

Initiative aims to help gay health care

"We're not taught anything about this in professional schools"

By JOHN GILLIS Health Reporter

Halifax family physician Rod Wilson recalls one of his patients who developed a rash two or three years ago.

The man initially went to walk-in clinics, where he was uncomfortable telling a strange doctor he was gay, and was diagnosed with shingles and later a rash caused by poison ivy.

Dr. Wilson knew the patient's sexual orientation and when the man finally consulted him, he correctly diagnosed syphilis. The sexually transmitted infection is rarely seen these days, but Dr. Wilson knew there had been cases in Halifax at the time, particularly among men having sex with men.

"A lot of the (gay, lesbian, bisexual, transgendered and intersexed) community don't know what they may be at risk for and (health) providers don't know what they're at risk for," says Dr. Wilson, who's leading the GLBTI Initiative underway in the Capital district health authority. "And they're not talking to each other and not disclosing."

With funding from Health Canada, Capital health's primary-care division initiated a process to improve the accessibility of health care for these patients and provide more education for health professionals within the existing system.

Dr. Wilson envisions a "virtual community health clinic" with one or two nurses acting as safe intermediaries who could direct people anywhere in the district to the care they need based on a register of willing providers.

Most doctors want to treat their patients appropriately but lack the expertise to serve the particular needs of the GLBTI community, Dr. Wilson said.

"We're not taught anything about this in professional schools — medical, nursing — that there's any (health) issues around being gay and lesbian."

There's confusion over how often lesbians should have screening tests like pap smears and mammograms. Some evidence indicates women who do not have children, which includes most lesbians, are at increased risk for breast cancer.

It's often thought pap smears are unnecessary for women who do not have sex with men. But Dr. Wilson said: "Cancer of the cervix is not based on your orientation."

A group of six physicians with an interest in treating the transgendered population — transvestites, transsexuals and others — is a flagship example of what could stem from the initiative, Dr. Wilson said. The group came together during the early stages of the GLBTI initiative and now meets monthly.

"They're taking all the evidence that's out there and working to develop their own set of clinical guidelines. At the end of the day they'll have a supportive network that speaks to each other and actually be using evidence, whereas a year ago it was totally hit and miss."

Dr. Wilson said there is homophobia within the medical profession, as there is throughout society; people in nine focus groups during the consultation process said they'd been refused care because of sexual orientation.

A more widespread problem may be heterosexism — the assumption that all people one encounters are straight, said Dalhousie University professor Blye Frank, a member of the project advisory committee.

"What we'd want health-care providers to think about is that ... within their client or patient population they may have members of that community, or any client who comes through their door may in fact be gay, lesbian, bisexual," he said.

A gay Halifax man who didn't want his name used said he encountered that barrier time and time again while having things as routine as blood tests.

Required documents and questions from staff presumed patients were heterosexual.

"It made me have to come out to them at that point time in order to get the treatment or the service that I was looking for," the man said.

Just changing the language would make a big difference, he said.

"Whether it's the person at the front desk checking you in or it's the doctor who's asking questions in the office, open-ended questions are the only way I'm going to feel comfortable going into a hospital."

(jjillis@herald.ca)