

Experience of Anal Cancer Screening in a Ryan White HIV/AIDS Program Clinic

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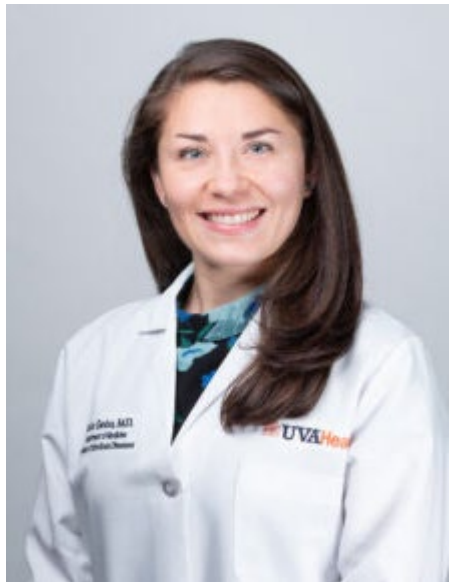
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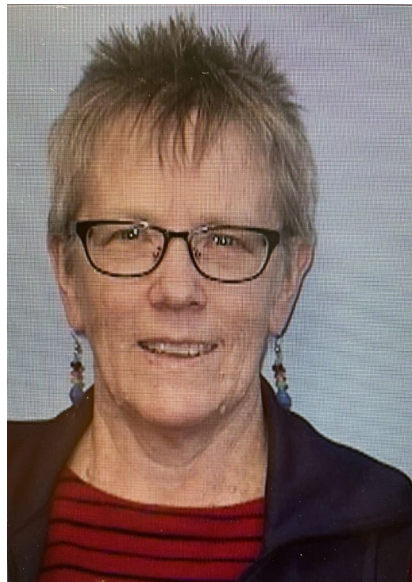
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NATIONAL
RYAN WHITE
CONFERENCE
ON HIV CARE & TREATMENT

Our panel



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HRA RN Clinic Care Coordinator



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No presenters have relevant financial interests to disclose.

Disclosure will be made when a product is discussed for an unapproved use.

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Learning Objectives

At the conclusion of this activity, participants will be able to:

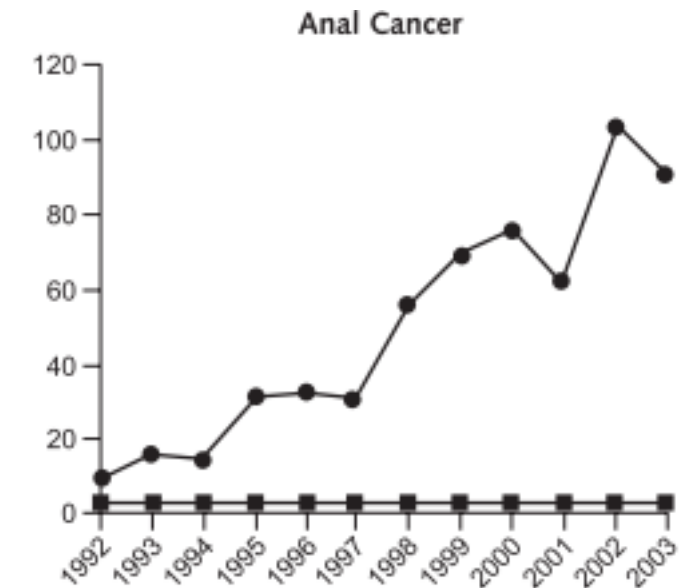
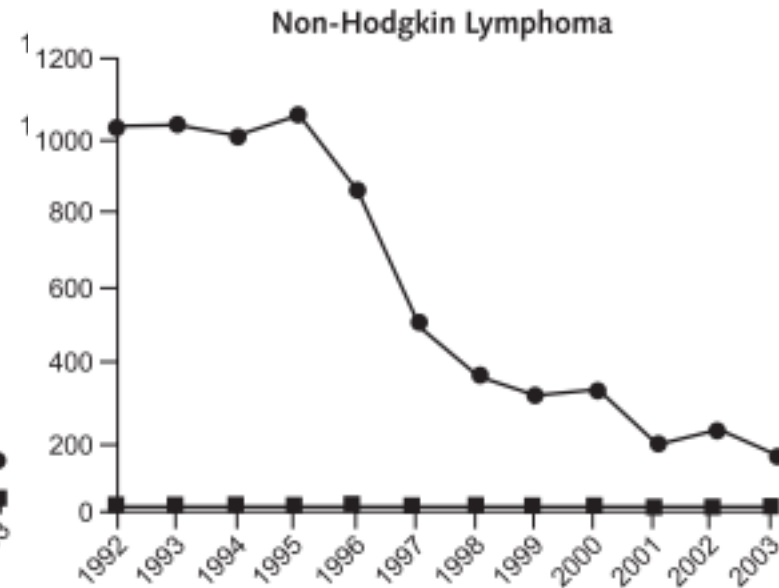
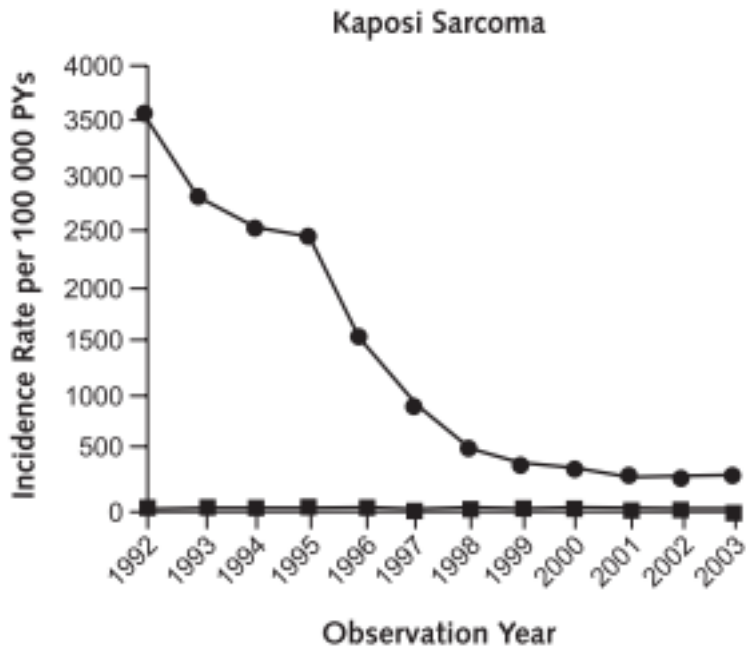
1. Appreciate the importance of a multidisciplinary approach to building a comprehensive anal cancer screening clinic
2. Discuss the importance of monitoring and evaluating the impact of a screening program
3. Understand how consumer and provider feedback can improve a screening program

Background

Why is anal cancer screening important for people living with HIV (PLWH)?

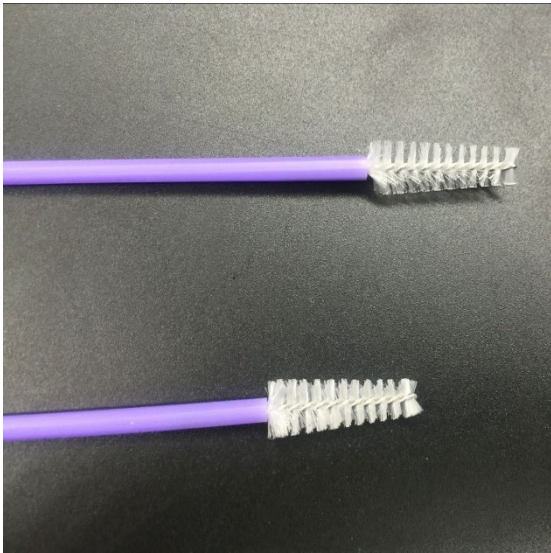
Incidence of Types of Cancer among HIV-Infected Persons Compared with the General Population in the United States, 1992–2003

Pragna Patel, MD, MPH; Debra L. Hanson, MS; Patrick S. Sullivan, DVM, PhD; Richard M. Novak, MD; Anne C. Moorman, BSN, MPH; Tony C. Tong, MS; Scott D. Holmberg, MD, MPH; and John T. Brooks, MD, for the Adult and Adolescent Spectrum of Disease Project and HIV Outpatient Study Investigators*

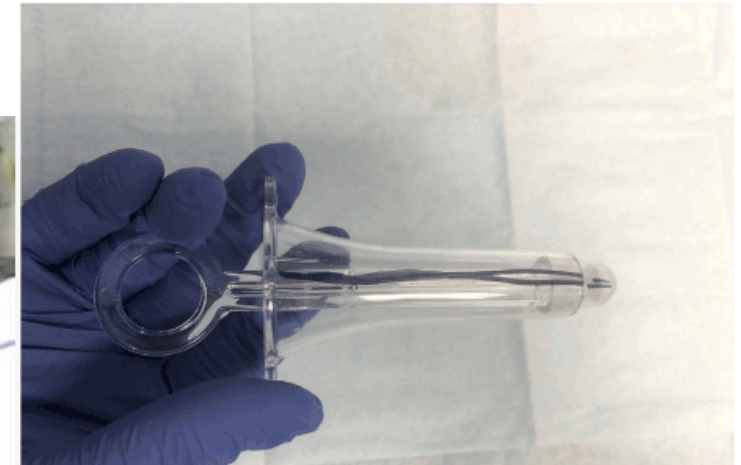


Anal Cancer Screening Algorithm

Anal Pap smear



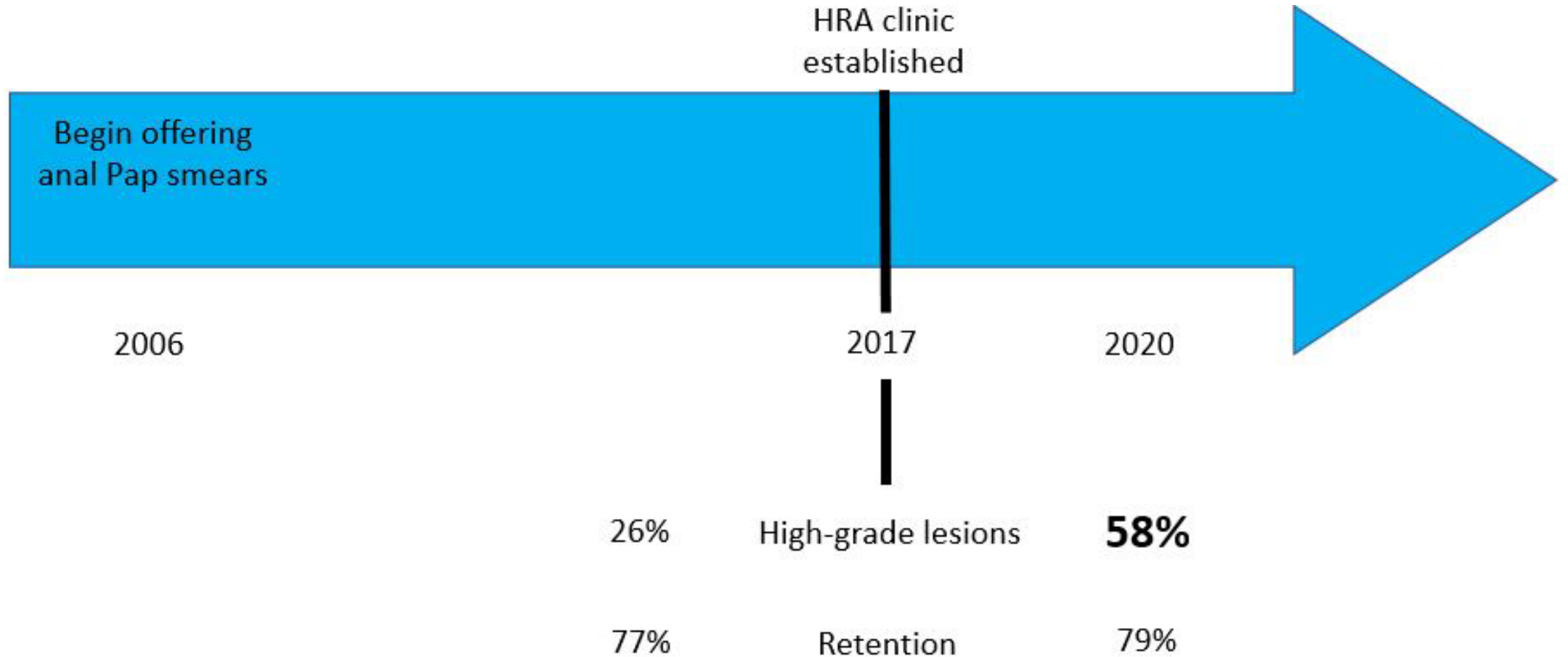
High resolution anoscopy



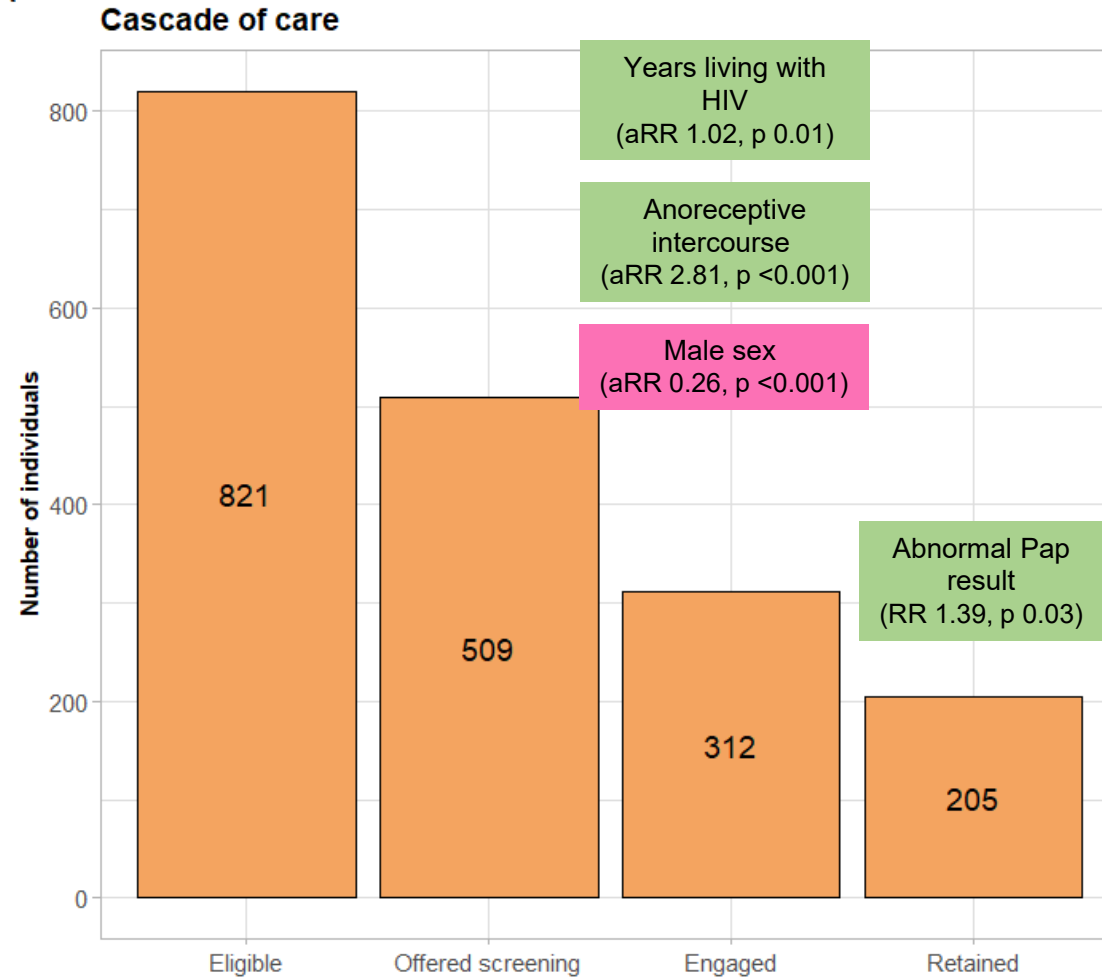
Evaluating our clinic

What have we learned about anal cancer screening since the establishment of the integrated HRA clinic?

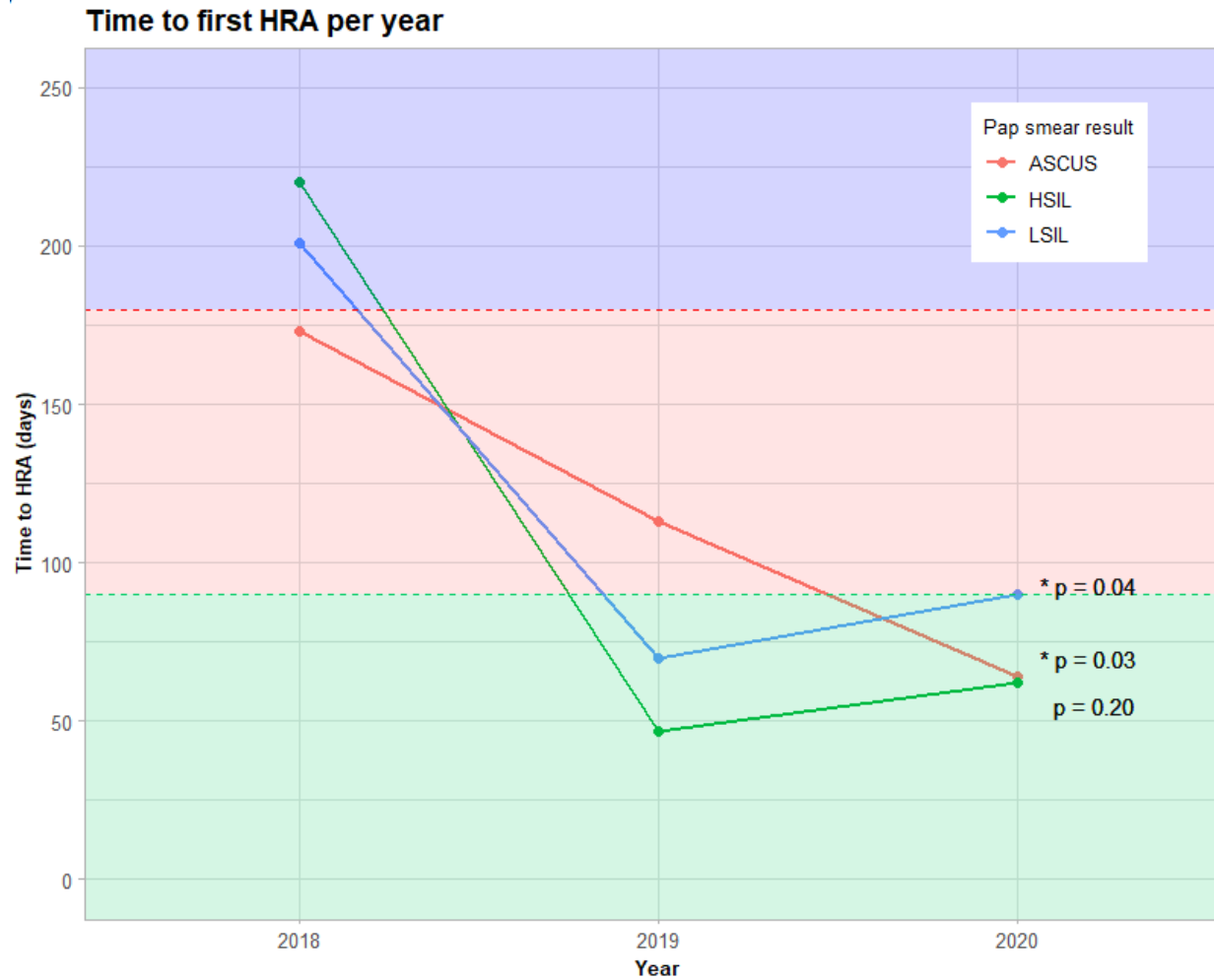
HRAs are more sensitive



Retention > Engagement



Time from Abnormal Cytology to HRA Improved



Motivators

Engaging community Protection Quality of life
Trust in clinic Family history of cancer
Offered Advocate Layman's terms
Bundled care Health
Training Interested Self-collection
Prevention Options
Knowledge is power Awareness
Vaccination

Barriers

Transportation Private
Invasive
Uncomfortable Stigma
Unaware Overwhelmed
Doubts
Comorbidities COVID
Cancer
Hospital stays Fear

In summary

- Clinics that offer HRA are more effective than alternative models in detecting high-grade anal lesions
- A full-time nurse care coordinator is crucial in maintaining adequate follow up and retention in care
- Bundling anal cancer screening services with cervical cancer screening can be a powerful tool to improve engagement
- It is important to elicit patient perspectives in order to improve messaging and procedural practices

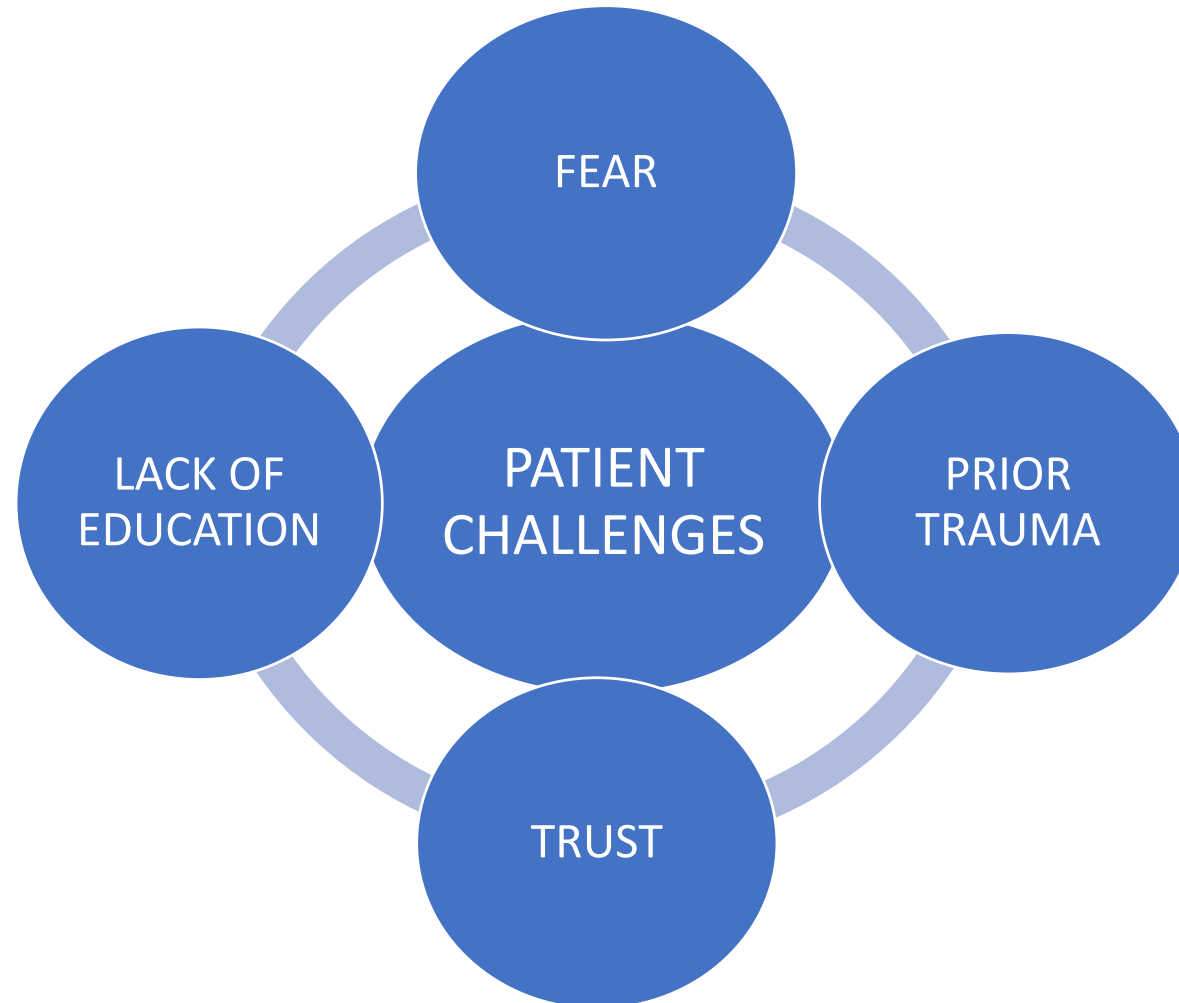
The Importance of Care Coordination

- Why a Full-time RN Care Coordinator Is Needed:
 - Over 200 patients
 - Scheduling patients for anal pap or HRA
 - Letters did not work: 60 sent - 1 response
 - Use of PositiveLinks (PL) and MyChart in addition to phone calls
 - HRA slots are 2 hours so a NO SHOW is a huge loss of time
 - Set-up for->Consent->Pre-medicate->Assist with procedures->Clean-up
 - Patient education: HRA Video (in English and Spanish)
 - Coordinate care if on anticoagulants/anti-platelets
 - Coordinate with Case Managers to arrange transportation
 - Coordinate with Colorectal Surgery Team for HRAs in the OR

HRA RN Care Coordination

- Phone Calls
 - Reminder calls week prior to appointment (both anal pap and HRA)
 - Ensure patient has driver for HRA procedure as give Xanax...
 - Remind patient they can eat and drink as normal, no dietary restrictions
 - No anal sex, no douching, nothing in anus 48 hours prior to appointment
 - Call day after procedure to see how patient is doing.
 - HRA Video: Encourage people to watch and call with questions: Some people decline
- Language Barriers:
 - Important to educate in patient's native language
 - HRA video is available in English and Spanish
 - At time of the HRA procedure in person interpretation is best

Potential Challenges



Potential Challenges 2

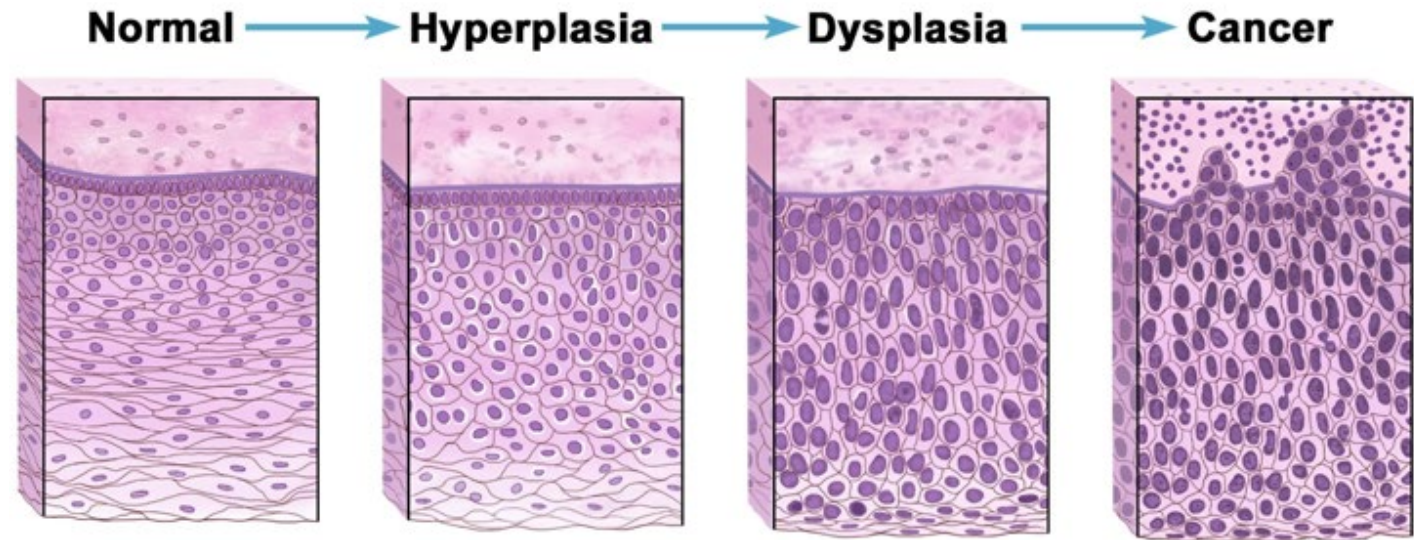
- **Fear**
 - Unknown
 - Invasive procedure
 - Pain?
 - Not familiar for men as not used to bundled care like women
- **Prior Sexual Trauma**
 - Intimate exam
 - May have a preference for male or female provider
- **Lack of trust**
 - Not regular ID or PCC provider
 - May need to schedule appt to meet provider / nurse prior to the procedure
 - Talk to nurse on the phone prior to procedure
- **Lack of education**
 - New procedure that they have not had before
 - Relationship between anal dysplasia and HPV and anal sexual intercourse
 - Dysplasia versus Cancer

Dysplasia versus Cancer...

How to Explain to your patient

- Dysplasia is a term used to describe the presence of abnormal cells within a tissue or organ.
- Dysplasia is not cancer, but it may sometimes become cancer if left untreated.
- Dysplasia can be mild, moderate, or severe
 - how abnormal the cells look under a microscope
 - how much of the tissue or organ is affected
- Dysplasia may progress to Anal cancer if not treated **over a period of years.**

Normal Cells May Become Cancer Cells



Training opportunities

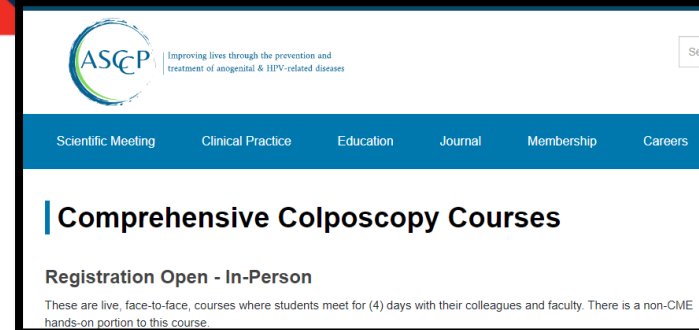
- ASCCP: anoscopy course
- IANS: beginner and advanced HRA courses
 - Currently held virtually: 8 self-paced modules & Live Q&A sessions
 - In-person training: lectures and procedural simulations
- ASCRS: offers courses and webinars
- Proficiency training/credentialling



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 Infectious Diseases
 Wake Forest



Sook Hoang, MD
 Colorectal Surgery



Ongoing professional development

- Case review with peers in the HRA program
- UVA Colposcopy conference: Pathology, OB/GYN, ID, and trainees
- UVA Tumor board conference: Pathology, Medical Oncology, Colorectal Surgery,
- IANS
 - WebRounds: monthly educational sessions on relevant topics
 - Online discussion forum: for group-based clinical or procedural questions
 - Online consultation: for clinical consults

CONSENSUS TERMINOLOGY

2016 IANS International Guidelines for Practice Standards in the Detection of Anal Cancer Precursors

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Summary

- Nurse Care Coordination helps minimize loss-to-follow-up
- Anal cancer screening and HRAs pose many challenges for our patients, and Nurse Care Coordination is essential to help them navigate this.
- Education around anal cancer screening, evaluation, and treatment through HRA is paramount for patients and their families.
- HRA procedural training is available for Infectious Disease clinicians and others, regardless of prior background training
- There are numerous creative options for local and national professional development opportunities.

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Wendy Novicoff, David Martin, Marieke Jones



Resources

- Patient education: HRA Video
 - English - https://m.youtube.com/watch?v=RZZ5_0Ecd9c
 - Spanish - <https://m.youtube.com/watch?v=P5Y56bxuweo&t=9>
- American Society for Cervical Cancer Prevention: <https://www.asccp.org/Default.aspx>
- International Anal Neoplasia Society: <https://www.iansoc.org/>
- American Society of Colon and Rectal Surgeons: <https://fascrs.org/>

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