

PAP SMEAR SCREENING RATES IN WOMEN WITH OPIATE USE DISORDER



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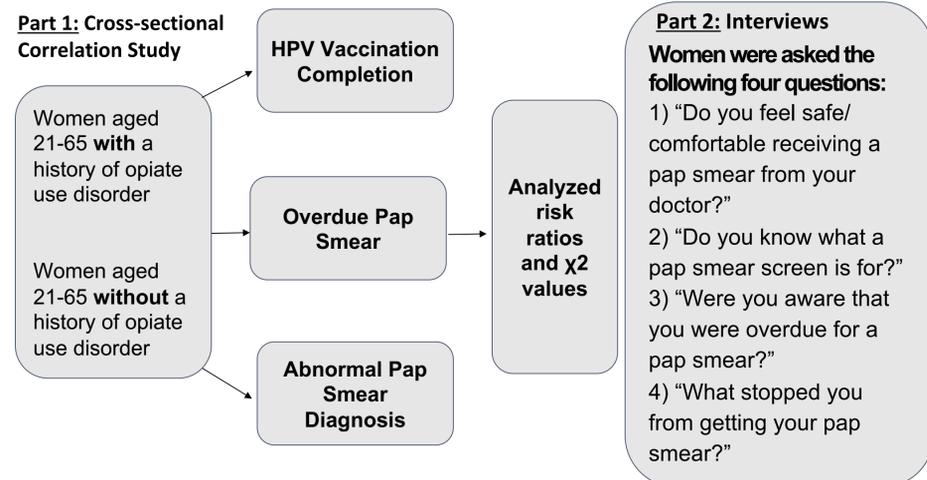
BACKGROUND

- Women with opiate use disorder (OUD) face negative stigma and many barriers to healthcare.
 - Significant history of trauma (3+ ACEs) has been linked to poorer health outcomes, higher risks of mortality, and decreased life expectancy
- Pap smears are critical to reducing rates of cervical cancer for all women.
 - However, rates vary widely due to multiple factors including adverse childhood events (ACE), knowledge about pap smears, and history of sexual assault.

OBJECTIVES

- Confirm if women with a history of opiate use disorder have the following:
 - Reduced pap smear screening rates
 - Higher incidence of abnormal pap smears
 - Lower HPV vaccination rates
- Identify potential barriers to pap smear screenings for women with opiate use disorder

METHODOLOGY



RESULTS

Comparing pap smears and HPV vaccination rates

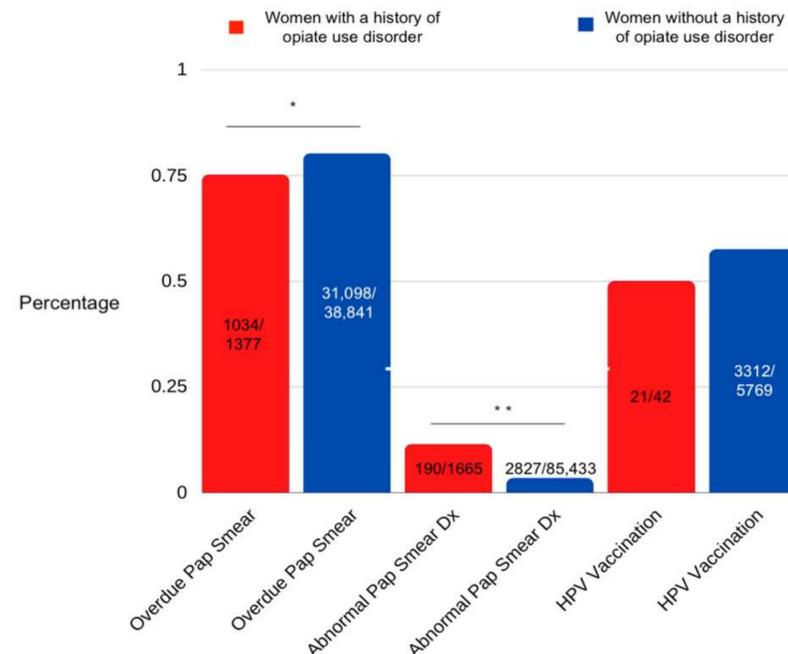


Figure 1. Comparing rates for overdue pap smears, abnormal pap smear diagnosis, and HPV vaccine completion rate in women with a history of opiate use disorder compared to a control population of women without opiate use disorder. * = p-value < 6.0×10^{-6} . ** = p-value < 1.0×10^{-6}

CONCLUSIONS

- Women with opiate use disorder are not at increased risk for overdue pap smears.
- Women with opiate use disorder have a significantly higher rate of abnormal pap smear diagnosis.
 - Thus, this increases their risk for cervical cancer.
- There was no statistical difference in HPV vaccine completion.
- Scheduling difficulties or lack of time are the biggest barriers to women with OUD getting their pap smears done.

Barriers to Pap Smear Screenings

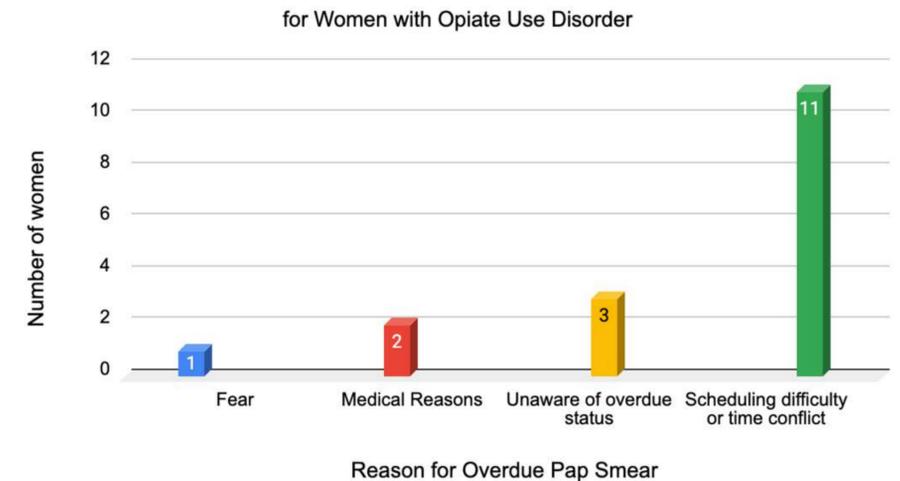


Figure 2. Women with opiate use disorder were interviewed to identify barriers to pap smear screenings. 4 main reasons were identified: scheduling difficulty or time conflict, being unaware of overdue status, medical reasons, and fear.

DISCUSSION & RECOMMENDATIONS

- First coitus (< 15 y.o), multiple sexual partners, and smoking ↑ risk for HPV, which consequently ↑ risks for abnormal pap smears & cervical cancer.
 - Trauma is linked to early onset of sexual activity.
 - Women with OUD have a significant history of trauma & childhood sexual assault.
- Women with OUD face many barriers to receiving adequate care due to fear of healthcare, history of trauma, and already having many other appointments to attend.
 - To increase pap smear rates for women with OUD, physicians should practice trauma informed care to decrease the fear of healthcare for these women.
- Public health efforts into alternatives to pap smear screenings, such as self-testing to help women feel more comfortable and increase accessibility.

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References
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