

Prevalence of abnormal anal pap smear in HIV positive women diagnosed with Vaginal Intraepithelial Neoplasia (VaIN)

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The authors have no financial conflicts to
disclose





Introduction

Persistent HIV infection is considered a necessary condition for the development of VaIN

Immunosuppression further increases the risk of vaginal neoplasia

VaIN is often associated with CIN and VIN

The prevalence of VaIN and anal HPV infection is unknown





Objective

To evaluate the prevalence of abnormal anal cytology (anal pap smear) in a cohort of women living with HIV, diagnosed with Vaginal Intraepithelial Neoplasia (VaIN)





Method

Retrospective chart review of 38 patients with
biopsy-proven VaIN

UM/JMH Ob/Gyn Special Immunology HIV clinic
January 2009 to June 2016

Anal and cervico/vaginal pap smears reviewed

Data was analyzed using descriptive statistics





UM/JMH Ob/Gyn Special Immunology Clinic

Gynecological and Obstetrical Care: Women Living with HIV

- Cervico-vaginal cytology screening
- Colposcopy and biopsies
- Anal cytology screening

Initiated in 1985

Academic medical center

900 women screened annually

- 800 cervico-vaginal Paps / 300 Colposcopies / 600 Anal Paps

Partially funded: HRSA Ryan White Award





Results (n=38)

Age: 57.2 (SD =/- 6.0)

Race:

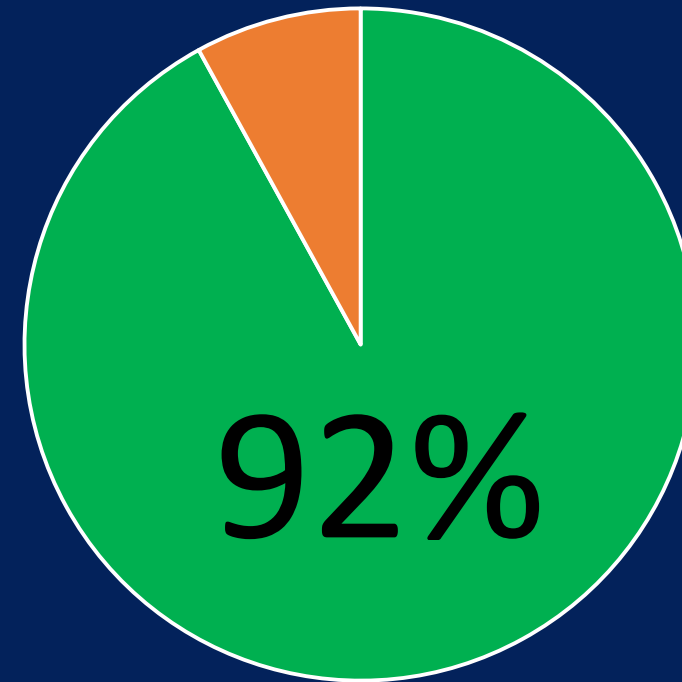
- Non-Hispanic blacks 22 (58%)
- Hispanic 2 (5%)
- Caribbean 14 (37%)





Results

Hysterectomy



■ Yes ■ No





Results

Hysterectomy

29% Cervical dysplasia



Yes No





Results (n=38)

Cervico/Vaginal Cytology:

73% Abnormal

- Negative/HPV 10 (26%)
- VaIN-I 21 (55%)
- VaIN-II 2 (5%)
- VaIN-III 3 (8%)
- CIS 2 (5%)





Results

Anal Cytology (Anal pap): 36.8% LSIL or Higher

- Negative 2 (5%)
- ASCUS 22 (58%)
- LGSIL 12 (32%)
- HGSIL 2 (5%)





Conclusions

Abnormal anal pap smear are frequently present
among women living with HIV,
diagnosed with VaIN.





Recommendation

Anal pap smear screening with subsequent high resolution anoscopy (HRA) when indicated should be considered in HIV positive patients diagnosed with VaIN



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Thank you



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