

Lung Cancer Screening in People with HIV: A Mixed-Methods Study of Patient and Provider Perspectives

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Appendix

Appendix Table 1. Patient and provider survey responses on lung cancer screening attitudes, beliefs and knowledge.

Question prompt	Strongly Disagree	Somewhat Disagree	Somewhat Agree	Strongly Agree
Patient Participants (n=64)^a				
I have heard of lung cancer screening	0	1 (2%)	9 (14%)	54 (84%)
My healthcare providers have recommended I get lung cancer screening	19 (30%)	14 (22%)	13 (21%)	17 (27%)
I follow my provider's recommendations on which healthcare services to get	0	1 (2%)	7 (11%)	56 (88%)
If my provider recommended lung cancer screening, I would get it	0	0	3 (3%)	61 (95%)
My history of HIV puts me at higher risk for lung cancer	2 (4%)	6 (11%)	17 (31%)	30 (55%)
My history of HIV impacts my overall health	6 (9%)	4 (6%)	9 (14%)	45 (70%)
It is important to understand how my HIV affects my risk for other diseases	1 (2%)	0	7 (11%)	56 (88%)
I want healthcare designed for persons living with HIV	2 (3%)	1 (2%)	7 (11%)	54 (84%)
Provider Participants (n=11)				
I am very familiar with lung cancer screening guidelines	0	0	11 (100%)	0
Lung cancer screening is very effective at preventing lung cancer	0	2 (18%)	6 (55%)	3 (27%)
The research evidence for lung cancer screening is strong	0	2 (18%)	6 (55%)	3 (27%)
Lung cancer screening has more benefits than harms	1 (9%)	1 (9%)	6 (55%)	3 (27%)
Patients with significant comorbidity do not benefit from lung cancer screening	5 (45%)	4 (36%)	2 (18%)	0
Patients with poorly controlled HIV do not benefit from lung cancer screening	6 (55%)	3 (27%)	2 (18%)	0
I discuss lung cancer screening with all my patients who are eligible	0	2 (18%)	4 (36%)	5 (45%)

I am comfortable performing shared decision making for lung cancer screening	0	0	4 (46%)	7 (64%)
I have used web-based or paper decision aids to discuss lung cancer screening with patients	3 (27%)	5 (45%)	3 (27%)	0
I need additional tools to discuss lung cancer screening with my patients	1 (9%)	1 (9%)	8 (73%)	1 (9%)
Lung cancer is a major problem for people with HIV	0	2 (18%)	5 (45%)	4 (36%)
Cigarette smoking is a major problem for people with HIV	0	0	1 (9%)	10 (91%)
Healthcare guidelines should be tailored to people with HIV	0	0	2 (18%)	9 (82%)

^aNot all rows add to 64 as some participants skipped questions. Missing responses were not imputed.

Appendix Table 2. Provider demographic data

Characteristic, n (%) or median (IQR)	Survey/Interview participants (n=11)
Gender	
Female	10 (91%)
Male	1 (9%)
Other	0
Age, Median	44 (39-50)
Race	
American Indian/Alaska Native	0
Asian	2 (18%)
Black/African American	0
Native Hawaiian or other Pacific Islander	0
White	9 (82%)
Other	0
Hispanic ethnicity	0
Medical Specialty	
General Internal Medicine	0
Family Practice	1 (9%)
HIV Fellowship	0
Infectious Diseases	9 (82%)
Other	1 (9%)
Level of training	
Resident physician	0
Fellow physician	1 (9%)
Attending physician	9 (82%)
Advanced Practice Provider	1 (9%)
Percent of time in outpatient clinic	
<10%	2 (18%)
11-25%	4 (36%)
26-50%	3 (27%)
51-75%	1 (9%)
>75%	1 (9%)
Percent of clinical time caring for PWH	
<10%	0
11-25%	2 (18%)
26-50%	2 (18%)
51-75%	3 (27%)
>75%	4 (36%)

Abbreviations: PWH=people with HIV