

Ovarian cancer doesn't discriminate.

1 in 75 people born with ovaries will be diagnosed with ovarian cancer during their lifetime.

Some members of the 2SLGBTQ+ community are at an increased risk for ovarian cancer:

- Lesbians, bisexual women and trans men are less likely to take oral contraceptives, give birth or breastfeed (all factors that reduce ovarian cancer risk), compared to heterosexual, cisgender women.

Trans men may have additional risks:

- Research is needed to determine whether testosterone supplementation used by some people in the trans community to support gender-affirming transition increases ovarian cancer risk.

2SLGBTQ+ individuals face additional barriers:

- Are collectively more likely to face discrimination by – and have mistrust towards – healthcare providers and systems, potentially leading to reduced quality of care.
- Lack of inclusion of people from the 2SLGBTQ+ community (and other equity-deserving communities) in cancer research may exacerbate already-existing inequities.

The Run for Her is dedicated to raising funds and changing outcomes for **ALL** people with or at risk for ovarian cancer, regardless of sexuality or gender identity. **Go to runforher.ca to learn more.**

More information at runforher.ca/ovarian-cancer-101

- Spare Parts: Navigating Ovarian Cancer as a Transgender Man. By Tristan Bilash, BSW, RSW, and Lauren M Walker, PhD, RPsych.
- How family doctors can help prevent Ovarian Cancer. By Alicia Tone, PhD
- Ovarian cancer: it's time for change. By Alicia Tone, PhD

Additional Resources

- ovariancanada.org
- queeringcancer.ca



Ovarian cancer 101.

What every person born with ovaries needs to know.

1) There is no reliable screening test for ovarian cancer. The pap test does NOT detect ovarian cancer.

2) The following symptoms could indicate a possibility* of ovarian cancer:

- Persistent bloating
- Difficulty eating
- Abdominal or pelvic discomfort/pain
- Changes in urinary or bowel habits
- Menstrual irregularities
- Bleeding after menopause
- Unexplained weight loss/gain
- Extreme/persistent fatigue
- Pain with intercourse

*Even if you are experiencing **all** these symptoms, it does **not** mean you have ovarian cancer. However, it is important to talk to your doctor if a symptom is new to you and persists for 3 weeks or more, to rule it out.

3) The following can increase your risk for ovarian cancer:

- Inheritance of a change in a specific hereditary cancer gene (e.g., BRCA1, BRCA2)
- A family history of ovarian or other cancers – such as breast, endometrial (uterine), colorectal, pancreatic or prostate – on either side of the family
- Belonging to a specific ethnic community (e.g., Ashkenazi Jewish or French Canadian) associated with a higher prevalence of mutations in specific hereditary cancer genes
- A personal diagnosis of breast cancer
- A personal diagnosis of endometriosis

4) The following can reduce your risk of ovarian cancer:

- Use of oral contraceptive pills for 5 or more years
- Having children, breastfeeding
- Removal of fallopian tubes and ovaries in individuals at high risk, based on an inherited mutation in a hereditary cancer gene
- “Opportunistic” removal of fallopian tubes in individuals at average risk who are already planning to undergo gynecologic surgery unrelated to ovarian cancer (e.g., tubal sterilization, hysterectomy)