

CHEMSEX: PREVALENCE, CHARACTERISTICS AND ASSOCIATED RISK PROFILES OF MEN WHO HAVE SEX WITH MEN (MSM) IN SOUTH AUSTRALIA: A CROSS-SECTIONAL COHORT STUDY

Khaw C^{1,2,4}, Raw L⁴, Zablotska-Manos I³, Boyd M^{2,3,4}

¹Adelaide Sexual Health Clinic (formally Clinic 275), Infectious Diseases Unit, Royal Adelaide Hospital, Adelaide, SA, Australia, ²School of Medicine, University of Adelaide, Adelaide, SA, Australia, ³Kirby Institute, UNSW, Sydney, NSW, Australia, ⁴SA Health, Adelaide, South Australia, Australia

Background:

Chemsex is common amongst MSM. We report prevalence, associated risk profiles and characteristics of MSM engaging in Chemsex in South Australia (SA).

Methods:

MSM attending SA's only public sexual health clinic, a high HIV caseload General Practice and a drop in non-government organization were invited to complete an anonymous survey about Chemsex. Participants provided socio-demographic information, reported on sexual practices, drug use, HIV/STI testing and status. We assessed the proportion of respondents reporting Chemsex and associated factors. For statistical associations of interest, we present adjusted prevalence ratios (APR) and 95% Confidence Intervals (95%CI).

Results: Among 410 MSM participants, 31% were under 26, 32% 26-35 years old; 76% Australian-born; 2.0% Aboriginal or Torres Strait Islanders (ATSI); 66% employed fulltime or part time. In the preceding six months, 82% reported multiple (≥ 2) partners, 67% had condomless anal intercourse (CAI); 42% engaged in group sex. By self-report: 12% were HIV-positive, 6.4% were receiving PrEP. Chemsex was reported by 120 (29%) of participants. Substances used included crystal methamphetamine (14%) and gamma hydroxybutyrate or butyrolactone (GHB/GBL, 5%), among other drugs, mainly for fun (18.5%), 'party and play' (10.2%), have sex for longer (9.3%) and become less inhibited (9.5%). In the multivariate regression analysis, Chemsex was associated with being Australian-born (APR=1.45; 95%CI: 1.02-2.06), engaging in group sex once/a few times (APR=1.86; 95%CI: 1.35-2.57) or at least monthly (APR=2.30; 95%CI: 1.23-4.29), hooking-up for sex online or via mobile applications (APR=1.70; 95%CI: 1.19-2.43), being HIV positive (APR=2.46; 95%CI: 1.62-3.73) or taking PrEP (APR=1.85; 95%CI: 1.06-3.23).

Conclusions:

In this **clinical** sample of MSM in SA, Chemsex, being born in Australia and being HIV positive were found to be a key predictors of CAI. Understanding prevalence and risk profiles may help inform the development of intervention strategies to address decreasing STI and HIV transmission in SA.

Disclosures: ...

Carole Khaw received an unrestricted research grant from ViiV Health Care for this research project and has received honoraria from Gilead, ViiV Health Care and MSD

Mark Boyd has received research grants from MSD and Gilead; honoraria from MSD, Gilead, ViiV Health Care and Janssen -Cilag