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Cardi-OH ECHO

Health Equity and Cardiovascular Risk

March 28, 2024



About Cardi-OH

Founded in 2017, the mission of Cardi-OH is to improve cardiovascular and diabetes health outcomes and eliminate disparities in Ohio's Medicaid population.

WHO WE ARE: An initiative of health care professionals across Ohio's seven medical schools.

WHAT WE DO: Identify, produce, and disseminate evidence-based cardiovascular and diabetes best practices to primary care teams.

HOW WE DO IT: Best practices resources are available via an online library at Cardi-OH.org, including monthly newsletters, podcasts, webinars, and virtual clinics using the Project ECHO® virtual training model.

Learn more at Cardi-OH.org





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Disclosure Statements



- The following speakers and subject matter experts have a relevant financial interest or affiliation with one or more organizations that could be perceived as a real or apparent conflict of interest in the context of the subject of their presentation*:
 - Danette Conklin, PhD; Kathleen Dungan, MD, MPH; Adam T. Perzynski, PhD; Christopher A. Taylor, PhD, RDN, LD, FAND; Jackson Wright, MD, PhD
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Health Equity Among Sexual Minorities

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Learning Objectives



- 1. Provide an overview of increased cardiovascular risk, including potential causes, among LGBTQ patients
- 2. Describe culturally sensitive and effective strategies for communicating cardiovascular risk to LGBTQ patients
- 3. Describe strategies to provide a welcoming environment for sexual and gender minority patients seeking care

Table 1. Glossary of Terms for LGBTQ Health			
Bisexual	People who experience sexual, romantic, physical, or spiritual attraction to people of their own gender and toward another gender (sometimes shortened to bi).		
Cisgender	A term used to describe people whose gender identity is congruent with what is traditionally expected on the basis of their sex assigned at birth.		
Gay	A term used to describe boys/men who are attracted to boys/men but often used and embraced by people with other gender identities to describe their same-gender attractions and relationships. Often referred to as homosexual, although this term is no longer used by the majority of people with same-gender attractions.		
Gender expression	The ways in which a person communicates femininity, masculinity, androgyny, or other aspects of gender, often through speech, mannerisms, gait, or style of dress. All people have ways in which they express their gender.		
Gender identity	A person's inner sense of being a girl/woman, a boy/man, a combination of girl/woman and boy/man, or something else, or having no gender at all. Everyone has a gender identity.		
Gender minority	A broad diversity of people who experience an incongruence between their gender identity and what is traditionally expected on the basis of their sex assigned at birth, such as transgender and gender nonbinary people.		
Gender nonbinary	A term used by some people who identify as a combination of girl/woman and boy/man, as something else, or as having no gender. Often used interchangeably with gender nonconforming.		
Lesbian	Used to describe girls/women who are attracted to girls/women; applies for cisgender and transgender girls/women. Often referred to as homosexual, although this term is no longer used by the majority of women with same-gender attractions.		



Queer	Historically a derogatory term used against LGBTQ people, it has been embraced and reclaimed by LGBTQ communities. Queer is often used to represent all individuals who identify outside of other categories of sexual and gender identity. Queer may also be used by individuals who feel as though other sexual or gender identity labels do not adequately describe their experience.
Sex assigned at birth	Usually based on phenotypic presentation (ie, genitals) of an infant and categorized as female or male; distinct from gender identity.
Sex	Biological sex characteristics (chromosomes, gonads, sex hormones, or genitals); male, female, intersex. Synonymous with sex assigned at birth.
Sexual minority	A broad diversity of people who have a sexual orientation that is anything other than heterosexual/straight and typically includes gay, bisexual, lesbian, queer, or something else.
Sexual orientation	A person's physical, emotional, and romantic attachments in relation to gender. Conceptually separate from gender identity and gender expression. Everyone has a sexual orientation.
Straight	Boys/men or girls/women who are attracted to people of the other binary gender than themselves; can refer to cisgender and transgender individuals. Often referred to as heterosexual.
Transgender man	Someone who identifies as male but was assigned female sex at birth.
	Someone who identifies as male but was assigned female sex at birth. Someone who identifies as female but was assigned male sex at birth.



Gender dysphoria

A term that describes a sense of unease that a person may have because of a mismatch between their biological sex and their gender identity.

Billable ICD-10 diagnosis to cover gender-affirming care (F64.0)

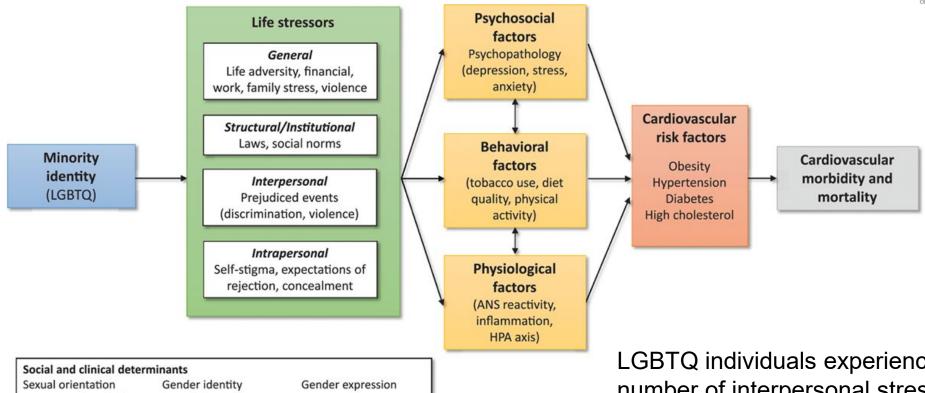
Summary of Cardiovascular Health Concerns in Sexual Minorities



- ~11 million LGBTQ adults in the US remain a marginalized group with significant health disparities
 - BRFSS (Behavioral Risk Factor Surveillance System) have documented higher prevalence of self-reported tobacco use and CVD diagnoses in gender minority adults
- The predominant theory to explain LGBTQ health disparities is the minority stress model
 - LGBTQ people are exposed to multilevel minority stressors (i.e., intrapersonal, interpersonal, and structural) that contribute to health disparities

Conceptual Model of Cardiovascular Health in LGBTQ Adults (AHA)





Sexual orientation Gender identity
Sex assigned at birth Race/ethnicity
HIV status Socioeconomic status

Social support Coping

Family dynamics Family history/genetics

Hormone status
Neighborhood factors
Immigration status

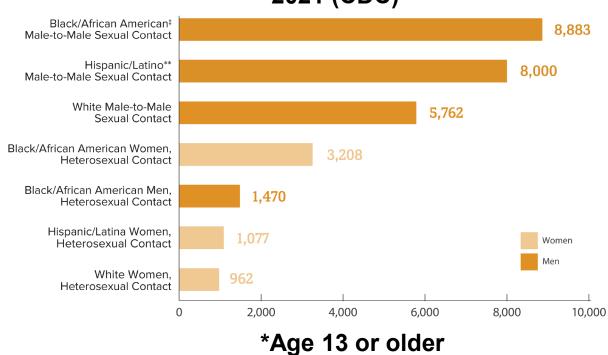
LGBTQ individuals experience a high number of interpersonal stressors (e.g., discrimination, family rejection, and violence) that are associated with higher rates of substance use, poor mental health, and cardiometabolic risk across the life span

Additional Risk Factors

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- Transgender women and sexual minority men bear a disproportionate burden of HIV compared with non-LGBTQ people
 - HIV is associated with increased risk for CVD because of:
 - High prevalence of CVD risk behaviors among people with HIV
 - Dyslipidemia and other cardiometabolic changes associated with certain HIV treatments
 - Physiological effects of HIV disease itself

New HIV Diagnoses in the US and Dependent Areas for the Most-Affected Subpopulations, 2021 (CDC)



Additional Risk Factors



Use of genderaffirming hormone therapy has been identified as a potential contributor to poor CVH in transgender people because of the potential cardiovascular effects of these treatments



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Prevention and Health Promotion

CARDIOVASCULAR OUTCOMES IN GENDER DYSPHORIC PATIENTS UNDERGOING HORMONE REPLACEMENT THERAPY

Moderated Poster Contributions
Prevention and Health Promotion Moderated Poster Theater 10_Hall F
Sunday, March 5, 2023, 4:15 p.m.-425 p.m.

Retrospective Cohort Study n = 1675

Summary of Results:

- In patients with Gender Dysphoria, the presence of hormone replacement therapy (HRT) was associated with increased odds of:
 - Ischemic Stroke
 - Pulmonary embolism
 - STEMI
 - NSTEMI
 - Drug abuse
 - Hypothyroidism
- HRT was seen more in older male to female patients
- No significant difference in all-cause mortality, length of stay, hospitalization charge, as well as arrythmias, heart failure, or CV risk factors

Estrogen







Risk Level	Feminizing Hormones
Likely increased risk	Blood clots Gallstones Elevated liver enzymes Weight gain Hypertriglyceridemia
Likely increased risk with presence of additional risk factors	Cardiovascular disease
Possible increased risk	Hypertension Hyperprolactinemia or prolactinoma
Possible increased risk with presence of additional risk factors	Diabetes
No increased risk or inconclusive	Breast cancer



Testosterone





Risk Level	Masculinizing Hormones
Likely increased risk	Polycythemia Weight gain Acne Androgenic alopecia Sleep apnea
Possible increased risk	Elevated liver enzymes Hyperlipidemia
Possible increased risk with presence of additional risk factors	Destabilization of certain psychiatric disorders Cardiovascular disease Hypertension Diabetes
No increased risk or inconclusive	Loss of bone density Breast cancer Cervical cancer Ovarian cancer Uterine cancer



Higher Risk Individuals



- So, do we need to turn away our higher CVD risk trans patients seeking hormone replacement therapy?
 - Yes and No
 - Shared decision making

Trans Patient Risk Factors

- 4% turn to the ED for primary care
- 21% avoid ED out of fear of discrimination
- 5x more likely to attempt suicide
- HIV infection rate 4x higher than national average
- Higher rates of drug use, sexual assault, domestic violence, and sex work
- 4x more likely to live in extreme poverty
- 2x more likely to be unemployed

Culturally Competent Care



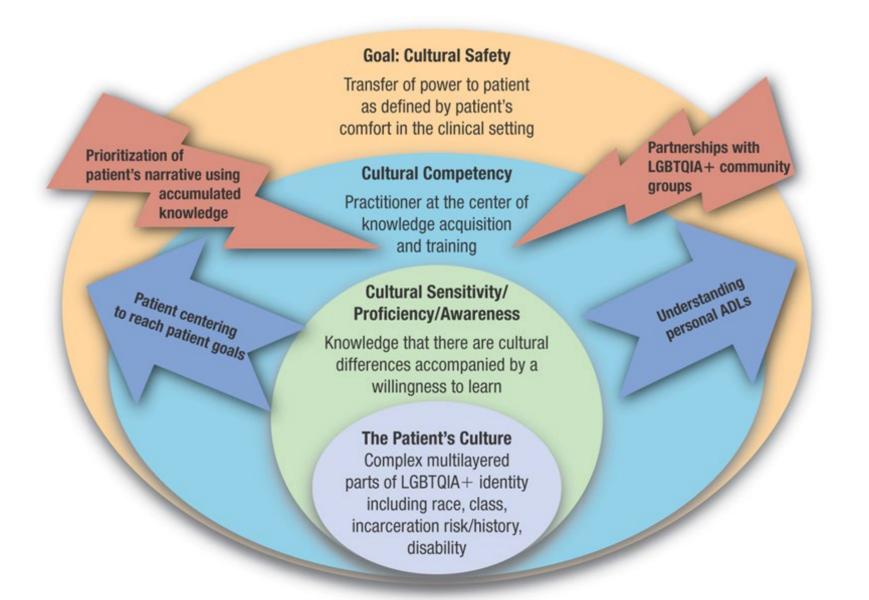
- Advertise practices as accepting of members of the LGBTQ community
- Educate staff and providers to be comfortable in discussing sexual orientation, gender orientation, and sexual practices
- Include members of the LGBTQ community as part of your staff and train your staff to refer to patients by their name and chosen descriptive pronouns (Mr., Ms., Mrs., etc.)
- Maintain an open mind and avoid judgment regarding sexual orientation and practices
- On intake forms, include the term partner in addition to the spouse; include transgender as an option
- Participate in referral programs such as the GLMA or GayHealth

Culturally Competent Care



- Post LGBTQ symbols and posters of ethnically and racially diverse transgender or same-sex couples
- Provide patient brochures on:
 - Sexually transmitted infection prevention
 - Substance abuse
 - Safe sex practices
 - Hormone therapy
- Provide waiting room magazines about the LGBTQ community
- Support observance of LGBTQ Pride Day, World AIDS Day, and National Transgender Day of Remembrance
- Train staff and provide continuing education on the care of LGBTQ patients







Connecting
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Thank you!

Questions/Discussion