

Digital ano-rectal examination (DARE)

How to perform a DARE on yourself or your partner



What is a DARE?

- A DARE or digital ano-rectal examination is an easy way you can check for anal abnormalities that could lead to anal cancer.
- The aim of a DARE is to identify anal lumps when they are smaller and easier to treat.
- A DARE can also identify other anal abnormalities including haemorrhoids, fissures or an enlarged prostate.

Performing a DARE

Step 1 – Prepare

- Wash your hands with soap and warm water. Dry your hands.
- Lower or remove your underpants.
- Have water based lubricant handy.
- Have a towel or paper towels handy.
- Self/partner-DAREs can be performed with disposable gloves.

Step 2 – Position

Make yourself comfortable and place yourself in one of the following positions:

- Lying on your back with one or both legs raised.
- Standing on one leg raised on a chair or stool.
- Standing with your legs spread apart while in the shower.
- If your partner is performing the DARE - bend over a table or lay on your left-hand side, knees to chest.

Step 3 – Doing the DARE

- Place water-based lubricant on a pointer finger and apply to the outer anus. Gently work your lubricated finger inside the anus.
- Insert finger till you feel the canal opening up. Up to second joint of your index finger is a good rule.
- Gently apply pressure to the wall of the anus noting lumps or differences in the surface lining of the anus.
- Repeat the process around each quarter of the anal canal, until all the surface of the anus has been examined. Alternately, you can choose to perform two sweeps of 180 degrees. You may need to switch hands.
- Be thorough! It may take up to one minute to perform a DARE.
- Remember to wash your hands and anus afterwards with warm soapy water.

Step 4 – After a DARE

As you perform the DARE if you or your partner notice any

- lumps,
- abnormalities,
- blood,
- or discharge

you will need to speak with your doctor to discuss your findings.

Why should I have a DARE?

- DAREs has been shown to be effective in detecting anal cancer.
- If an anal cancer is identified early (less than 1cm) it can be surgically removed, with near 80-100% cure rates.
- If an anal cancer tumour is identified late (i.e. greater than 1cm), it will be treated with both chemotherapy and radiotherapy, which can be uncomfortable and even invasive.

What causes anal cancer?

- Human Papillomavirus (HPV) is the most common sexually transmitted infection (STI) worldwide. There are more than 40 types of sexually transmitted HPV.
- High-risk HPV causes cervical cancer and a large proportion of cancers of the vulva, vagina, penis, anus, mouth and throat. Chronic anal HPV infection can lead to anal cancer.
- For most people in the general community, the immune system keeps HPV under control.
- People living with HIV however, have difficulty keeping HPV under control and may develop chronic HPV infection.
- Anal sex with multiple partners increases the risk of HPV infection and anal cancer.
- HPV is so easily spread that men and women who live with HIV and have never had anal sex are also at risk, because HPV can be easily transmitted from adjacent genital sites.

How to reduce my risk of anal cancer?

- Stop smoking.
- Make sure your CD4 count is as high as possible.
- Ask your doctor for an annual DARE.
- Get any lumps, bleeding, sores, or pain in your anus checked by your doctor.
- Talk with you doctor about getting vaccinated against HPV.

If you're concerned about anal cancer

- Talk to your doctor. While treatment for anal cancer is uncomfortable and can even be invasive, the sooner you act, the better your outcome.
- Talk with a peer about anal cancer.
- Contact a Positive Life NSW Treatments Officer, for a confidential chat on (02) 8357 8386, 1800 245 677 (freecall outside metro) or email contact@positivelife.org.au
- For more information on HPV-related anal cancer visit thebottomline.org.au
- In 2025, the Australasian Society for HIV, Viral Hepatitis and Sexual Health Medicine (ASHM) published the [Australian Anal Cancer Screening Guidelines for all people living with HIV](#). You might like to use this resource to begin a conversation with your HIV specialist about your risk of anal cancer.

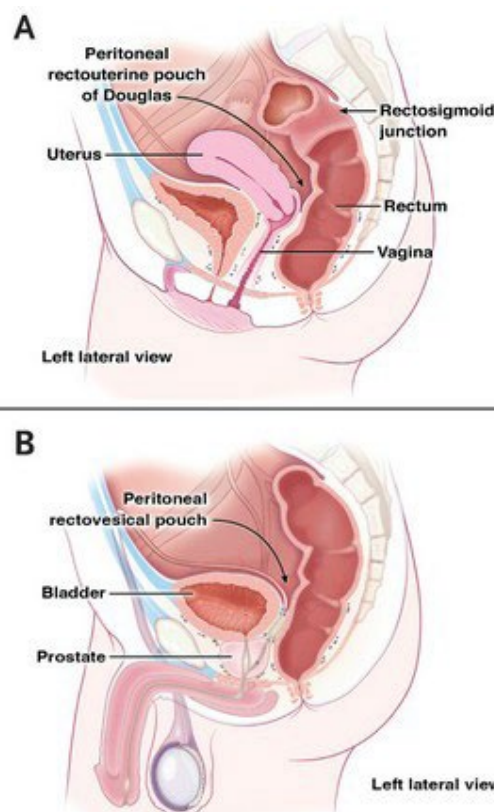


Image source: Rajab, T. K., Bordeianou, L. G., von Keudell, A., Rajab, H., & Zhou, H. (2018). Digital Rectal Examination and Anoscopy. *New England Journal of Medicine*, 378(22) Publishing Group, 2017

DISCLAIMER: Self-or partner-administered DARE is not intended to replace an anal cancer examination by your doctor. In line with current screening guidelines, all individuals living with HIV should undergo a DARE annually, regardless of age. Men who have sex with men (MSM) aged 35 and over are also recommended to have an annual DARE. Individuals not living with HIV, regardless of gender, who are over the age of 45 should have a discussion with their health provider.

For more information phone 02 8357 8386 or 1800 245 677 (freecall) or visit www.positivelife.org.au

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The voice of all people living with HIV

Positive Life NSW