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[TITLE:] ADDRESSING METHAMPHETAMINE USE AND SEXUAL RISK BEHAVIOR AMONG MEN WHO HAVE SEX WITH MEN (MSM) IN THE UNITED STATES

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Mansergh, G¹; Purcell, DW¹; Colfax, GN²; Shoptaw, S³

¹ CDC, Atlanta, GA; ² San Francisco Department of Public Health, San Francisco, CA; ³ UCLA Integrated Substance Abuse Programs, Los Angeles, CA

BACKGROUND: MSM communities in the U.S. are struggling to address simultaneous methamphetamine (meth) and HIV and STD epidemics. In January 2005; CDC held a national expert consultation on meth use and its link to sexual risk behavior and HIV/STDs. The consultation outlined the "state of the science" for research, programs and policy, and worked to develop recommendations for future efforts in each of these areas. This session will give an overview of meth, its contextual link to sexual risk behavior - and subsequently to HIV and STD infections - and effective prevention and treatment options for communities to consider. Finally, we will share recommendations from the CDC expert consultation.

METHODS: This group presentation is by participants of the CDC consultation, and will focus on the meth-sexual risk epidemic among MSM in the U.S. and what is being done about it. The session includes "meth 101" (e.g., pharmacology, physical and psychological effects, addiction); prevalence of meth use; the situational link of meth use and sexual risk behavior; the statistical link of meth use and HIV/STD infection; the context of and reasons for meth use and risky sex; meth treatment and other risk reduction strategies; and recommendations for future research, programs and policy to reduce the association of meth use and sexual risk behavior.

RESULTS: Meth is a highly addictive drug that is relatively prevalent among MSM and often used in the context of sexual situations or environments. Meth use is linked to unprotected anal sex, particularly receptive anal sex and unprotected anal sex with a partner whose HIV use is unknown or different from the respondent's HIV status. Meth use also linked to biomedical outcomes of HIV and STD infection among MSM. Drug treatment programs may be effective in reducing sexual risk behavior of meth users.

Communities have organized to implement campaigns that strive to increase awareness of meth use and its link to HIV and STDs. CDC's consultation in early 2005 on meth use and sexual risk behavior outlined recommendations for future research, programs and policy.

CONCLUSIONS: Meth use is relatively common and contributes to HIV and STD epidemics among MSM in the U.S. CBOs, prevention treatment programs, and public health officials must come together to address this growing problem in our communities, and bridge the typically separate worlds of drug use and HIV/STD prevention.



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