Primary liver cancer is cancer that begins in the liver. Liver cancer has many causes, many of which are less severe liver diseases which can worsen to become cancer. It – like many other liver conditions – often begins with minimal or non-specific symptoms, which results in late-stage diagnoses. However, detecting liver cancer earlier provides more options for care, a greater window for treatment and a higher chance of survival.

Liver cancer is the 6th most common cancer & the 3rd deadliest cancer.¹

There are several reasons why the LGBTQI+ communities might face a higher burden than average due to liver cancer. Heightened risk factors may increase the likelihood that liver cancer develops, while delays to screening and treatment can worsen outcomes. It is important to know the risks – and know what you can do to protect your liver.

RISK FACTORS:

**Discrimination from healthcare providers**
- Provider bias can limit access to life-saving and health-improving care.
- It is natural to be reluctant to make appointments after facing discrimination.
- Discrimination leads to late diagnosis – which makes treatment more challenging.

**Viral hepatitis**
- Viral hepatitis can be spread through unprotected sex, injection drug use, and contact with infected blood.
- 20% of new hepatitis B infection are among men who have sex with men (MSM).²
- Viral hepatitis can lead to liver cancer. If untreated – one’s risk increases by up to 40%.

**Rates of alcohol dependence**

Increased alcohol use can lead to developing liver disease and liver cancer.

**High rates of alcohol use**
- Alcohol consumption is prevalent, especially among bisexual people, gender minority women, and transgender individuals.⁴
- Alcohol misuse leads to cirrhosis, liver failure, or liver cancer

**Rates of alcohol dependence**

- Bisexual Men: 16.4%
- Lesbian: 13.3%
- Gay Men: 18.1%
- Bisexual Women: 15.4%
WHAT CAN YOU DO?

Find a primary care doctor and set up regular appointments.
- Be honest with your healthcare provider about your lifestyle habits (including sex, drugs, and alcohol use) – and keep it as an ongoing discussion.
- If you feel uncomfortable, seek a new doctor to stick with! Look at your health center's directory or review the LGBTQ Healthcare Directory and the LGBT-friendly cancer screening directory for guidance.

Practice a liver-healthy lifestyle
- Sustain a balanced diet, with ample protein, produce, and healthy fats. Limit sugar intake and consider the Mediterranean diet as a framework.
- Maintain regular exercise each week.
- Practice moderation when consuming alcohol.
- Cut back or stop smoking.

Protect yourself from viral hepatitis.
- Ask to receive the vaccination for HBV.
- Avoid high-risk situations that may expose you to bodily fluids– including blood, semen, and vaginal fluid – that may transmit hepatitis.
- Test for hepatitis infection if you are concerned about exposure.
- Pursue treatment for HCV if necessary.

REFERENCES:

9. Housing, insurance, and vocational instability. Unstable working conditions, uninsurance and under-insurance, and housing instability have disproportionately high rates in the LGBTQ+ population – which make it hard to make regular appointments, keep a regular PCP, or stay consistent with medications.
10. Any more based upon which statistics we incorporate from “graphic/visuals to be incorporated throughout.”

High prevalence of metabolic disease
- Metabolic disease can lead to fatty liver disease, then liver cancer.
- People infected with HIV or HCV face high rates of metabolic disease.

Targeted tobacco & alcohol marketing
- Many tobacco and alcohol companies target the LGBTQI+ community and events within the community.
- LGBTQI+ people have higher rates of smoking – and of tobacco use of any kind.
- Both of these substances contribute to the development of liver cancer.

41% of LGBTQI+ individuals live below the poverty line