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Lesbian Health

Q: What challenges do lesbian women face in the health care system?

A: Lesbians face unique challenges within the health care system that can cause poorer mental and physical health. Many doctors, nurses, and other health care providers have not had sufficient training to understand the specific health experiences of lesbians, or that women who are lesbians, like heterosexual women, can be healthy normal females. There can be barriers to optimal health for lesbians, such as:

- Fear of negative reactions from their doctors if they disclose their sexual orientation.
- Doctors' lack of understanding of lesbians' disease risks, and issues that may be important to lesbians.
- Lack of health insurance because of no domestic partner benefits.
- Low perceived risk of getting sexually transmitted diseases and some types of cancer.

For the above reasons, lesbians often avoid routine health exams and even delay seeking medical care when health problems occur.

Q: What are important health issues for lesbians to discuss with their doctors or nurses?

A: • **Heart disease.** Heart disease is the #1 killer of all women. Factors that raise women's risk for heart disease—such as obesity, smoking, and stress—are high among lesbians.

The more risk factors (or things that increase risk) a woman has, the greater the chance that she will develop heart disease. There are some factors that you can't control such as getting older, family health history, and race. But you can do something about some of the biggest risk factors for heart and cardiovascular disease—smoking, high blood pressure, lack of exercise, diabetes, and high blood cholesterol.

- **Exercise.** Studies have shown that physical inactivity adds to a person's risk for getting heart and cardiovascular disease, as well as some cancers. People who are not active are twice as likely to develop heart and cardiovascular disease compared to those who are more active. The more overweight you are, the higher your risk for heart disease. More research with lesbians in this area is needed.
- **Obesity.** Being obese can make you more likely to get heart disease, and cancers of the uterus, ovary, breast, and colon. Many studies have found that lesbians have a higher body mass than heterosexual women. Studies suggest that lesbians may store fat more in the abdomen and have a greater waist circumference, which places them at higher risk for heart disease and other obesity-related issues such as premature death. Additionally, some suggest that lesbians are less concerned about weight issues than heterosexual women.

At this time, more research is needed in these areas: physical activity in lesbians; possible dietary differences between lesbians and



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heterosexual women; if a higher BMI is a reflection of lean tissue and not excess fat; and if there's a different cultural norm among lesbians about thinness. In addition, other important factors for researchers to consider are race/ethnic background, age, health status, education, cohabitation with a female relationship partner, and having a disability. Studies have reported that among lesbian and bisexual women, African American or Latina ethnicity, older age, poorer health status, lower educational attainment, lower exercise frequency, and cohabiting with a female relationship partner increases a lesbian woman's likelihood of having a higher BMI.

- **Nutrition.** Research supports that lesbian and bisexual women are less likely to eat fruits and vegetables every day. More research on food consumption and dietary differences in relation to health and lesbians and bisexuals is needed.
- **Smoking.** Smoking can lead to heart disease and multiple cancers, including cancers of the lung, throat, stomach, colon, and cervix. Lesbians are more likely to smoke, compared to heterosexual women. Researchers think that high rates of smoking in this population are a consequence several things, like social factors, such as low self-esteem, stress resulting from discrimination, concealing one's sexual orientation, and tobacco advertising targeted towards gays and lesbians. Studies have also found that smoking rates are higher among gay and lesbian adolescents

compared to the general population. Smoking as a teen increases the risk of becoming an adult smoker. We know that about 90 percent of adult smokers started smoking as teens.

- **Depression and Anxiety.** Many factors cause depression and anxiety among all women. Studies show that lesbian and bisexual women report higher rates of depression and anxiety than heterosexual women do. This may result from the fact that lesbian women may also face:
 - ▶ Social stigma
 - ▶ Rejection by family members
 - ▶ Abuse and violence
 - ▶ Being treated unfairly in the legal system
 - ▶ Hiding some or all aspects of one's life
 - ▶ Lacking health insurance

Lesbians often feel they have to conceal their lesbian status to family, friends, and employers. Lesbians can also be recipients of hate crimes and violence. Despite strides in our larger society, discrimination against lesbians does exist, and discrimination for *any* reason may lead to depression and anxiety.

- **Alcohol and drug abuse.** Substance abuse is as serious a public health problem for the lesbians, gay men, bisexuals, and transgendered people (LGBT) as it is for the general U.S. population. Overall, recent data suggest that substance use among lesbians—particularly alcohol use—has declined over the past two decades. Reasons for this decline may include greater awareness and concern about health;



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more moderate drinking among women in the general population; some lessening of the social stigma and oppression of lesbians; and changing norms associated with drinking in some lesbian communities. However, both heavy drinking and use of drugs other than alcohol appear to be prevalent among young lesbians and among some older groups of lesbians.

- **Cancers.** Lesbian women may be at a higher risk for uterine, breast, cervical, endometrial, and ovarian cancers because of the health profiles listed above. However, more research is needed. In addition, these reasons may contribute to this risk:
 - ▶ Lesbians have traditionally been less likely to bear children. Hormones released during pregnancy and breastfeeding are believed to protect women against breast, endometrial, and ovarian cancers.
 - ▶ Lesbians have higher rates of alcohol use, poor nutrition, and obesity. These factors may increase the risk of breast, endometrial, and ovarian cancers, and other cancers.
 - ▶ Lesbians are less likely to visit a doctor or nurse for routine screenings, such as a Pap, which can prevent or detect cervical cancer. The viruses that cause most cervical cancer can be sexually transmitted between women. Lesbians have similar rates of mammography testing (for breast cancer) as heterosexual women.
- **Domestic Violence.** Also called intimate partner violence, this is when one person purposely causes either physical or mental harm to another. Domestic violence can occur in lesbian relationships as it does in heterosexual relationships, though there is some evidence that it occurs less often. But for many reasons, lesbian victims are more likely to stay silent about the violence. Some reasons include fewer services available to help them; fear of discrimination; threats from the batterer to “out” the victim; or fear of losing custody of children.
- **Polycystic Ovarian Syndrome.** PCOS is the most common hormonal reproductive problem in women of childbearing age. PCOS is a health problem that can affect a woman’s menstrual cycle, fertility, hormones, insulin production, heart, blood vessels, and appearance. Women with PCOS have these characteristics:
 - ▶ high levels of male hormones, also called androgens
 - ▶ an irregular or no menstrual cycle
 - ▶ may or may not have many small cysts in their ovaries. Cysts are fluid-filled sacs.

An estimated five to 10 percent of women of childbearing age have PCOS (ages 20–40). There is evidence that lesbians may have a higher rate of PCOS than heterosexual women.
- **Osteoporosis.** Millions of women already have or are at risk for



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osteoporosis. Osteoporosis means that your bones get weak, and you're more likely to break a bone. Osteoporosis in lesbian women has not yet been well studied.

- Sexual Health. Lesbian women are at risk for many of the same STDs as heterosexual women. Lesbian women can transmit STDs to each other through skin-to-skin contact, mucosa contact, vaginal fluids, and menstrual blood. Sharing sex toys is another method of transmitting STDs. These are common STDs that can be passed between women:

- ▶ **Bacterial vaginosis (BV).**

Although we don't know for sure that BV is caused by a sexually transmitted agent, BV occurs more commonly among women who have recently acquired other STD's, or who have recently had unprotected sex. For reasons that are unclear, BV is more common in lesbian and bisexual women than heterosexual women, and frequently occurs in both members of lesbian couples. BV happens when the normal bacteria in the vagina get out of balance. Sometimes, BV causes no symptoms, but over half of affected women have a vaginal discharge with a fishy odor or vaginal itching. If left untreated, BV can increase a woman's chances of getting other STDs such as HIV, chlamydia, gonorrhea, and pelvic inflammatory disease.

- ▶ **Human papillomavirus (HPV).** HPV can cause genital warts and abnormal changes on

the cervix that can lead to cancer, if it is not treated. Most people with HPV or genital warts don't know they are infected until they have had a Pap test because they may not have symptoms, but the virus can still be spread by contact. Lesbians can transmit HPV through direct genital skin-to-skin contact or by the virus traveling on hands or sex toys. Some women and their doctors wrongly assume that lesbian women do not need a regular Pap test. However, the virus can be spread by lesbian sexual activity, and many lesbians have been sexual with men so it is recommended that lesbian women have a Pap test. This simple test is an effective method of detecting abnormal cells on the cervix that can lead to cancer. Begin getting Pap tests no later than age 21 or sooner if you're sexually active. These recommendations apply equally to lesbians who've never had sex with men, as cervical cancer caused by HPV has been seen in this group of women.

- ▶ **Trichomoniasis "Trich".** It is caused by a parasite that can be passed from one person to another during sexual contact. It can also be picked up from contact with damp, moist objects such as towels or wet clothing. Trich is spread through sexual contact with an infected person. Signs include yellow, green, or gray vaginal discharge (often foamy) with a strong odor; discomfort during sex and when



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urinating; irritation and itching of the genital area; and lower abdominal pain in rare cases. To tell if you have trich, your doctor or nurse will do a pelvic exam and lab test. A pelvic exam can show small red sores, or ulcerations, on the wall of the vagina or on the cervix. Trich is treated with antibiotics.

- ▶ **Herpes.** Herpes is a virus that can produce sores (also called lesions) in and around the vaginal area, on the penis, around the anal opening, and on the buttocks or thighs. Occasionally, sores also appear on other parts of the body where the virus has entered through broken skin. Most people get genital herpes by having sex with someone who is shedding the herpes virus during periods when an outbreak is not visible. The most common cause of recurrent genital herpes is HSV-2, which is transmitted through direct genital contact.

HSV-1 is another herpes virus that usually infects the mouth and causes oral cold sores, but can also be transmitted to the genital area through oral sex. Lesbians can transmit this virus to each other if they have intimate contact with someone with a lesion or touching infected skin even when an outbreak is not visible.

- ▶ **Syphilis.** Syphilis is an STD caused by bacteria. Syphilis is passed through direct contact with a syphilis sore during vaginal, anal, or oral sex. If untreated, syphilis can infect other parts of the body. Syphilis remains uncommon in the general population, but has been increasing in men who have sex with men. It is extremely rare among lesbians. However, lesbians should talk to their doctor if they have any non-healing ulcers.

Q: What other STDs can lesbian women get?

STD	Symptoms
Chlamydia	<p>Most women have no symptoms. Women with symptoms may have:</p> <ul style="list-style-type: none"> • abnormal vaginal discharge • burning when urinating • bleeding between menstrual periods <p>Infections that are not treated, even if there are no symptoms, can lead to:</p> <ul style="list-style-type: none"> • lower abdominal pain • low back pain • nausea • fever • pain during sex • bleeding between periods

FREQUENTLY ASKED QUESTIONS



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STD	Symptoms
Gonorrhea	<p>Symptoms are often mild, but most women have no symptoms. Even when women have symptoms, they can sometimes be mistaken for a bladder or other vaginal infection. Symptoms are:</p> <ul style="list-style-type: none"> • pain or burning when urinating • yellowish and sometimes bloody vaginal discharge • bleeding between menstrual periods
Hepatitis B	<p>Some women have no symptoms. Women with symptoms may have:</p> <ul style="list-style-type: none"> • mild fever • headache and muscle aches • tiredness • loss of appetite • nausea or vomiting • diarrhea • dark-colored urine and pale bowel movements • stomach pain • skin and whites of eyes turning yellow
HIV/AIDS	<p>Some women may have no symptoms for 10 years or more. Women with symptoms may have:</p> <ul style="list-style-type: none"> • extreme fatigue • rapid weight loss • frequent low-grade fevers and night sweats • frequent yeast infections (in the mouth) • vaginal yeast infections and other STDs • pelvic inflammatory disease (PID) • menstrual cycle changes • red, brown, or purplish blotches on or under the skin or inside the mouth, nose, or eyelids
Pubic Lice	<ul style="list-style-type: none"> • itching • finding lice

Q: What can lesbian women do to protect their health?

A: • **Find a doctor who is sensitive to your needs to help you get regular check ups.** The Gay and Lesbian Medical Association provides online health care referrals.

You can access their database of members at www.glma.org/programs/prp/index.shtml or contact them at (415) 255-4547.

- **Get a Pap test.** The Pap test finds changes in your cervix early, so you can be treated before the problem



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becomes serious. Begin getting Pap tests no later than age 21 or within three years of first having sexual intercourse. After two to three yearly Pap tests have been normal, talk to your doctor or nurse about getting a Pap test at least once every three years.

- **Talk to your doctor or nurse about an HPV test if your Pap test is abnormal.** In combination with a Pap test, an HPV test helps prevent cervical cancer. It can detect the types of HPV that cause cervical cancer. The Food and Drug Administration (FDA) has approved an HPV DNA test for women for the following uses:
 - ▶ as a follow-up to a Pap test with results that are abnormal
 - ▶ in combination with a Pap test in women aged 30 and older
 - **Practice safer sex.** Get tested for STD's like chlamydia or herpes before beginning a relationship. If you're unsure about a partner's status, practice methods to reduce the likelihood of sharing vaginal fluid or blood, including condoms on sex toys.
 - **Have a balanced, healthy diet.** Eat a variety of whole grains, fruits, and vegetables. These foods give you energy, plus vitamins, minerals, and fiber. Besides, they taste good! Try foods like brown rice or whole-wheat bread. Bananas, strawberries, and melons are some great tasting fruits. Try vegetables raw, on a sandwich, or in a salad. Be sure to pick a variety of colors and kinds of fruits and vegetables. You can vary the form—try fresh, frozen, canned, or dried.
- Read more about having a healthy diet at <http://www.4woman.gov/faq/diet.htm>.
 - **Drink moderately.** If you drink alcohol, don't have more than one drink per day. Too much alcohol raises blood pressure and can raise your risk for stroke, heart disease, osteoporosis, many cancers, and other problems.
 - **Get moving.** An active lifestyle can help every woman. Thirty minutes of moderate physical activity on most days of the week can greatly improve your health and decrease your risk of heart disease and some cancers!
 - **Don't smoke.** If you do smoke, try to quit. Avoid second hand smoke as much as you can. Read more about quitting at <http://www.4woman.gov/QuitSmoking>.
 - **Try different strategies to deal with your stress.** Stress from discrimination is a tough challenge in the life of every lesbian. Relax using deep breathing, yoga, meditation, and massage therapy. You can also take a few minutes to sit and listen to soothing music, or read a book. Talk to your friends or get help from a professional if you need it.
 - **Talk to your doctor or nurse about screening tests you may need.** Regular preventive screenings are critical to staying healthy. All the tests that heterosexual women need, lesbian women need too. See these online charts for screening guidelines for different age groups: www.4woman.gov/screeningcharts.



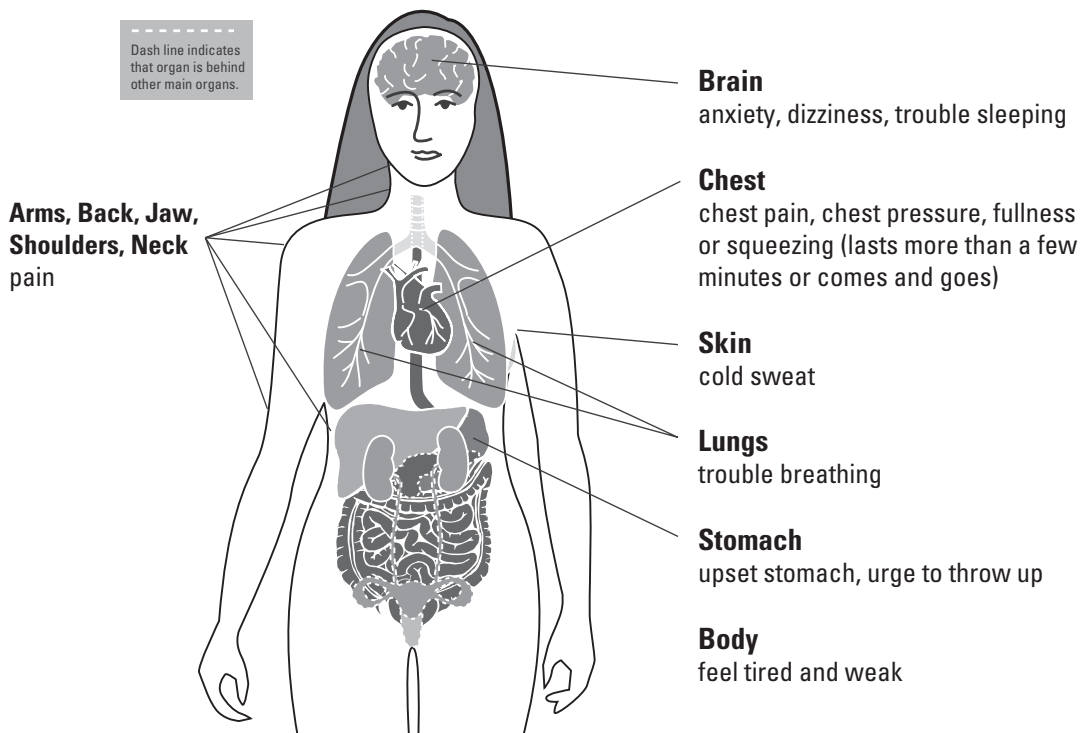
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- **Get help for domestic violence.** Call the police or leave if you or your children are in danger! Call a crisis hotline or the National Domestic Violence Hotline at 800-799-SAFE or TDD 800-787-3224, which is available 24 hours a day, 365 days a year, in English, Spanish, and other languages. The Helpline can give you the phone numbers of local hotlines and other resources.
- **Build strong bones.** Exercise. Get a bone density test. Learn more about that at: <http://www.4woman.gov/faq/osteopor.htm>. Make sure you get enough calcium and vitamin D each day. Reduce your chances of falling by making your home safer. For example, use a rubber bathmat in the shower or tub. Keep your floors free from clutter. Lastly, talk to your

doctor or nurse about taking medicines to prevent or treat bone loss.

- **Know the Signs of a Heart Attack.** Women are less likely than men to believe they are having a heart attack and more likely to delay in seeking treatment. For women, chest pain may not be the first sign your heart is in trouble. *Before* a heart attack, women have said that they have **unusual tiredness, trouble sleeping, problems breathing, indigestion, and anxiety**. These symptoms can happen a month or so before the heart attack. *During* a heart attack, women often have these symptoms:
 - ▶ Pain or discomfort in the center of the chest.

Signs of a Heart Attack





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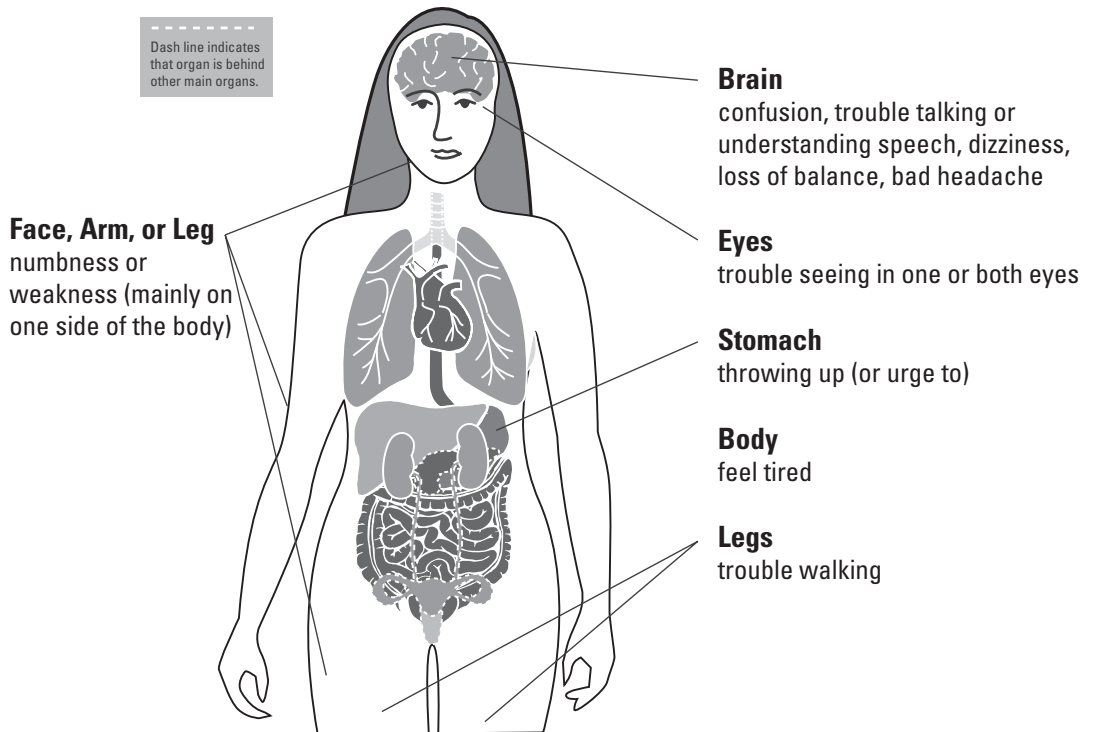
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- ▶ Pain or discomfort in other areas of the upper body, including the arms, back, neck, jaw, or stomach.
- ▶ Other symptoms, such as shortness of breath, breaking out in a cold sweat, nausea, or light-headedness.
- **Know the Signs of a Stroke.** The signs of a stroke happen suddenly

and are different from the signs of a heart attack. Signs you should look for are weakness or numbness on one side of your body, dizziness, loss of balance, confusion, trouble talking or understanding speech, headache, nausea, or trouble walking or seeing. **Remember:** Even if you have a “mini-stroke,” you may have some of these signs. ■

Signs of a Stroke





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For more information

For more information on lesbian health issues, contact the National Women's Health Information Center at 1-800-994-9662 or the following organizations:

Centers for Disease Control and Prevention (CDC)

Internet Address: www.cdc.gov

Office on Violence Against Women, OJP, DOJ

Phone: (800) 799-7233

Internet Address:

<http://www.ojp.usdoj.gov/vawo>

Gay and Lesbian Medical Association (GLMA)

Phone: (415) 255-4547

Internet Address: <http://www.glma.org>

Lesbian Health Research Center, Institute for Health and Aging, UCSF

Phone: (415) 502-5209

Internet Address:

<http://www.lesbianhealthinfo.org>

Lesbian STD Web Site, University of Washington

Internet Address:

<http://depts.washington.edu/wswstd/>

National Center for Lesbian Rights

Phone: (415) 392-6257

Internet Address: <http://www.nclrights.org>

The Mautner Project

Phone: (202) 332-5536

Internet Address:

<http://www.mautnerproject.org>

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This FAQ has been reviewed by:

the University of Washington,
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and Gynecological Health Associates.

Content last updated January 2005