

# PRESENTATION



***“I feel like I now have a body that fits me”:***  
**Sex and gender minority breast cancer**  
**patients choosing bilateral mastectomy**  
**without reconstruction**

**Maria T. Brown, PhD, LMSW**

**Assistant Research Professor, Aging Studies Institute**  
**David B. Falk College of Sport and Human Dynamics**  
**Syracuse University**

**Thursday,**  
**April 27, 2017**  
**1:00-2:00 pm**

**Room 448**  
**DHSP Building**  
**1640 West**  
**Roosevelt Road**

*Please RSVP and/or  
request access  
accommodations by  
contacting Anna Wong at  
awong27@uic.edu or  
(312) 413-1647  
by 4/20/17.*

Sexual and gender minority (SGM) breast cancer patients have begun embracing the choice to “go flat” or opt out of reconstruction after bilateral mastectomy, though little is known about this population. SGM breast cancer survivors were identified through purposive and referral sampling and invited to participate in a web-based survey containing both closed- and open-ended items. Of the 68 SGM breast cancer survivors aged 18–75 years who completed the survey between May 2015 and January 2016, 25% reported “going flat” (flattoppers). Bivariate analyses revealed that flattoppers were significantly more likely to have been diagnosed in the past five years, to identify as genderqueer, to have disclosed their sexual orientation or gender identity (SOGI) to providers, and to report participating in lesbian, gay, bisexual or transgender cancer support groups, compared to other participants. More flattoppers believed that SOGI mattered in terms of getting the support they needed regarding their cancer; this difference was not statistically significant. Thematic analysis of qualitative comments from flattoppers revealed themes related to reasons for making this treatment choice, interactions with healthcare providers around treatment choice, and physical and emotional outcomes of treatment choice. Providers would benefit from training about SOGI as they relate to treatment choices.