

Outcomes of an Anal Pap Screening Program During the COVID Pandemic

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Background

Annual anal pap smears have been recommended in some guidelines for MSM living with HIV. The practicality of this strategy, especially during the pandemic, is unknown. A recent ANCHOR Study presented at CROI showed a 57% reduction in mortality with early screening and treatment¹.

Methods

We performed a chart review of all MSM living with HIV who received at least one anal pap smear at the HIV clinic in London, Ontario between January 2018–October 2021. During the pandemic period a large proportion of physician visits were virtual, however patients who were eligible were booked for in person visits with a nurse for anal pap screening. Patients with LSIL or higher-grade lesions were referred to colorectal surgery.

Results

301 anal pap smears were done in 200 unique patients. 17/200(8.5%) patients had at least one anal pap showing LSIL or higher-grade lesion, of which 13/17(76.5%) were detected on the first anal pap. Of 32 patients who had a baseline normal anal pap which was repeated within 9-15 months, 2(6%) progressed to LSIL or a higher-grade lesion within that time. 12/17(70%) patients attended a colorectal surgery appointment for anoscopy, and 7 of these patients required surgery. 5 patients declined referral. 3 patients had their surgery delayed more than 6 months due to COVID shutdowns. 96/386(25%) of eligible patients had anal paps done in the 18 months prior to the pandemic (Oct 2018-March 2020) and 154/386(40%) patients were tested in the subsequent 18 months. No patients developed new metastatic anal cancer during this period.

Conclusions

Anal pap smears were able to be performed within the HIV clinic setting even during the COVID-19 pandemic. The rate of patient screening actually rose during this time with many patients attending with the nurse specifically to have the anal pap, but further efforts to increase the percentage of patients screened are warranted. Patients were seen in a timely manner by colorectal surgery for anoscopy, but some patients experienced marked delays in surgery due to the pandemic. One patient died due to anal cancer diagnosed prior to the onset of the screening program.

Figure 1. anal paps done during pre-pandemic and pandemic period (386 eligible patients)

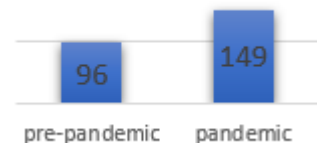


Table 1. anal paps and results since inception of program

Number of patients screened	200
Number of paps done	301
Patients with LSIL or higher	17 (8.5%)
Patients with LSIL or higher on first pap	13 (76.5%)
Baseline normal pap repeated within 9-15 months progressed to LSIL or higher	2 (6%)

Ongoing Efforts

There was a 17% increase in insufficient anal paps starting in March 2020. A quality improvement initiative to place the swabs higher in the anal canal was initiated. Results are pending.

References

1 Palefsky J et al. Treatment of anal high-grade squamous intraepithelial lesions to prevent anal cancer. CROI 2022. 12-16 February 2022, virtual. Special Session Oral presentation 106