



## WOMEN'S HEALTH

### Women Who Are Not Getting Cervical Screening

With the advent of the Papanicolaou (Pap) test, the incidence of cervical cancer has dropped markedly. But 1 subgroup of women—lesbians—are not getting screened as much. Intervention techniques that are successful among heterosexual women may not be appropriate, suggest researchers from the University of Maryland School of Medicine in Baltimore, but one thing that could help is fostering a comfortable atmosphere for the patient to share personal information.

In the study of 1,006 self-identified lesbians who responded to an Internet survey, 62% reported they were routine screeners, getting Pap tests annually if they were aged 21 to 30 years or every 2 years if they were aged > 30 years. The most commonly cited reasons for not getting regular cervical screening were

lack of a physician referral, lack of a physician, and lack of health insurance. Less educated, lower-income, and underinsured women were less likely to have regular tests. Women who knew that lack of Pap testing is a risk factor for cervical cancer were nearly twice as likely to be routine screeners, but no association with screening was found for women who had more knowledge of general cervical cancer risk factors.

The researchers note that previous studies have found that lesbians who are not routine screeners are more likely to report discrimination due to sexual orientation in a variety of health care settings. This current study, however, found no compelling association between screening behavior and perceived everyday or lifetime discrimination in all settings. The researchers did find, though, that women who had disclosed their sexual orientation to their health care practitioners (HCPs) were more

likely to be regular screeners. Women whose HCPs recommended a Pap test were also about twice as likely to be routine screeners. Those findings, taken together, suggest that a patient's level of comfort and interaction with her HCP may be a more important determinant of screening behavior than her level of comfort with the health care system in general, the researchers conclude.

Because their study suggests that barriers to screening among lesbians are directly related to the perceived benefits of screening, the perceived seriousness of cervical cancer, the perceived susceptibility to cervical cancer, and disclosure of sexual orientation to HCPs, the researchers say interventions targeted to lesbians should emphasize the benefits of screening and educate them about their susceptibility to cervical cancer. ●

Source: Tracy JK, Schluterman NH, Greenberg DR. *BMC Public Health*. 2013;13:442. doi: 10.1186/1471-2458-13-442.