Submissions must not exceed 300 words (excluding title & authors). The document **must not** be password protected or saved as read only as this may result in your abstract failing to upload successfully. Use Arial 12 point type only. Please structure your submission using the subheadings below. If the abstract does not fit the headings, please put full abstract beneath introduction and we will remove the headings once submitted.

# "MORE VALIUM!!" PARTICIPANT FEEDBACK FROM A LONGITUDINAL STUDY OF ANAL CANCER SCREENING IN GAY MEN

#### **Authors:**

McGrath P<sup>1</sup>, Poynten IM<sup>1</sup>, Jin F<sup>1</sup>, Machalek D<sup>1</sup>, Acraman B<sup>1</sup>, Grulich A<sup>1</sup> Kirby Institute, UNSW, Sydney, NSW, Australia, on behalf of the SPANC Research Team

## Introduction:

Participation in trials involving clinical procedures may result in a degree of discomfort, pain and emotional stress that can affect retention or completion of study required tasks. Written feedback allows participants to review their experience in their words and in their own time. The Sydney-based SPANC Study examined anal cancer and its precursor lesions in a gay male cohort. We examined written feedback from men at progressive time points about their study experience.

### Methods:

SPANC participants were examined with High Resolution Anoscopy (HRA) and completed online surveys 2 weeks and 3 months after each visit. Feedback from visits at Baseline, 6-months and 12 months was examined and collated into 4 categories for analysis: neutral, positive, negative and nil feedback.

### Results:

By June 2012 235 participants had made 430 clinic visits and submitted 640 online surveys (average completion rate 91%) containing 262 usable feedback responses. Of these, 23% were neutral comments, while 37% (96/262) were positive and 40% (106/262) negative. From an initial higher rate of negative feedback at Baseline, rates of positive and negative feedback remained essentially the same during follow-up, while rates of neutral or nil responses increased. Rates of retention and compliance with interim study tasks were similar across men who gave either positive or negative feedback; but importantly, men who offered no feedback displayed less compliance with study tasks, suggesting a tendency toward early disengagement from the Study.

### Conclusion:

We examined and present feedback from men participating in an anal cancer screening study and the relationship between their feedback and study retention and compliance. Preliminary data suggests that positive or negative feedback is not a predictor of remaining engaged with the Study, whereas the absence of feedback may predict withdrawal. This may assist in targeting retention strategies for men who may otherwise exit the study prematurely.

Disclosure of Interest Statement: *Nothing to declare*