

Summary of Australian recommendations for anal cancer screening in PLHIV

1. Who to screen

People living with HIV (PLHIV) who are:

- Gay, bisexual and other men who have sex with men (GBM) and trans women (TW) over 35 years of age; or
- Women (not TW) and men (not GBM) over 45 years of age.

2. How to screen

Anal swab for HRHPV testing
+

Perform DARE (annual)

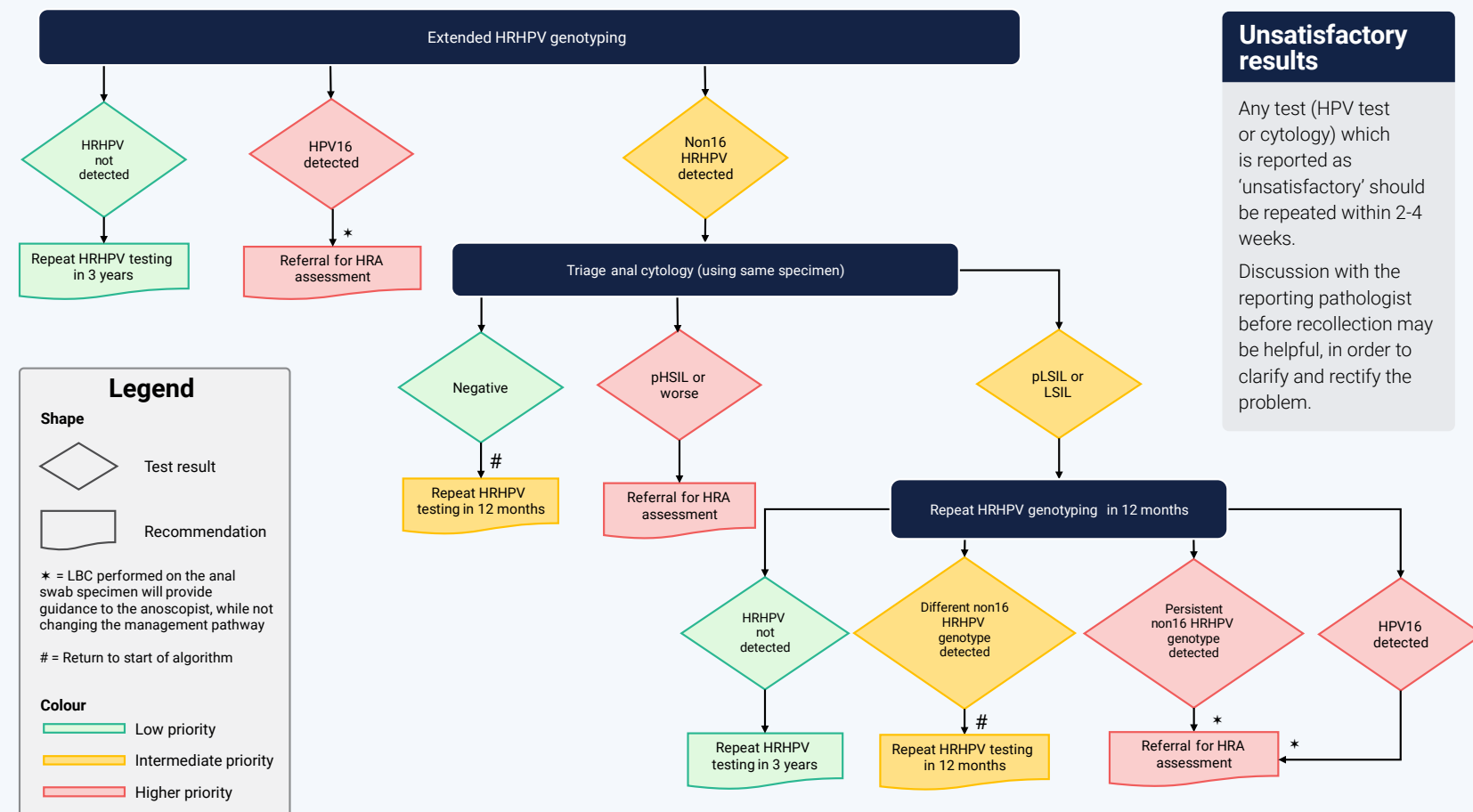
One clinician collected sample required to perform all screening tests -moistened flocked swab eluted into LBC vial prior to DARE.

Information

- High Resolution Anoscopy (HRA) – limited capacity in Australia
- No HRA available locally – screening remains annual DARE + symptom awareness**
- Screening services should prioritise + current smoker / nadir CD4<200 / older age / anal symptoms/ additional immunosuppressive agents

** people with anal lumps suggestive of cancer require immediate referral to surgeon.

3. Screening algorithm



Unsatisfactory results

Any test (HPV test or cytology) which is reported as 'unsatisfactory' should be repeated within 2-4 weeks.

Discussion with the reporting pathologist before recollection may be helpful, in order to clarify and rectify the problem.

Definitions

HIV = human immunodeficiency virus, **HPV** = human papillomavirus, **HRA** = high-resolution anoscopy, **HSIL** = high-grade squamous intraepithelial lesion, **HRHPV** = high-risk human papillomavirus, **LBC** = liquid-based cytology, **LSIL** = low-grade squamous intraepithelial lesion, **GBM** = Gay, bisexual and other men who have sex with men, **MSW** = men who have sex with women, **PLHIV** = People living with HIV, **pLSIL** = possible low-grade squamous intraepithelial lesion, **TW** = trans women