

## Letter

### Cervical cancer in a female-to-male trans-sexual

Trans-sexuality involves the complex situation of gender identity [1–3]. Modern medical and surgical treatments enable affected individuals to undergo a genital change helping them to live a relatively satisfactory life. However, diseases related to their original gender may still occur.

In 1999, a 34 year old female patient started hormonal treatment for a female-to-male conversion. In February 2003, the patient was referred to our clinic for surgical treatment of trans-sexualism. There was a hypertrichosis of the arms and legs, male pubescence around the nipple, a clitoris peniformis, and ptotic breast. Gynaecological examination revealed a uterus in anteversion-flexion of normal size, and small ovaries. In speculo, the cervix appeared cylindrical with a quiescent transformation zone and the border of the epithelium had shifted into the cervical canal. Cytological smears did not show abnormality. An abdominal hysterectomy and bilateral adnexectomy was performed, as well as bilateral subcutaneous mastectomy followed by areolar re-modelling. The post-operative course was uneventful. To our surprise, the pathology analysis of the cervix revealed localised spots of squamous carcinoma *in situ*.

In the last 4 years, we have performed 150 female-to-male transforming operations. The presented case is the first that we have seen and, to the best of our knowledge, also the first ever published with (pre-invasive) cervical neoplasia. Thus, physicians involved in the treatment of trans-sexuality should remain alert

for the occurrence of disease related to the original gender of the patient.

### References

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