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“Exploring the Relationship between Substance Use Disorder and Women’s Preventative Health Screenings”

Introduction: Women’s preventative health screenings play an important role in the early detection, diagnosis, and treatment of gynecologic cancers. Pap smear screenings are used to identify precancerous cervical cells with the goal of early intervention to stop these cells from progressing to cancer. Despite the importance of pap smear screenings, many patients do not complete preventative health screenings. In 2021, 25% of women ages 25-65 were overdue for cervical cancer screening; this percentage was lower among the immigrant and uninsured populations, highlighting the impact of socioeconomic and systemic factors on vulnerable patients seeking healthcare. Women with substance use disorder (SUD) are particularly at-risk for not receiving preventative healthcare services. They are less likely to be screened and more likely to have an abnormal screening result if screened compared to women without SUD. There is limited research investigating preventative health screening rates and results among females with SUD in the south, and minimal data available for the southeastern Louisiana population. The purpose of this study is to contribute to the greater body of research examining the health of female patients with SUD.

Objective: The primary objective of this research is to compare the completion rates and results of pap smear screenings among female patients with and without SUD.

Methods: This study is a retrospective chart review that will examine medical records from approximately 150 female patients with a diagnosis of SUD in their chart and approximately 150 female patients without a diagnosis of SUD in their chart. All diagnoses included in the DSM-5 classification of SUD will be considered an SUD diagnosis for the purposes of this study. The medical records reviewed will be from 2015 through 2025 and will come from the UMC Women’s Health Clinic. The data collected for each patient will include the completion status of routine pap smear screenings at the recommended ages as well as the results of these screenings if they have been completed. The Bethesda System categories will be used to assess the pap smear screening outcome severity for completed pap smears. In order to compare the rates and results of pap smear screenings between the SUD and control groups, the following calculations will be performed: 1) percentage of completed pap smear screenings out of the recommended pap smear screenings for each patient 2) number of patients in each Bethesda System category for pap smear screening outcome severity.

Anticipated Impact: This study expects to show that women with SUD are less likely to have completed the recommended pap smear screenings and more likely to receive an abnormal pap smear screening result than women without SUD. It is imperative to identify and address low completion rates of pap smear screenings due to the negative health outcomes associated with low participation in preventive healthcare. Integrated care models are uniquely poised to address a variety of needs within one clinic, including barriers to accessing and adhering to healthcare. Offering behavioral health services within a women’s health clinic allows for the delivery of collaborative and comprehensive care to better serve women in vulnerable patient populations.