

## Cervical cancer screening recommendations for non-HIV immunocompromised patients

Risk group category	Recommendation
Solid organ transplant	<ul style="list-style-type: none"> <li>▪ Cytology is recommended if younger than 30 years.</li> <li>▪ Co-testing is preferred, but cytology is acceptable if 30 years or older.</li> <li>▪ If using cytology alone, perform annual cervical cytology. If results of 3 consecutive cytology results are normal, perform cytology every 3 years.</li> <li>▪ If using co-testing, perform baseline co-test with cytology and HPV. If result of cytology is normal and HPV is negative, co-testing can be performed every 3 years.</li> <li>▪ Continue screening throughout lifetime (older than 65 years). Discontinue screening based on shared discussion regarding quality and duration of life rather than age.</li> <li>▪ Screen patients on dialysis and posttransplant similarly.</li> </ul>
Allogeneic hematopoietic stem cell transplant	<ul style="list-style-type: none"> <li>▪ Cytology is recommended if younger than 30 years.</li> <li>▪ Co-testing is preferred, but cytology is acceptable if 30 years or older.</li> <li>▪ If using cytology alone, perform annual cervical cytology. If results of 3 consecutive cytology results are normal, perform cytology every 3 years.</li> <li>▪ If using co-testing, perform baseline co-test with cytology and HPV. If result of cytology is normal and HPV is negative, co-testing can be performed every 3 years.</li> <li>▪ Continue screening throughout lifetime (older than 65 years). Discontinue screening based on shared discussion regarding quality and duration of life rather than age.</li> <li>▪ For HSCT patients who develop a new diagnosis of genital GVHD or chronic GVHD, resume annual cervical cytology until 3 consecutive normal results at which time perform cytology every 3 years, or perform an initial baseline co-test and, if cytology is normal and HPV is negative, perform co-testing every 3 years.</li> </ul>
Inflammatory bowel disease on immunosuppressant treatments	<ul style="list-style-type: none"> <li>▪ Cytology is recommended if younger than 30 years.</li> <li>▪ Co-testing is preferred, but cytology is acceptable if 30 years or older.</li> <li>▪ If using cytology alone, perform annual cervical cytology. If results of 3 consecutive cytology results are normal, perform cytology every 3 years.</li> <li>▪ If using co-testing, perform baseline co-test with cytology and HPV. If result of cytology is normal and HPV is negative, co-testing can be performed every 3 years.</li> <li>▪ Continue screening throughout lifetime (older than 65 years). Discontinue screening based on shared discussion regarding quality and duration of life rather than age.</li> </ul>
Inflammatory bowel disease not on immunosuppressant treatments	<ul style="list-style-type: none"> <li>▪ Follow general population screening guidelines.</li> </ul>
Systemic lupus erythematosus and rheumatoid arthritis on immunosuppressant treatments	<ul style="list-style-type: none"> <li>▪ Cytology is recommended if younger than 30 years.</li> <li>▪ Co-testing is preferred, but cytology is acceptable if 30 years or older.</li> <li>▪ If using cytology alone, perform annual cervical cytology. If results of 3 consecutive cytology results are normal, perform cytology every 3 years.</li> <li>▪ If using co-testing, perform baseline co-test with cytology and HPV. If result of cytology is normal and HPV is negative, co-testing can be performed every 3 years.</li> <li>▪ Continue screening throughout lifetime (older than 65 years). Discontinue screening based on shared discussion regarding quality and duration of life rather than age.</li> </ul>
Rheumatoid arthritis not on immunosuppressive treatments	<ul style="list-style-type: none"> <li>▪ Follow general population screening guidelines.</li> </ul>
Type 1 diabetes mellitus	<ul style="list-style-type: none"> <li>▪ Follow general population screening guidelines.</li> </ul>

Cervical cancer screening for patients with immunosuppression is initiated no sooner than 21 years of age. This is similar to patients without immunosuppression. <sup>[1]</sup>

HPV: human papillomavirus; HSCT: hematopoietic stem cell transplantation; GVHD: graft versus host disease.

## Reference:

1. Guidelines for the Prevention and Treatment of Opportunistic Infections in Adults and Adolescents with HIV. Centers for Disease Control and Prevention. Available at [https://clinicalinfo.hiv.gov/sites/default/files/guidelines/documents/Adult\\_OI.pdf](https://clinicalinfo.hiv.gov/sites/default/files/guidelines/documents/Adult_OI.pdf) (Accessed on September 13, 2021).

Table adapted from: Moscicki AB, Flowers L, Huchko M, et al. Guidelines for cervical cancer screening in immunosuppressed women without HIV infection. *J Low Genital Tract Dis* 2019; 23:87. DOI: 10.1097/LGT.0000000000000468. Copyright © 2019 ASCCP. Reproduced with permission from Wolters Kluwer Health. Unauthorized reproduction of this material is prohibited.

Graphic 129717 Version 3.0