

Information for trans and non-binary people

NHS Screening Programmes











About this leaflet

This leaflet is for trans (transgender), non-binary and intersex people in England. It tells you about the adult NHS screening programmes that are available in England and explains who we invite for screening.





We use trans as an umbrella term to embrace the diverse range of identities outside the traditional male/female definitions. These include transgender, gender fluid, intersex and non-binary. Find more trans health information at www.nhs.uk/trans-health.

Which screening can you have?

	Trans woman	Trans man
Breast screening	 (if you have breast tissue)	 (if you have breast tissue)
Cervical screening		 (if you have a cervix)
Abdominal aortic aneurysm screening		 (see page 17)
Bowel screening		

Trans men who are pregnant should be offered the same **antenatal and newborn screening tests** as all other pregnant individuals.

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Breast screening

Breast screening can find cancers when they are too small to see or feel. Finding and treating cancer early gives you the best chance of survival. Screening will miss some cancers, and some cancers cannot be cured.

Taking part in breast screening is your choice. You can find out more information from your GP or by visiting www.nhs.uk/breast.

What is breast screening?

Breast screening is a free NHS test that is carried out at breast screening centres and at mobile breast screening units across England.



A mammogram procedure

When it's offered

All individuals from 50 up to their 71st birthday who are registered as female with their GP are automatically invited to breast screening. When you are due for screening, we will send you an invitation letter.

We invite you for breast screening every 3 years. Your first invitation will arrive some time between the ages of 50 and 53. The NHS is in the process of extending the programme as a trial, offering screening to some people from 47 and for some people up to 73.

If you are trans it is important that your GP contacts the NHS Breast Screening Programme so you are invited for screening correctly.

If you do not want to be invited for breast screening, you will need to contact your local breast screening office. They will explain how you can opt out of breast screening.

It is important that you feel that you are treated with dignity and respect at all times. Let us know if you would:

- like your appointment at the beginning or end of a clinic
- prefer to be screened at your local breast screening centre rather than a mobile breast screening unit

Visit www.nhs.uk/breastscreening for contact details.

Trans men and non-binary people assigned female at birth

Registered with a GP as female

If you are aged from 50 up to your 71st birthday and registered with a GP as female, you **will be** routinely invited for breast screening. We recommend you consider having breast screening if you have not had chest reconstruction (top surgery) or still have breast tissue.

If you are worried about visiting a breast screening unit you can ring to arrange a more suitable appointment. For example, we can arrange for you to have an appointment at the beginning or end of a clinic.

Registered with a GP as male

If you are registered with a GP as male, you **will not be** invited for breast screening. If you have not had chest reconstruction (top surgery) and are aged 50 or over we suggest you talk to your GP about screening.

They can arrange a referral to a breast screening unit to have a mammogram.

If you have had chest reconstruction (top surgery) and you still have breast tissue, you can talk to your GP who can arrange a referral to breast screening for you.

Trans women and non-binary people assigned male at birth

Registered with a GP as a female

If you are aged from 50 up to your 71st birthday and registered with a GP as female, you **will be** routinely invited for screening. Long-term hormone therapy can increase your risk of developing breast cancer so it is important that you consider going for breast screening when you are invited.

Registered with a GP as male

If you are registered with a GP as male, you **will not be** invited for breast screening.

If you have been on long-term hormone therapy you may be at increased risk of developing breast cancer and should consider asking for breast screening.

If you are registered with your GP as male and are aged 50 or over, you may want to speak to your GP about having a mammogram. This will be done at a breast screening unit.

Screening test

A breast x-ray called a mammogram is used to look for signs of cancer. Each breast is pressed firmly between the plates of an x-ray machine for a few seconds. The pressure is needed to get good images and also reduce the radiation dose. Your test will be carried out by a specially trained female mammographer.

Some people say having a mammogram is uncomfortable and a few may find it painful, but the discomfort should pass quickly.

Breast screening usually involves 2 x-rays of each breast. People who have implants are offered the choice of additional x-rays so the mammographer can see as much breast tissue as possible.

Preparation

If you are a trans man registered with a GP as female who has not had chest reconstruction (top surgery) and you wear a binder, you will need to remove this before having your mammogram. Private changing facilities will be available so that you can remove your binder just before having your mammogram. If you have any concerns about your appointment, you can contact your local breast screening service.

Results

For most people the results are normal. If changes are seen on your x-ray, you will be recalled to an assessment clinic for more tests which will include:

- a breast examination
- more x-rays or ultrasound scans

You may also have a biopsy, where a small sample of tissue is taken from the breast with a needle.

Sometimes breast screening can pick up cancers that would never have caused harm, so people are treated for breast cancer that would never have been life-threatening.



Checking mammogram images for signs of cancer

Reducing your risk

Screening reduces the number of deaths from breast cancer by finding signs of disease at an early stage.

It is important to know what is normal for your body. If you notice any changes report them to your GP.



Cervical screening

Cervical screening aims to prevent cancer from developing in the cervix (neck of the womb).

It is important to go for screening as finding changes before they become cancer gives you the best chance of successful treatment.

Nearly all cervical cancers are caused by human papillomavirus (HPV). HPV is a very common virus – most people will be infected with it at some point in their life. It can be passed on through any type of sexual activity.

Screening will not prevent all cancers and not all cancers can be cured.

Taking part in cervical screening is your choice. You can find out more information from your GP or by visiting www.nhs.uk/cervical.

What is cervical screening?

Cervical screening (also known as a smear test) is a free NHS test that is carried out at your GP surgery or at some sexual health clinics. The test looks for early changes in the cells of the cervix.

When it's offered

We invite people registered as female for cervical screening every 3 years from the age of 25 to 49 and every 5 years from the ages of 50 to 64. We also invite people who are over 65 who haven't been screened since age 50 or those who have recently had abnormal tests.

We send an invitation letter when the cervical screening test is due, asking you to make an appointment.

Trans men and non-binary people assigned female at birth

Registered with a GP as female

If you are aged 25 to 64 and registered with a GP as female, you **will be** routinely invited for cervical screening. We recommend that you consider having cervical screening if you have not had a total hysterectomy and still have a cervix.

Registered with a GP as male

If you are aged 25 to 64 and registered with a GP as male, you **will not be** invited for cervical screening. However, if you have not had a total hysterectomy and still have a cervix, you should still consider having cervical screening. This is especially important if you have had any abnormal cervical screening results in the past. If this applies to you, let your GP or practice nurse know so you can talk to them about having the test.

If you are trans it is important that your GP contacts the NHS Cervical Screening Programme so you are invited for screening correctly. If you don't want to be invited for screening you should contact your GP. They will be able to remove you from the cervical screening invitation list.

Trans women and non-binary people assigned male at birth

Trans women and non-binary people assigned male at birth do not need to be screened as they do not have a cervix.

Registered with a GP as female

If you are registered with a GP as female, you **will be** routinely invited for cervical screening unless your GP has already told us you are not eligible. We can update our records so you are not invited unnecessarily.

Registered with a GP as male

If you are registered with a GP as male, you **will not be** invited for cervical screening.

It is important that you feel that you are treated with dignity and respect at all times. If you are worried about having cervical screening, talk to your doctor or practice nurse.

Screening test

The nurse or doctor will put an instrument called a speculum into the vagina to help them see the cervix. They will then take a sample of cells with a soft brush.

If you are a trans man who has taken long-term testosterone, you may find screening uncomfortable or painful. You may want to talk to your doctor or nurse about using a different size speculum and some extra lubrication.

Results

For most people their test results are normal. If cell changes are found you may need another cervical screening test, or an appointment at a colposcopy clinic where the cervix is looked at in detail.

Nearly all cervical cancers are caused by a virus called human papillomavirus (HPV) which is passed on through any type of sexual activity. If you are worried about your risk of developing cervical cancer you may want to speak to your GP or practice nurse.

Reducing your risk

We recommend you consider going for cervical screening every time you are invited, even if you have had a previous normal result. Let your GP or practice nurse know if you think you should be invited for screening.

Even if you have had the HPV vaccine we still recommend you consider going for cervical screening when invited.

Consider stopping smoking, as smoking increases your risk of cervical cancer.

If you have symptoms such as unusual vaginal discharge or bleeding, or pain during or after sex, please speak to your doctor even if you have had a normal cervical screening result.



AAA screening

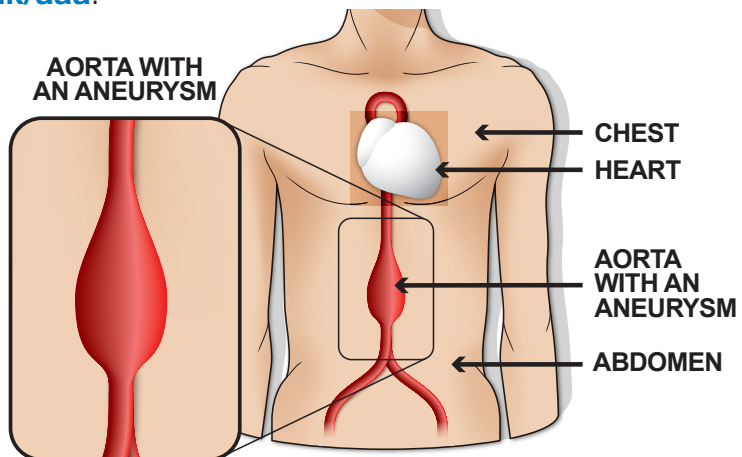
The aorta is the main blood vessel that supplies blood to the body. Sometimes the wall of the aorta in the abdomen can become weak and stretch to form an abdominal aortic aneurysm (AAA). There is a risk that an AAA may split or tear (rupture).

There is a high risk of dying from a ruptured AAA. Finding an aneurysm early gives you the best chance of treatment and survival. AAA screening reduces your risk of dying from a ruptured AAA.

Taking part in AAA screening is your choice. You can find out more information about AAA screening from your GP or by visiting www.nhs.uk/aaa.

What is AAA screening?

AAA screening is a free NHS test that is carried out in the community, including hospitals, health clinics and GP practices. AAA screening involves a simple ultrasound scan to measure the abdominal aorta.



When it's offered

AAAs are far more common in men aged over 65 than in women and younger men. That's why the NHS AAA Screening Programme only invites for screening individuals registered as male. However, any trans woman will have the same risk as a man and should consider accessing screening.

Individuals registered as male are invited for an ultrasound scan to check the size of their abdominal aorta when they are 65. Those over 65 can request a scan by contacting their local AAA screening service directly. Visit www.nhs.uk/aaa for contact details.

Trans men and non-binary people assigned female at birth

Trans men and non-binary people assigned female at birth do not have the same risk of AAA as people assigned male at birth.

Registered with a GP as female

If you are registered with a GP as female you **will not be** invited for AAA screening.

Registered with a GP as male

If you are a trans man aged 65 who is registered with a GP as male, you **will be** sent an appointment to attend for AAA screening. You can have AAA screening if you wish even though your risk is lower. If the clinic location or appointment time is not suitable, you can contact your local screening office to change this. You will find your local screening office phone number on your invitation letter.

Trans women and non-binary people assigned male at birth

Registered with a GP as female

If you are registered with a GP as female, you **will not be** invited for screening. However, if you are 65, you will have the same risk as a man aged 65 and should consider accessing screening. You can contact us to arrange a suitable appointment. Visit www.nhs.uk/aaa for contact details.

Registered with a GP as male

If you are aged 65 and registered with a GP as male, you **will be** invited for AAA screening.

Any trans woman or non-binary person assigned male at birth will have the same AAA risk as a man and should consider accessing screening.

If you are trans it is important that your GP contacts the NHS AAA Screening Programme so you are invited for screening correctly. If you don't want to be invited for AAA screening, you will need to let us know.

If you are not sure if you should be screened or not, contact your local screening office. You will find your local screening office number and more information about clinic locations at www.nhs.uk/aaa.

Screening test

The test is a simple ultrasound scan of your abdomen to measure the size of the aorta. Your screening appointment usually takes about 10 to 15 minutes.

The screener will check your personal details and ask for your consent (permission) to do the ultrasound scan.

You will be asked to lie on your back and lift up your top. You will not need to undress completely. If you are wearing a binder, you may be asked to remove it.

The ultrasound scan is usually painless. It can be slightly uncomfortable as the screener may need to apply some pressure.



The ultrasound scan AAA screening test

Results

The screener will give you your results following your scan.

It is not always possible to see your aorta at your screening test so you may be referred to hospital.

If your aorta is found to be bigger than normal, you will need regular scans to check if it is growing. Some people never need surgery for their AAA.

If your AAA is large you will be referred to a specialist team to discuss planned surgery. Large AAAs can be treated successfully with surgery.

Reducing your risk

Consider taking part in AAA screening and follow-up when you are invited.

You should also consider:

- stopping smoking
- drinking less alcohol

It is also important to maintain a healthy weight through a healthy diet and physical activity.



Bowel cancer screening

Bowel cancer screening reduces your risk of dying from bowel cancer.

Finding cancer early gives you the best chance of survival.

Screening will miss some cancers, and some cancers cannot be cured.

Taking part in bowel cancer screening is your choice. You can find out more information from your GP or by visiting www.nhs.uk/bowel.

What is bowel cancer screening?

NHS bowel cancer screening involves 2 types of tests. A bowel scope test is offered at a screening centre and a test kit is offered for use at home.

When it's offered

Both men and women are routinely invited for screening.

Bowel scope screening is offered once at the age of 55. Then, from the ages of 60 to 74, an at-home test kit is offered every 2 years.

Bowel scope screening test

Bowel scope screening is not yet available everywhere in England. If it is available where you live, an invitation will be sent to you when you turn 55.

Bowel scope screening looks at the inside of the large bowel. We send you an enema to use at home before your screening appointment. This clears the poo out of your large bowel.

At the screening centre, the doctor or nurse inserts a thin flexible tube with a tiny camera on it into your anus and up into the large bowel. Bowel scope screening looks for polyps. These are small growths in the bowel which might turn into cancer if not removed. The nurse or doctor will tell you straight away if they remove any polyps.

In the 2 weeks after your appointment you will be sent a letter explaining the results of your bowel scope screening. Your GP will also get the results.

If you have had gender reassignment surgery, you may find bowel scope screening more uncomfortable. You may want to speak to your GP about this.

The home test kit

A bowel screening test kit and information pack will be sent to you when you are due for screening. You are asked to collect one or more samples of your poo using the test kit provided.

You'll need to complete the test kit within the timeframe on the instructions and return it using the freepost packaging provided. The test looks for tiny amounts of blood in the sample which you may not be able to see and which could be a sign of bowel cancer. You can contact the free NHS Bowel Cancer Screening Programme helpline for advice on 0800 707 60 60.

Results from the test kit

If blood is found, you will be referred for further tests. This may involve you having a colonoscopy, which looks at the lining of the bowel using a flexible camera. You may find this more uncomfortable if you have had gender reassignment surgery.

Reducing your risk

To reduce your risk of bowel cancer you should:

- consider taking part in screening, even if you have had a previous normal result
- try to eat a high-fibre diet with plenty of fruit and vegetables, take regular physical exercise and stop smoking
- visit your GP if you notice blood in your poo, a change in your bowel habit over a number of weeks or unexplained weight loss

Bowel cancer can run in families. If you are worried about your risk please speak to your GP.

It is your decision whether or not to have any of the tests described in this booklet.

This leaflet is based on original work undertaken by Public Health Wales (Screening Division) in 2014.

With thanks for their feedback on the draft version of this leaflet to:

- Michael Toze
- Transgender Conduit (transgender and non-binary consultant)
- Harri Weeks, of the National LGB&T Partnership

Find out how Public Health England and the NHS use and protect your screening information at www.gov.uk/phe/screening-data. To opt out of screening, see www.gov.uk/phe/screening-opt-out.

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More trans health information: www.nhs.uk/trans-health

Order this leaflet: www.gov.uk/phe/screening-leaflets

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