Spance Study of the Prevention of Anal Cancer

ISSUE 6 FEBRUARY 2014

Welcome to the 6th issue of the SPANC newsletter. Three years on and we'll shortly be enrolling our 400th participant! Some of you have now reached your 5th and final visit so this newsletter is important to you as it contains information on what SPANC has planned for the future. We've also opened a new SPANC clinic, located at RPA Sexual Health at Camperdown, just off Parramatta Road. Find out more in this issue.

In this newsletter...

- >> A new SPANC site opens at RPA Sexual Health
- What happens after your fifth SPANC visit?
- >> Welcome to new SPANC clinic staff
- Q&A Our doctors answer some of the questions you have raised in your survey responses.

RPA Sexual Health Marsden St - Camperdown



SPANC opens another clinic - RPA Sexual Health

1000! reached 1000 visits,

SPANC has now

Thank you again for

your participation/

On 30th October 2013 SPANC opened its second clinic at RPA Sexual Health, Camperdown. This location will make it more accessible for new SPANC participants who live locally or who find it more convenient to visit a SPANC clinic in that area. If you have already enrolled in SPANC at St Vincent's Hospital in Darlinghurst and wish to transfer to the RPA Sexual Health Clinic in Camperdown we can arrange this for you but we ask that you only make this move once, as the transfer of patient records between hospitals is very complex. So if you decide to transfer to RPA you'll complete all of your remaining visits there.

Your 5th SPANC visit

Many of you will be attending your final (5th) SPANC study visit shortly. At this visit the doctor will offer you an optional, non-clinical (i.e. no procedures) 6th visit where you will be able to review and discuss all your test results from the previous 3 years, and ask any questions you may have for a better understanding of your anal health status. This may involve a discussion of any treatment options available to you if that's necessary. The visit would probably take no more than an hour, and would be booked about 3 months after your final SPANC appointment. SPANC's still recruiting!! Remind friends they can still join SPANC can SPANC still needs more







NEW CLINICAL STAFF YOU MAY MEET at ST VINCENT'S HOSPITAL



Daniel Seeds

Dan joined the SPANC team at St Vincent's Hospital in June 2013 after working in invasive Cardiology. He completed his nursing degree from Liverpool John Moores University in 1999 and practiced in London within

various Critical Care Settings before moving to Sydney in 2008. Dan has a long- standing interest in gay men's health and he is enjoying his new role as a clinical trials nurse for the SPANC study.

SPANC VISITS GAMMA

A/Prof Richard Hillman and two SPANC research assistants attended the monthly GAMMA (Gay and Married Men's Association) meeting to talk about sexually transmitted diseases, anal cancer and the SPANC study. The guys made us very welcome, sharing their experiences and asking questions

about their anal health. You can find out more about GAMMA at their website http://www.gamma.org.au







Robbie Mellor

Robbie joined the SPANC study as a research assistant in July 2013. His background is in education and he enjoys the contrast that his work with SPANC offers him. He's one of the voices you will hear on the phone when booking your SPANC appointment.

Eddie Fraissard

Eddie is a registered nurse who has an extensive background in HIV/AIDS, cancer, chemotherapy and emergency nursing, and except for the occasional foray into the wilderness has mainly worked at the St Vincent's campus. She joined SPANC in

November 2013 and enjoys her role as a study coordinator, especially meeting and talking with participants. She'd love to say she thinks about SPANC even when she isn't working but that would be an untruth ©! She is, however, committed to the study and is overwhelmed by the contribution made by our participants in support of gay men's health.

NEW VACCINE AGAINST HUMAN PAPILLOMAVIRUS

Four SPANC investigators, Prof Andrew Grulich, and Drs David Templeton, Mary Poynten and Jeff Jin recently attended the Eurogin (European Research Organisation on Genital Infection and

...new vaccine was shown to produce high levels of antibodies against these nine specific HPV types..

Neoplasia) 2013 Conference in Florence, Italy, where exciting new findings were presented about a new vaccine against the human papillomavirus (HPV). The HPV vaccine currently available in Australia, Gardasil® prevents HPV infection and associated diseases caused by four HPV types - 6, 11, 16, and 18. The former two cause the majority of genital warts and the latter two are responsible for the great majority of anal cancer cases. The manufacturer (Merck) announced at the conference that a new vaccine providing protection against five more HPV types (31, 33, 45, 52, and 58) has just completed large scale clinical trials. In these trials, nearly 30,000 boys and girls 9 to 15 years of age and young women aged 16 to 26 years of age were given either the new vaccine or Gardasil®.

The new vaccine was shown to produce high levels of antibodies (immunogenicity) against these nine specific HPV types in nearly all participants who received it. The trials also demonstrated that the new vaccine is highly effective in preventing HPV infections and associated diseases in girls and young women, and prevented 96% of HPV infections and 97% of genital lesions related to the extra 5 HPV types, compared with the existing Gardasil® vaccine. The new vaccine was found to be as safe and acceptable to participants as the Gardasil® vaccine. There has been discussion about trialling the HPV vaccine (which is currently not licensed for use in men older than 26 years of age in Australia) in homosexual men of older age.







FAIRDAY 2014



Fair Day was a wonderful day as always and the hot weather kept the crowds coming thick and fast. Luckily we had lots of sunscreen to give away.

The SPANC stall was kept busy with lots of new enquiries, and it was great that so many of you who are already in the study dropped by to say 'hello!'

A BIG thank you to Banana Boat, Ego Sun Sense & Hamilton for supplying visitors to the SPANC stall with free suncscreen.





Our doctors answer some of your questions...

Q: When are you going to share results with us? And will participants receive ongoing screening for anal cancer after the SPANC study concludes?

A: Participants will be offered an opportunity to discuss all of their results that have been collected over the three years at an optional, non-clinical, '6th visit' which will occur 2-3 months after your final (3 year) SPANC visit. In addition, we will have more laboratory results to share with you at that visit. Although there are still many unanswered questions, we will then be able to give you a personalised risk assessment for anal cancer. During this 6th visit you will have an opportunity to ask any questions – both specific to yourself and of a general nature. In addition, as we get more conclusive results towards the end of the Study, we will be presenting the overall findings at community meetings. On the question of 'what happens' post-SPANC, final screening guidelines will not be available until all the results from all participants are available – some years ahead. However, we will discuss this matter with each individual at their 6th visit, and tailor the screening advice to each individual circumstance.

Q: What if anything can be done to reduce risk of progression?

A: At the moment, the best advice is to give up smoking! For those who are not smokers, we currently do not have enough information to give any more specific advice. Again, we need the full results from all participants before we can give the best possible advice.







Q: Is there anything I can do to prepare for the anal cancer screening in order to be clean and prevent defecating? I've had my second screening and both times I couldn't control my bowel movement and led to defecating, which I find very embarrassing.

A: Feeling as though you want to empty your bowel is an entirely normal response to having the anoscope in the anal canal. In the vast majority of cases, faecal material stays well above a valve at the top end of the anal canal and does not come down during the procedure. Rarely, particularly if you have diarrhoea, material can sometimes appear. This is never a problem for the clinical team, who will be able to assist resolving the issue. On these rare occasions, taking medications to constipate the bowel might be tried, but is not generally necessary. Douching is not necessary either, and we generally don't recommend that you do this before your SPANC visit.

Q: Inconclusive swab tests – having given up a day to the study why do I have to come in again?

A: Technically unsatisfactory anal Pap results occur in 5-10% of cases. This is obviously very important for any future screening program. However, nobody is entirely sure why unsatisfactory Paps occur. SPANC is the first study to investigate this and we hope to be able to reduce the rate significantly. So, if you do get an unsatisfactory Pap, it is particularly important that you come back for a repeat, so we can gain greater insights into why this is happening.

Q: My result was PLSIL [possible low-grade squamous intraepithelial lesion] so it's hard to know whether my result was normal or abnormal. Can you clarify?

A: Sometimes we are not 100% confident that something is entirely normal. Rather than run the risk of telling you that everything is fine, when it may not be, we give results such as "PLSIL". This ensures that we look with even greater detail next time, to make sure that we have not missed anything. The vast majority of PLSIL results come back as completely insignificant. We are just being über cautious!

Q: My biopsy found abnormal cells, and I was told that the body's immune system would most likely heal the abnormal cell. Can you explain?

A. This is a really important new discovery that we have been looking at in SPANC. In some parts of the world (e.g. the USA), people who have abnormal cells are treated with a variety of physically destructive methods. Our research suggests that this may not be necessary in many cases, and that the body has the ability to clear

these abnormal cells, without any specific treatment. Such a finding opens up the exciting possibility that people may be able to avoid some potentially very unpleasant treatments.

Q: When I watched the procedure on-screen, I saw anal warts and imagined them to be spread over a much wider area than they actually were. I think you need to make it clear that watching the anal pap is a magnification!

Don't forget

to complete your follow-up surveys when we send you a reminder after your visits!

A: This is a good point – we use magnification up to x40, so things may seem huge on the screen. Most of the time we are dealing with abnormalities that are 1mm across, or smaller.

SPANC is funded through the Australian Government's chief medical research agency, the National Health and Medical Research Council. Over the life of SPANC, more than \$1.5 million will be invested in anal cancer prevention.



Contact us at: spanc.org.au 1800-4-SPANC (1800 4 77262) spanc@kirby.unsw.edu.au

Thank you for your support"

This study has been approved by St Vincent's Hospital Human Research Ethics Committee ref Number:HREC/09/SVH/168