



# CLINICAL GUIDELINES PROGRAM

NEW YORK STATE DEPARTMENT OF HEALTH AIDS INSTITUTE | HIV • HCV • SUBSTANCE USE • LGBT HEALTH

## Comprehensive Primary Care for Adults With HIV

December 2022

**Table 4: Routine Screening for Adults With HIV**

Type of Screening [a]	Recommended Guideline(s) [b]	Age of Screening Initiation, Frequency, and Comments
Breast cancer [c]	<ul style="list-style-type: none"> <li>USPSTF: <a href="#">Breast Cancer: Screening</a> (2016)</li> <li>USPSTF: <a href="#">BRCA-Related Cancer: Risk Assessment, Genetic Counseling, and Genetic Testing</a> (2019)</li> </ul>	<ul style="list-style-type: none"> <li>Discuss screening with patients who are 50 to 75 years old every 2 years.</li> <li>Evidence of benefit is insufficient for patients who are &gt;75 years old.</li> <li>Begin screening as early as age 40 years for patients with family history of breast cancer (parent, sibling, or child).</li> </ul>
Colon cancer [c]	USPSTF: <a href="#">Colorectal Cancer: Screening</a> (2021)	<ul style="list-style-type: none"> <li>Screen patients who are 45 to 75 years old: frequency depends on screening method. Confirm annually that appropriate testing has been completed.</li> <li>In patients who are &gt;75 years old, the decision to perform screening should be individualized.</li> </ul>
Cervical cancer [c]	NYSDOH AI: <a href="#">Screening for Cervical Dysplasia and Cancer in Adults With HIV</a> (2022)	<ul style="list-style-type: none"> <li>Begin screening at 21 years old or within 2 years of onset of sexual activity.</li> <li>Continue screening for patients ≥65 years old; however, consider life expectancy and risk in shared decision-making with patient regarding continued screening.</li> <li>Recommendations for cervical cancer screening in patients with HIV are not the same as those for people who do not have HIV.</li> </ul>
Anal dysplasia and cancer	NYSDOH AI: <a href="#">Screening for Anal Dysplasia and Cancer in Patients With HIV</a> (2022)	<ul style="list-style-type: none"> <li>Screen MSM, cisgender women, transgender women, and transgender men who are ≥35 years old.</li> <li>Engage younger patients in shared decision-making regarding screening or deferral until age 35 years.</li> <li>Recommendations for anal cancer screening in patients with HIV are not the same as those for people who do not have HIV.</li> </ul>
Lung cancer [c]	USPSTF: <a href="#">Lung Cancer: Screening</a> (2021)	<ul style="list-style-type: none"> <li>Screen patients who are 55 to 80 years old who have a 20 pack-year history and currently smoke or have quit within the past 15 years.</li> </ul>
Prostate cancer [c]	USPSTF: <a href="#">Prostate Cancer: Screening</a> (2018)	<ul style="list-style-type: none"> <li>In patients who are 55 to 69 years old, the decision to perform screening should be individualized.</li> <li>Engage in shared decision-making for patients who are ≥70 years old.</li> </ul>
Bone density	USPSTF: <a href="#">Osteoporosis to Prevent Fractures: Screening</a> (2018)	<ul style="list-style-type: none"> <li>Some experts recommend baseline bone densitometry screening for osteoporosis in postmenopausal cisgender women and in cisgender men and transgender women ≥50 years old who have HIV [Thompson, et al. 2021; Aberg, et al. 2014].</li> <li>See NYSDOH AI guideline <a href="#">Selecting an Initial ART Regimen &gt; Special Considerations for Comorbid Conditions</a>.</li> </ul>
Abdominal aortic aneurysm	USPSTF: <a href="#">Abdominal Aortic Aneurysm: Screening</a> (2019)	<ul style="list-style-type: none"> <li>Screen cisgender men and transgender women who are 65 to 75 years old who have ever smoked.</li> <li>There is insufficient evidence for or against screening in cisgender women and transgender men who have ever smoked.</li> </ul>

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Type of Screening [a]	Recommended Guideline(s) [b]	Age of Screening Initiation, Frequency, and Comments
<b>Abbreviations:</b> CDC, Centers for Disease Control and Prevention; MSM, men who have sex with men; NYSDOH AI, New York State Department of Health AIDS Institute; USPSTF, U.S. Preventive Services Task Force. <b>Notes:</b> a. An anatomical inventory is necessary to identify appropriate sex-based screening. b. If no NYSDOH AI guideline is available, the relevant USPSTF guideline is included; the USPSTF guidelines are comprehensive and evidence-based. c. Screening recommendations are the same for individuals with HIV and without HIV.		

## References

- Aberg JA, Gallant JE, Ghanem KG, et al. Primary care guidelines for the management of persons infected with HIV: 2013 update by the HIV Medicine Association of the Infectious Diseases Society of America. *Clin Infect Dis* 2014;58(1):1-10. [PMID: 24343580] <https://pubmed.ncbi.nlm.nih.gov/24343580>
- Thompson MA, Horberg MA, Agwu AL, et al. Primary care guidance for persons with human immunodeficiency virus: 2020 update by the HIV Medicine Association of the Infectious Diseases Society of America. *Clin Infect Dis* 2021;73(11):e3572-3605. [PMID: 33225349] <https://pubmed.ncbi.nlm.nih.gov/33225349>