

JUST WHAT THE DOCTOR ORDERED

Portland physician takes on leadership role in sexual minority health care by Jack Turteltaub

After graduating from high school in Medford, Melinda Muller had no way of knowing her sexual orientation would become a critically important issue in her work as well as her life. She knew she wanted to conduct medical research. But she didn't know she was a lesbian. In fact, she was engaged to marry a longtime boyfriend.

Today, just six years after completing medical school, Muller is not only a practicing physician specializing in internal medicine, she is also an out lesbian who is active in enhancing sexual minority health care. She serves as treasurer of the Gay and Lesbian Medical Association, a national nonprofit with a \$1.3 million budget.

Muller admits she can't quite believe the responsibilities she has taken on. "It's been amazing this early in my career managing something like this." She modestly credits the mentoring she received from GLMA members in helping her do the job.

She became a member of the organization just eight years ago while in medical school. One of her mentors, Dr. Jocelyn White, urged the budding physician to attend GLMA's annual conference, which just happened to be in Portland that year.

Muller became interested and joined. A few years ago, while still a resident, she was encouraged by White to apply to become a board member.

Last year, Muller was asked to serve as treasurer. Although she is not paid, she says she's had to work hard to understand accounting and business issues that she didn't study in her medical training.

Muller talks enthusiastically about GLMA and its mission. The San Francisco-based organization was founded in 1981 to focus on AIDS but gradually enlarged its scope.

It now holds annual conferences providing continuing education to physicians from around the world; publishes a peer-reviewed, multidisciplinary journal; and lobbies federal officials to address sexual minority health issues. GLMA's free referral service connects consumers with professionals who identify as gay or gay-friendly.

How did Muller's personal path lead to medicine? A grandfather died of leukemia when she was 12. Muller herself was diagnosed at age 16 with a minor clotting disorder. Originally planning to work toward a Ph.D. so she could study blood diseases, she started her undergraduate work at Southern Oregon State College in Ashland, then moved to Portland to complete her bachelor's degree and work as a medical technologist for Legacy Health Systems.

One of Muller's early mentors in Portland, Dr. Scott Goodnight, persuaded her to apply for medical school. He convinced her she would have more freedom to choose what she wanted to do if she had the degree.

Although Muller was in a stable relationship, she was not an out lesbian when she entered Oregon Health Sciences University. She was worried that if she was too candid about

her sexual orientation, her grades and academic standing might be adversely affected.

But it was 1992, and Ballot Measure 9 changed Muller's mind.

"I got mad," she says. "There was no way I could keep silent. If that passed, I would not be

able to talk about who I was. The school would have to teach that I was a deviant."

Muller worked to defeat Measure 9. Her self-outing in medical school was a pleasant surprise. "I became the poster child for gays and lesbians in my class," she laughs.

She also became directly involved in addressing gay and lesbian health issues. A second-year medical seminar on underserved populations did not include any information about sexual minorities. Muller and several gay physicians on the faculty went to the instructors and asked for a segment on these issues.

Not only did she get her wish, she was asked to become the instructor for a section added to the course. Now, all second-year medical students at OHSU spend at least two hours learning about gay, lesbian, bi and trans health issues.

Some might receive inappropriate health care. For example, she says, some lesbians agree to receive birth control simply to avoid arguments with their physicians.

Muller also notes nongay physicians tend to have false assumptions about sexual minority patients. For example, some assume all gay men practice unsafe sex and automatically need to be tested for HIV infection. Muller also points out the hostility directed at trans people, sometimes even within the gay and lesbian health community.

Many lesbians do not receive the appropriate screening tests for breast and cervical cancer because of myths about their risks. As a result, they might be diagnosed later for such life-threatening conditions, resulting in a worse prognosis.

Despite these obstacles, Muller is comfortable as an openly lesbian physician and optimistic about herself and the problems being addressed by GLMA. She wants to continue building her private practice, especially increasing the number of sexual minority patients she serves. She also wants to expand and improve the curriculum in the residency program, adding more training in gay and lesbian health issues such as HIV infection and lesbian smoking.

Not that she isn't busy enough already. The young doctor with the friendly smile plays the oboe and recently started running marathons.

For the girl from Medford who wanted to understand blood diseases and help people, she's accomplished many of her goals. But the sky's still the limit! 

For more information about the GAY AND LESBIAN MEDICAL ASSOCIATION call 415-255-4547 or visit the Internet site www.glma.org. To reach Melinda Muller call 503-413-7074.

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Dr. Melinda Muller says sexual minorities face a number of health care barriers

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What about her own personal experience with homophobia in medicine? Muller explains she generally has felt supported in her career as a lesbian.

"I haven't noticed any real discrimination against me," she says carefully. However, Muller learned through friends that some classmates were uncomfortable with the subject of sexual orientation at the time she came out.

Although she feels positive about her long-term employer, Legacy Health Systems, she

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