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

When is screening for anal cancer recommended?

Anal cancer screening is not recommended for the general population. In people at higher risk for anal cancer screening tests may help to find anal cancer earlier. Those at high risk who may benefit from screening include:

- People who engage in receptive anal sex
- People with a history of cervical or vulvar cancer
- HIV-positive status
- Anyone who has received an organ transplant

There are no official guidelines for anal cancer screening, however experts agree that screening those patients at high risk will help prevent anal

cancer or detect it early. Patients with HIV should be offered screening annually.

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 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.