

## How do we prevent anal cancer in people living with HIV?

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Although anal cancer is rare in the general population, its incidence is unacceptably high in people living with HIV. Among people living with HIV older than 45 years, incidence rates are 100 per 100 000 person years in men who have sex with men (MSM), 37 per 100 000 person years in men who have sex with women (MSW), and 30 per 100 000 person years in women.

Anal cancer screening has been recommended by several organisations to reduce anal cancer morbidity and mortality.

Screening includes a digital anal rectal exam (DARE) to detect masses associated with cancers and collection of anal swabs for cytology or human papillomavirus.

Patients with abnormal screening are then referred for high-resolution anoscopy (HRA), a procedure similar to colposcopy in which the anus is examined under magnification to detect anal cancer precursors (histological high-grade squamous intraepithelial lesions) by HRA-directed biopsies. Histologically proven high-grade squamous intraepithelial lesions can then be treated to decrease the risk of progression to anal cancer.