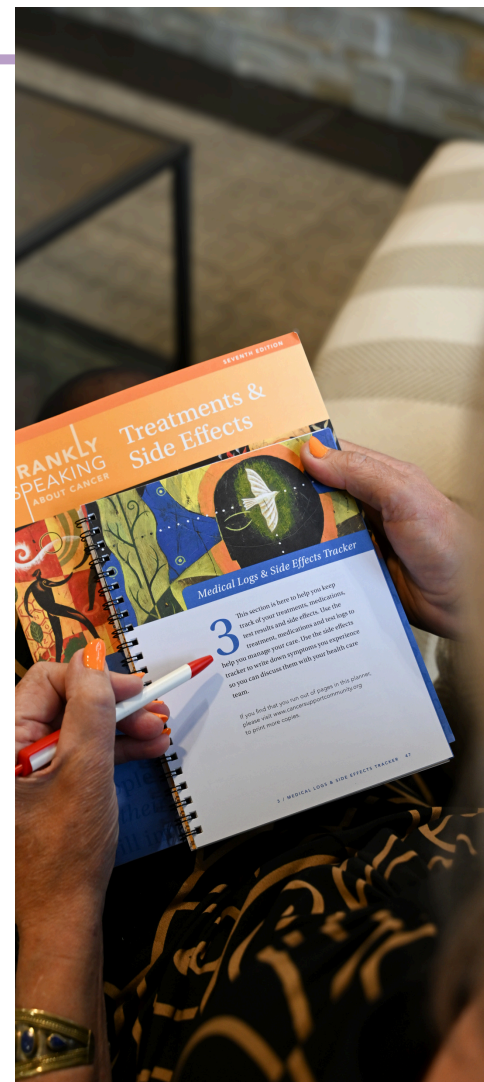
Visit Health Professionals Advancing LGBTQ+ Equality www.GLMA.org or www.OutCareHealth.org for directories of LGBTQ+-friendly providers.

TREATMENT AWARENESS

If the screening results show a concern, several treatment options are available. Your care team will guide you through the next steps, which may include treatment options:

- **Active surveillance (“watch and wait”):** Regular monitoring and check-ups (blood tests, scans, biopsies) to watch for changes in the cancer, instead of starting treatment right away
- **Surgery (radical prostatectomy):** Removing the prostate and surrounding tissue. This may be more complex after gender-affirming surgery. Can be done through open surgery (a large cut in the lower belly) or laparoscopically (using small cuts and long, thin tools).
- **Radiation therapy:** High-energy beams that destroy cancer cells. Sometimes androgen deprivation therapy (ADT) is used alongside radiation. ADT is therapy to lower your testosterone to very low levels. This therapy may come with additional considerations for transgender women.

Decisions should involve you, your urologist, oncologist, and gender-affirming care team to ensure your treatment plan fits both your health and your identity.



TAKE ACTION

Being proactive about prostate cancer screening can save your life.

Here's how to take charge of your health:

- Schedule regular check-ups and screenings
- Know your body and personal risk factors
- Find an affirming care team and ask questions
- Understand how hormones may affect screening
- Join peer or survivor support groups if you are diagnosed



Taking action helps you stay informed and in control of your health. Cancer screening is about empowerment and prevention. Your gender identity should never be a barrier to quality care.

RESOURCES

PROSTATE CANCER RESOURCES

Cancer Support Community

888-793-9355

www.CancerSupportCommunity.org/Prostate-Cancer

www.CancerSupportCommunity.org/Screening-Prevention

ZERO Prostate Cancer LGBTQIA+ Support Groups

ZEROCancer.org/Help-and-Support/Resources-For/LGBTQ

National LGBT Cancer Network

www.Cancer-Network.org

American Cancer Society: Prostate Cancer

www.Cancer.org/Cancer/Prostate-Cancer

National Cancer Institute: Prostate Cancer

www.Cancer.gov/Types/Prostate

Health Professionals Advancing LGBTQ+ Equality (GLMA) Provider Directory:

www.GLMA.org



Cancer Support Community Resources

Cancer Support Helpline® — Have questions, concerns, or looking for resources? Call CSC's toll-free Cancer Support Helpline (888-793-9355), available in 200 languages Mon-Thurs 11am-8pm ET and Fri 11am-6pm ET.

Open to Options® — Preparing for your next appointment? Our trained specialists can help you create a list of questions to share with your doctor. Make an appointment by calling 888-793-9355 or by contacting your local CSC or Gilda's Club.

Frankly Speaking About Cancer® — Trusted information for cancer patients and their loved ones is available through publications, online, and in-person programs.

Services at Local CSCs and Gilda's Clubs — With the help of over 200 locations, in 50 markets, CSC and Gilda's Club centers provide services free of charge to people impacted by cancer. Attend support groups, educational sessions, wellness programs, and more
www.CancerSupportCommunity.org/FindLocation.

Cancer Experience Registry® — Help others by sharing your cancer patient or cancer caregiver experience via survey at **www.CancerExperienceRegistry.org**.

MyLifeLine® — CSC's secure, online community welcomes anyone impacted by cancer to easily connect with community to reduce stress, anxiety, and isolation. Create a personal network site and invite friends & family to follow your journey. And participate in our discussion forums any time of day to meet others like you who understand what you are experiencing. Join now at **www.MyLifeLine.org**.

Grassroots Network — Make sure your voice is heard by federal and state policy makers on issues affecting cancer patients and survivors by joining our Network at **www.CancerSupportCommunity.org/Become-Advocate**.

This publication is available to download and print yourself at **www.CancerSupportCommunity.org/Prostate-Cancer**.

For print copies of this publication or other information about coping with cancer, visit **Orders.CancerSupportCommunity.org**.

Frankly Speaking About Cancer:
Prostate Cancer Program Partners:



This publication was made possible through generous support from:

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The Cancer Support Community and its partners provide this information as a service. This publication is not intended to take the place of medical care or the advice of your doctor. We strongly suggest consulting your doctor or other healthcare professionals to answer questions and learn more.

This resource features a mix of stock images posed by models and original CSC photography featuring real patient advocates.

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