Screening for Anal Cancer

Brown Health Services Patient Education Series

Why screen for anal cancer?

The early detection of abnormal anal cells allows for earlier treatment. Earlier treatment can prevent progression of abnormal anal cells to invasive squamous cell carcinoma. Cases of anal cancer are increasing, particularly among patients who practice receptive anal intercourse, have HIV or have a history of cervical dysplasia. The practice of performing anal pap smears arose from findings that early detection of abnormal cervical cells allows for earlier treatment and a reduction in cervical cancer.

Risk factors for anal cancer include:

- History of HIV infection
- History of receptive anal intercourse
- History of HSIL (or more severe) cervical dysplasia
- Receiving an organ transplant

When is screening for anal cancer recommended?

Anal cancer screening is not recommended for the general population. The guidelines for screening people at higher risk for anal cancer are:

At age 35:

- cisgender men who have sex with men (MSM) and are HIV positive
- transgender women (TW) who are HIV positive

At age 45:

- Cisgender MSM and TW who are HIV negative
- cisgender men who have sex with women and are HIV positive
- cisgender women who are HIV positive

At age 45 and up for people with a history of:

- cervical/vaginal HSIL or cancer
- perianal warts
- persistent HPV 16
- autoimmune conditions

Someone who has a precancerous lesion or vulvar cancer is advised to be screened within one year of diagnosis regardless of their age. Someone who has had solid organ transplantation is advised to be screened within 10 years of receiving the transplanted organ.

What is involved in anal cancer screening?

Anal Cytology is also known as an anal Pap smear; this test collects cells from the anus to be looked at in a lab. To perform the anal Pap smear:

- A small moistened swab is inserted 5-6 cm into the anus
- The swab is rotated while slowly inserting and withdrawing for 15-20 seconds
- The swab is put into a liquid preservative
- The patient takes the sample to the lab

Do not use an enema or insert anything in the rectum for 24 hours before the exam. Lubricants should not be used before the test because they can interfere with the results. The swab must be

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done before a digital rectal exam. For a Digital Rectal Exam (DRE), a healthcare provider inserts their gloved finger into the anus to detect any lumps, warts or ulcerations in the walls.

What are the possible results of screening?

- Normal
- ASCUS, LSIL or HSIL

Any abnormal results require a referral to a colorectal surgeon for high-resolution anoscopy.

Reference: International Anal Neoplasia Society's consensus guidelines for anal cancer screening, December 2023