



Attitudes of MSM Toward Routine Quarterly STI Testing for Chlamydia and Gonorrhoea – A Qualitative Study

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BACKGROUND

Men who have sex with men (MSM) in Australia have disproportionately higher STI rates particularly those who take pre-exposure prophylaxis (PrEP)¹. MSM taking PrEP are required to have 3-monthly screening for chlamydia (CT) and gonorrhoea (NG) with high rates of asymptomatic CT and NG detected². While there is little evidence about the effectiveness of this screening interval, there is increasing concern about antibiotic use and its impact on antimicrobial resistance³. There have been some calls to re-consider this frequent screening for CT and NG⁴.

METHODS

Individual semi-structured interviews were conducted in 2021 with MSM living in Victoria, Australia to assess their attitudes to 3-monthly CT and NG screening. Participants were aged 20-62 years and had been taking PrEP for at least six months. Recruitment occurred via physical and online advertising flyers (on Twitter and displayed in health clinics). Interviews were audio-recorded and transcribed, and these data were investigated through reflexive thematic analysis⁵.

RESULTS

A total of 13 interviews were conducted between August and September 2021. Participants were hesitant about reducing the screening frequency and reported that testing gave them a sense of security. Whilst MSM recognized antimicrobial resistance was a concern, it did not impact their sexual behaviour, with many participants stating they would rather continue to take antibiotics to treat infections rather than adopt preventative measures such as condom use. Participants suggested that they would have more positive attitudes towards reducing the screening frequency if a trusted healthcare professional informed them about the natural history of CT and NG and the benefits and harms of screening and treatment.

"I know some guys who have MG (Mycoplasma genitalium) that is really hard to treat properly. And that's not nice, I haven't had any complications for me it's easy for me to say no I am not worried about it. I am sure if something like that happened to me, I might change my mind. But no... I don't worry about...there's no change in my behaviour thinking about whether or not there are resistant STIs". – Participant G (28 years of age, regular and casual partners, 5 years on PrEP)



"I'm very pro testing I think it is important, especially in the gay community. Especially if you go on to sex on site premises, where there is a lot of random casual sex in groups, where the risk of transmission is quite high. Yeah, it is essential that men take responsibility of their sexual health and get regular testing"- Participant B (56 years of age, regular and casual sexual partners, 1 year on PrEP)

Before I went on PrEP, I would religiously use condoms, ALL the time EVERY time. So, for the first twenty years of my sexual life before PrEP came along, I would use condoms all the time. Interestingly in the twenty years I never actually got an STI at all. I never got an STI in twenty years! As soon as I got onto PrEP, and I started not using condoms I found that I was getting STIs left right and center."- Participant A (46 years of age, regular and casual partners, 6 years on PrEP)



CONCLUSION

Whilst MSM on PrEP were initially hesitant to any changes in screening frequency, changes may be acceptable if there was transparent communication presenting the benefits and harms of screening and treatment delivered by a trusted healthcare professional.

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