

# HIV+SEX INFORMATION FOR HIV POSITIVE

AND HIV NEGATIVE

**MEN WHO HAVE SEX** 



# HIV+ SEX INFORMATION FOR HIV POSITIVE AND HIV NEGATIVE MEN WHO HAVE SEX

This booklet and its content was developed in consultation with HIV positive and HIV negative gay and bisexual men and other men who have sex with men.

The information provided in this booklet does not replace medical advice, diagnosis or treatmen Contact a doctor or STI clinic if you have a concern or need further information.

This booklet is dedicated to Noel Walsh, RIP, who was an active and very valuable member of Gay Health Network (GHN) for many years. Prior to his untimely death in 2008, Noel was particularly passionate about the publication of this information booklet.

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#### INTRODUCTION

### THIS BOOKLET IS ABOUT HAVING HIV AND SEX.

It is for HIV positive gay and bisexual men and men who have sex with men, and your sexual partners (whether HIV positive, HIV negative, or with an unknown HIV status).

When you're HIV positive, you may have many questions about sex. Some may be quite specific. Others may be more complex.

The type of sex you have, and who you have sex with, is your choice.

This booklet aims to provide you with accurate information and advice about sex and sexual health, to enable you to make informed choices about your sexual life. The advice given will need to be considered according to your own personal health and sexual preferences. What may be beneficial and suitable for one person might not be as relevant to another.

If you are a man who has tested negative for HIV or you do not know your HIV status or the HIV status of your sexual partner(s), we hope this information gives you an insight into some of the issues that can arise for men living with HIV.

## **APPS CAN'T DETECT HIV TEST CAN**

## THEM? WE ALL HAVE **A HIV STATUS DISCOVER YOURS**

#### SEX -WILL I, WON'T I?

#### ALL MEN, REGARDLESS OF OUR HIV STATUS, HAVE THE RIGHT TO HEALTHY AND SATISFYING SEX LIVES.

Men who have been diagnosed with HIV will respond differently when it comes to decisions about having sex. Some men may choose not to have sex for a while. Others may have lots of sex. Some choose to have only casual sex. Others seek HIV positive partners.

There is no single correct choice and the choices you make may change. Many people find that having HIV has no impact on their sex lives while others find it difficult to form sexual relationships because of the prejudices or fear they feel or experience.

Whatever the situation, it is important to become and remain informed about pleasure, desire, and safer sex. Knowing about the many aspects and complexities of HIV and sexuality makes it easier to negotiate the sex that you want, regardless of your HIV status.

### IT'S NOT ALWAYS EASY TO RELAX AND JUST GET INTO SEX.

As a man living with HIV, it may often feel like you are held solely responsible for avoiding the further transmission of HIV. While you do have responsibility, you are not solely responsible. Everyone involved has an individual and collective responsibility.

In order to become and remain comfortable with the choices that you make, it may be good to spend some time thinking through issues, perhaps talking to other HIV positive men, friends or partners.

Speaking through some issues with a support worker or counsellor may help. For example, issues such as; responsibility for decisions around safer sex, talking about the sex that you want, enjoy, and are comfortable with, and disclosure. Reading about all of the health issues associated with sex is not exactly hot reading. In this booklet we have tried to present the information in a way that will help you to make the right decisions for you.

Not all questions can be answered. You need to make decisions based on the information that you have, and you need to feel comfortable with your decisions. That way you can feel most comfortable with your partner(s), and ultimately have better sex.

#### **RELATIONSHIPS**

## RELATIONSHIPS, GOOD SOCIAL SUPPORT NETWORK, PEER SUPPORT.

These can be important in maintaining self esteem and self confidence, particularly when newly diagnosed with HIV.

Relationships cover a range of issues like affection, intimacy, support, having someone to care about, and somebody who cares about you.

Relationships may vary greatly: for some HIV positive men, they may mean:

- long-term intimate relationships with only one person;
- loving relationships with one partner and sexual activity with others;
- a series of casual sexual relationships with different people.

Regardless of HIV status, relationships have their challenges, but can also be very rewarding. For some men, the HIV status of their partner is unimportant; for others, it can be a very important factor. For some couples it can feel as if there are three of you in the relationship – You, Him, and HIV.

If you are in a relationship when you receive an HIV positive diagnosis, don't assume that your partner might also be HIV positive. The only way to know for sure is if your partner gets tested.

A relationship where one person is HIV positive and the other is HIV negative (sometimes referred to as a sero-discordant or sero-different relationship) has its own set of challenges and anxieties. Initially, there may be the issue of disclosing

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#### **RELATIONSHIPS**

(telling the other person you are HIV positive). This may bring up a number of concerns for you both. The fear of transmitting HIV is a concern for some. You may need to renegotiate your relationship boundaries to the types of sex you both want and enjoy. You should both be aware of post-exposure prophylaxis (PEP) and pre-exposure prophylaxis (PrEP).

PEP is a course of anti-HIV medication which is prescribed to someone who has been exposed (or potentially exposed) to HIV infection (see page 29 for more information on PEP').

PrEP is a HIV prevention strategy that uses antiretroviral drugs to protect HIV-negative people from HIV infection if they are at risk of exposure. While PrEP is not yet available in Ireland, it is important to get informed about this new way to prevent HIV infection (see page 31 for more information on PrEP).

Some men living with HIV find that by having a HIV positive sexual partner they have a less anxious sex life. You may choose not to use condoms because you enjoy the intimacy of unprotected sex. This brings its own challenges, including possible health implications, which are outlined on page 21.

Anonymous or casual sex is a significant part of the lives of many men who have sex with men. If you enjoy casual sex with someone you don't know it might be useful to discuss and agree on sexual boundaries before you engage in sexual activity.

Whatever relationship you desire, it is important that decisions made about future relationships are not based on HIV alone. How you feel, if it works for you, and if it's what you want and enjoy, are all better reasons for making decisions.

## HIV THE LESS YOU KNOW THE GREATER THE STIGMA

#### **DISCLOSURE**

## YOUR HIV STATUS IS YOUR PERSONAL INFORMATION.

The choice to disclose is an individual one. Deciding who, how, why and when to tell someone you are HIV positive – whether it is a long-term partner or a casual partner – is a personal and often a difficult decision.

Telling a sexual partner can be very different to telling to a close friend or family member. A decision to disclose may depend on the kind of relationship you have or you want to have. It may also depend on the kind of sex you want to have.

"Will I see this person just once?";

"Do I desire a longer term relationship?";

"Should I allow a person to get to know me and all my qualities before I disclose that I am HIV positive, particularly if we don't have sex initially?".

Many men living with HIV have faced rejection upon disclosing to potential sexual partner/s. Sometimes men say no when asked or approached for sex, a date, or a relationship. Other HIV positive men, however, particularly in longer term relationships, have received lots of support.

#### **DISCLOSURE**

If you choose to disclose and he decides not to have sex with you, it's worth remembering that his decision to say no may not always be about you personally. He may have little or no understanding of how HIV is or is not transmitted and he may simply be trying to lower his own risk of getting HIV. It is his choice to make. Timing can be important also. It can be difficult to talk about HIV when you have only just met someone, but sometimes a casual relationship may develop into a more long-term one and this could cause problems if you have not disclosed.

Before making a decision about disclosure, many men feel that they want to get to know a person better and develop a friendship, trust and confidence, where privacy will be respected.

Some men find it useful to bring up casual conversations about HIV when they first meet someone.

There are no simple answers, as with many aspects of living with HIV. Talking to other HIV positive people, a support worker, or a counsellor about your concerns may be helpful.

Currently, in Ireland, an obligation to disclose your HIV status, has not been established in a court of law. However, there may be potential legal implications in the future with the non-disclosure of HIV status. The next section gives more details about this.

## **MANY HIV** INFECTIONS ARE FROM PEOPLE WHO **DON'T KNOW** THEIR STATUS **DISCOVER YOURS**

#### THE LAW AND HIV TRANSMISSION

## TRAVEL, MOBILITY AND MIGRATION ARE INCREASINGLY PART OF OUR LIVES.

It's important to be aware that in a number of countries, criminal law is being applied to people living with HIV who transmit or expose others to HIV infection. Different countries have different laws.

At the time of writing (June 2016), criminal prosecution for the sexual transmission of HIV remains untested in Ireland, both North and South.

The following is an example of how the law has been applied in England and Wales.

This is not legal advice. It is an example that you may wish to consider when making your choices about disclosure.

In England and Wales, people living with HIV may be prosecuted with 'reckless HIV transmission' under section 20 of the Offences Against the Person Act 1861. It's worth noting that this guidance applies to England and Wales only, although the Offences Against the Person Act still applies in Northern Ireland.

#### THE LAW AND HIV TRANSMISSION

In the UK, based on the criminal prosecutions to date, a person may be prosecuted for reckless transmission of HIV if:

- the person knows he/she is HIV positive;
- the person understands the risk of HIV transmission;
- the person engages in risk taking sexual behaviour, and as a result the person infects his/her sexual partner;
- the person has not previously disclosed his/her HIV status to that sexual partner.

Although UK law does not precisely define 'safer sex', from the cases brought to court so far in the UK, it seems that a person will not be prosecuted if condoms are used for anal sex – as long as they have been used 100% of the time.

The law in the UK is not explicit in relation to a situation where a condom splits or slips off. The advice given in the UK is to disclose HIV status immediately and advise your sexual partner to get PEP.

There have been no prosecutions in the UK so far of HIV transmission through oral sex. The risk of infection from oral sex is much lower than anal sex. However HIV transmission is still possible and therefore a prosecution cannot be ruled out. The law in the UK covers any serious infection that is passed on sexually, so a prosecution for the transmission of Hepatitis C is also possible.

#### **HAVING A FULFILLING SEX LIFE**

## HAVING SEX WITH SOMEONE CAN BE AN INTENSE EXPERIENCE THAT TAKES A LOT OF EMOTIONAL AND PHYSICAL ENERGY.

The psychological and social effects of living with HIV can sometimes result in a loss of interest in sex. Some men may be unconcerned by this change. For others, sexual expression is a huge part of who they are.

Losing interest in sex or experiencing difficulties such as getting or keeping an erection are common. Often these can be heightened due to a HIV positive diagnosis.

Sometimes the cause can be physical such as tiredness or feeling ill. It may even be that your testosterone levels have decreased. Some men have problems using condoms, and the use of recreational drugs or alcohol can affect our sexual pleasure.

Sometimes sexual difficulties may be caused by our own thoughts and feelings, such as anxiety about passing infections on, or feeling self-conscious about body image.

Anxieties and pressures of disclosure, stigma and discrimination, and sexual rejection are challenges. All these kind of issues can get in the way of the kind of sex you desire.

At different times we desire different things from sex and from our relationships. Sometimes sex is not always about the emotional connection. Sometimes it's about more basic desires.

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### YOU CAN'T

VIRAL LOAD
BY LOOKING AT THEM!

UNDETECTABLE VIRAL LOAD

#### **STAYING HARD**

## ERECTION DIFFICULTIES AFFECT MANY MEN, INCLUDING MEN LIVING WITH HIV.

#### Problems can include:

- not getting hard at all;
- hard-on not lasting long;
- keeping a hard-on when using condoms.

Hard-on problems can prevent some men from using condoms. Others adopt the receptive (bottom) role to get around the problem.

If condoms interfere with your hard-on, it may help if you get the other person to put it on you, or to use a different size condom.

A cock ring can stop the blood leaving the penis once an erection happens, helping to keep you hard. Gripping the base of the penis can have the same effect. Getting more exercise, following a low fat diet, and stopping smoking can all help improve hard-ons.

Using erection drugs such as Viagra™ is not safe for everyone but can often help. They increase the blood flow into the penis, help you get an erection, and make it harder and longer lasting (see page number 23 for more information on Viagra).

#### **STAYING HARD**

It's important to be aware that the underlying cause of hard-on problems may be affected by your mental and emotional health. Erection drugs will treat the symptom, but not the cause. If, for example you still get a hard-on in the morning, erection drugs are probably not the answer. If you have erection difficulties that persist, consider talking to a doctor or another health professional you feel comfortable with speaking to about your sex life.

Viagra<sup>™</sup> should only be taken when prescribed by a doctor.

Herbal hard-on drugs can be accessed via the internet and sometimes at saunas. It is important to be aware of the potential dangers of accessing drugs over the internet. Some drugs can interact with each other, see the 'Drugs and Sex' section for information.

#### YOUR SEXUAL HEALTH

#### KNOWING YOUR SEXUAL NEEDS AND PLANNING AHEAD CAN BE AN IMPORTANT PART OF MAINTAINING YOUR SEXUAL HEALTH.

Managing risk is also about managing your health. Be aware and keep informed of any health risks involved in having sex and how to minimise those risks while still getting pleasure.

Pleasurable safer sex starts with each partner taking mutual responsibility for protecting each other and himself. It can be further enhanced by understanding the risks involved in advance of having sex, then negotiating and consenting to the sex you both want.

Although condoms provide the best protection, it's important to remember that what is regarded as safer sex for the prevention of HIV transmission may not protect against some other sexually transmitted infections (STIs) like Syphilis or Gonorrhoea, or gut infections like Shigella (see the Luv Bugs series at man2man.ie).

Men living with HIV may wish to consider sexual activities that decrease the risk of contracting other STIs. If you are sexually active, particularly with short term or casual partners, it is recommended that you get tested for STIs regularly.

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#### YOUR SEXUAL PLEASURE

## SEXUAL PLEASURE CAN BE INFLUENCED BY MANY THINGS...

including the kind of sex you desire, where you meet (home, online, sauna, cinema, backroom, club, pub, party), who you are with (whether having casual sex or a more intimate relationship), and whether you are drinking alcohol and/or using recreational drugs. Whatever your sexual pleasure or desire, keep one basic principle in mind when you consider any sex act:

HIV-infected semen or blood has to enter the bloodstream of a person through an opening in the skin (or mucous membrane) for HIV to be transmitted. Anal Sex without condoms remains the most common way HIV is passed on between two male partners, in particular if the HIV positive partner is the 'top' (inserting).

If the HIV positive partner is the 'bottom' (receptive), a HIV negative partner is still at risk of HIV infection if blood is present which can enter the body through the eye of the penis. HIV may also enter the penis through cuts and sores if another infection is present, for example, genital warts or syphilis. Using condoms for anal sex is the single best way to prevent HIV transmission and many other STIs.

Oral Sex presents a lower risk of transmitting HIV. However, if you are HIV positive and you are the 'insertive' partner, the risk increases if you ejaculate into the mouth of an HIV negative partner especially if your partner has ulcers, bleeding gums and/or a sore throat.

#### **YOUR SEXUAL PLEASURE**

Rough oral sex or deep-throating can cause small cuts in the lining of the throat increasing the risk. Brushing teeth can tear the flesh in the mouth causing gums to bleed also increasing the risk of infection. Use a condom for oral sex to reduce the risk, and avoid brushing teeth before performing oral sex.

Rimming is only a risk for HIV transmission if blood is present. Rimming can be a higher risk activity for transmitting other STIs such as Hepatitis A or a gut infection (Shigella). Dental dams, or a flavoured condom cut into a square, can be used to reduce the risk by placing it over the anus for rimming.

Sex toys only present a risk of transmitting HIV and other STIs if shared and not cleaned properly (with warm water and soap). Some people use condoms on their toys and change the condom between sharing. Others prefer not to share and use only their own toys.

Fisting presents little risk of HIV transmission. Using latex gloves and plenty of lube can reduce the risks. It is safer not to engage in fisting prior to penetrative sex as this can cause bleeding and therefore increase the risk of HIV transmission during anal sex, particularly if a condom is not used.

Kissing, nibbling, licking, wanking, nipple pulling, touching, rubbing, massaging, spanking, stroking and water sports are all safe. Using hands or fingers (not shared) to penetrate the anus are also safe providing there are no cuts, sores or scratches on the hands.

Some bacterial infections, such as Shigella, that affect the gut and cause serious diarrhoea, are transmitted by getting bacteria into the mouth. Washing hands and showering can greatly reduce the risk of transmission and infection.

#### SEX WITH OTHER HIV POSITIVE MEN

## SOME HIV POSITIVE MEN MAY PREFER TO ONLY HAVE SEX WITH OTHER MEN WHO ARE HIV POSITIVE.

This is sometimes referred to as 'serosorting'.

You may decide not to use condoms because you are both positive. Some men may feel that unprotected sex with other positive men is a way to maximise pleasure and to reduce HIV-related stigma.

It's important to consider that there are still health issues which you may want to think about:

- Hepatitis C, a serious liver infection, can be passed on during unprotected anal sex between men if blood is present. Co-infection with HIV can mean that liver disease develops more quickly and more severely;
- other STIs can be transmitted during unprotected sex;
- sometimes we assume or guess someone's HIV status. Maybe you met on an
  internet site or at a certain venue where HIV status is assumed. Unless you
  talk about it, you probably won't know for sure whether another person is
  HIV positive.

BAREBACKING **SOME MEN ENJOY** DOINGIT IF YOU DO **ACCESS REGULAR STITESTS** 

#### **DRUGS AND SEX**

## SOMETIMES YOU MIGHT USE RECREATIONAL DRUGS WHEN YOU HAVE SEX.

Alcohol and recreational drugs can help us to relax socially, make sexual encounters easier, and heighten pleasure or sexual intensity. However, they can also affect our choices and our judgement and perhaps make us more likely to take risks during sex.

Be aware of your limits and your right to say no to sex or to the sexual acts that you don't feel comfortable with. Stick to what is safe for you and your partner(s). Be prepared, plan in advance – carry condoms and lube.

#### Viagra™

Viagra™, like any drug, can cause side affects. Of particular concern to men with HIV are the possible drug interactions if the person with HIV is already on anti-HIV medication. If your doctor prescribes erection drugs for you, ask about potential interactions with any medications you may be on. Be aware also of possible interactions if you plan to use recreational drugs. Here are some examples of possible interactions, but these may differ from person to person, and will depend on the type of medication you are taking or drugs you may use.

#### Viagra<sup>™</sup> + Protease Inhibitors (anti-HIV drugs)

Consult with your doctor. It's safer to take a low dose of Viagra $^{\text{TM}}$ , but safest not to mix erection drugs with protease inhibitors.

#### **DRUGS AND SEX**

#### Viagra<sup>™</sup> + Recreational Drugs (like ecstasy, speed, cocaine)

These all put a strain on the heart, which will be more dangerous if taken together.

#### Viagra<sup>™</sup> + Poppers

Both lower blood pressure and should not be taken together.

#### Protease Inhibitors + Recreational Drugs

Recreational drugs can have a much stronger effect on you as protease inhibitors can increase the concentration of the drugs in your body. Using Viagra™ (and other recreational drugs) may increase the durations of having penetrative sex which may damage a condom. It's advisable to always check condoms during sex and put on a fresh one if having sex for longer than 20 minutes. See more tips on using condoms on page 28).

#### **Poppers**

Using poppers during unprotected anal sex can increase the risk of HIV transmission, in particular if you are the receptive (bottom) partner. Poppers relaxes muscles in the body, including the sphincter muscles of the anus. This can cause the blood vessels in the anus to dilate thus making penetrative sex easier. This can also increase the risk of damage to the anus wall, potentially allowing semen to enter the bloodstream if bleeding occurs.

#### Mixing Drugs

Mixing any recreational drugs while on HIV medications can be extremely dangerous. Find out more by speaking with your HIV doctor.

## IT'S CRYSTAL CLEAR! IF YOU GET HIGH FOR SEX DISCOVER HOW TO LOWER YOUR HIV RISKS

#### **CHEMSEX**

CHEMSEX IS A SPECIFIC FORM OF RECREATIONAL DRUG USE AND INVOLVES USING ONE OR MORE OF THREE DRUGS, IN ANY COMBINATION, TO FACILITATE OR ENHANCE SEX, WITH OR WITHOUT OTHER DRUGS.

The three common drugs are meth, meph and G.

- Methamphetamine (crystal/crystal meth/Tina/meth);
- Mephedrone (meph/drone);
- GHB/GBL (G, Gina).

ChemSex commonly refers to sex that can sometimes last several days where there is little need for sleep or food. The heightened sexual focus enables more extreme sex, for longer, often with more partners.

Men (whether HIV positive or HIV negative) may engage in ChemSex for many reasons: to feel more sexually free; to overcome fear of rejection, sexual shame, and/or stigma; wanting 'better' sex, that lasts longer; wanting intimacy, to connect to others, to feel part of a group or community.

#### **CHEMSEX**

ChemSex is associated with extreme sexual disinhibition. People use ChemSex to do things that they don't usually do. Safer sex seem less important or appear not important at all. The risks, therefore, of HIV and STI infection and transmission is greatly enhanced.

Meth and meph are often injected (called 'slamming'). Sharing injections is common, increasing the risks of blood borne infections like HIV and hepatitis C.

As with the use of other recreational drugs, engaging in ChemSex can affect our choices and our judgement. Some people may feel unable to consent to sex when highly intoxicated. Be aware of your limits and your right to say no to sex or to sexual acts that you don't feel comfortable with. Stick to what is safe for you and your partner(s). Plan in advance – carry condoms and lube and do not share injecting equipment.

Drug interactions can be serious and difficult to predict, for example between alcohol and GHB/GBL. Side effects from ChemSex can be more severe than other commonly used recreational drugs. Short and long term side effects can include paranoia, psychosis, black-outs, chronic depression, anxiety, and weight-loss. There can also be a risk of overdose.

If you are concerned about ChemSex seek support (see page 43).

#### **CONDOM CONUNDRUMS**

## CONDOMS, WHEN USED CORRECTLY, REMAIN THE BEST WAY TO PREVENT HIV TRANSMISSION & MANY OTHER STIS.

Condoms come in different sizes. Try different sizes to find the one that fits you best. Condoms can be latex or non-latex (polyurethane). For those who may be allergic or sensitive to latex, or who are not comfortable using latex condoms, it may be useful to try a non-latex one. They can be sensitive and pleasure-enhancing, You can reduce the risk of condoms splitting or slipping off by following these simple steps:

- the risk of condom failure increases after about 20 minutes of penetrative sex, so it's advisable to check the condom during sex and replace it with a new one if you are having sex for longer than 20 minutes;
- never use saliva/spit as a lubricant; this increases the risk of a condom splitting because it dries quickly;
- when using lube, use only water-based or silicone-based lube and use plenty of it;
- put lube outside and all over the condom, and in and around the anus;
- apply more lube during long periods of sex;
- never put lube on the penis before putting the condom on: this can increase
  the risk of the condom slipping off;
- never use two condoms together: this can cause friction between both condoms increasing the risk of them splitting or slipping off.

Remember that using condoms is as much about protecting you as it is about protecting your partner.

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#### PEP (POST EXPOSURE PROPHYLAXIS)

IF YOUR PARTNER IS EXPOSED TO HIV THROUGH UNPROTECTED SEX OR IF A CONDOM TEARS OR SLIPS OFF, THERE IS A TREATMENT OPTION AVAILABLE THAT MAY PREVENT INFECTION.

PEP involves taking a combination of at least two anti-HIV drugs for four weeks and aims to prevent HIV replicating itself in the body.

PEP must be taken within 72 hours (3 days) of exposure to HIV, but the earlier the treatment starts the better.

PEP is only available from some sexual health and STI clinics and some Hospital Emergency Departments. Not everyone needs to be prescribed PEP. There are guidelines for prescribing and each person is assessed based on the information provided in relation to the potential risk of exposure to HIV.

If you and/or your partner find yourselves in such a situation, seek medical advice as soon as possible.

More information on PEP and where to get it is available at www.man2man.ie/pep.

## CAN LAST A LONG TIME HIV LASTS **A** LIFETIME TIME T● GET PEP?

#### Prep (Pre exposure prophylaxis)

Prep is a new hiv prevention Strategy that involves HIV-Negative people taking Antiretroviral drugs (arvs) To reduce the risk of becoming Infected with hiv if sexually Exposed to the virus.

Research shows that PrEP is highly effective in preventing the sexual transmission of HIV as long as the medication is taken as directed. The PROUD study in the UK reported that PrEP reduced the risk of HIV infection by 86% for men who have sex with men. You can read more about this study at www.proud.mrc.ac.uk.

At the time of writing this information (June 2016), PrEP is not yet available in Ireland, but access is expanding globally. The World Health Organisation (WHO) recommends that in all countries, PrEP should be available to men who have sex with men, as part of an overall HIV intervention. The European Centre for Disease Prevention and Control (ECDC) advises European countries to consider integrating PrEP into their existing HIV prevention package for those most at-risk of HIV infection, starting with men who have sex with men.

#### Prep (Pre exposure prophylaxis)

Currently (June 2016) in Ireland some STI services and groups are engaged in research and are advocating for the availability of PrEP. Keep up to date about access to PrEP at www.prepwatch.org and at man2man.ie.

PrEP does not prevent other STIs. Condoms, when used consistently and correctly, are the best way to prevent the transmission of HIV and other STIs.

# CAN BE THE BENEFIT OF HIV TREATMENT BEING INVISIBLE CAN BE THE IMPACT OF HIV STIGMA

#### VIRAL LOAD AND HIV TRANSMISSION

## VIRAL LOAD IS THE TERM USED TO DESCRIBE THE LEVELS OF HIV IN THE BODY AT ANY ONE TIME. IT IS DETERMINED WITH A BLOOD TEST.

A higher viral load is associated with a higher risk of HIV transmission. With successful HIV treatment, the viral load can become very low or 'undetectable' in the blood, and this significantly reduces the risk of HIV transmission.

The amount of virus in the blood is usually the same as the viral load in other bodily fluids – semen, vaginal fluid and rectal fluid (the fluids commonly associated with the sexual transmission of HIV). This means that when the viral load in the blood decreases, it generally also decreases in other fluids. However, the viral load in each of the bodily fluids can sometimes be different.

For many people on long term HIV treatment, with an undetectable viral load, the risk of transmitting the virus to a partner(s) is negligible.

A lot of people with HIV see the reduction of infectiousness as a very important benefit of HIV treatment, which decreases anxiety about onward transmission to a sexual partner. People are now taking their viral load into consideration when thinking about safer sex.

#### VIRAL LOAD AND HIV TRANSMISSION

If you want to stop using condoms, it is important to discuss this carefully with your partner(s) and ensure they are also comfortable with the decision. This information may be new to a lot of people who do not have HIV; it may take time for someone to understand and trust what you are saying. It is also important to remember that while using this approach will protect your partner(s) from HIV, it does not protect them or you from other STIs.

The following are some guidelines for men who may be thinking about using this approach to reduce the risk of HIV transmission:

- the viral load can increase if doses of HIV treatment are missed. Take pills
  exactly as prescribed. Adherence to treatment is critical to keep the viral load
  undetectable;
- check to make sure the blood viral load is undetectable before starting this
  approach, and get regular viral load tests to ensure it remains undetectable.
  As a guideline, it is suggested that you and your partner(s) wait until your viral
  load has been undetectable for at least six months before making any decisions
  about whether to stop using condoms;
- get tested regularly for STIs. If either partner has an STI, start treatment immediately and consider using condoms during this time;
- if you have not already done so, get vaccinations for hepatitis A and B;
- Use other HIV prevention strategies as much as possible, particularly condoms and lube. This will help reduce the overall risk of HIV transmission.

#### VIRAL LOAD AND HIV TRANSMISSION

 If you use this approach without disclosing your HIV status, it is important to remember that in some countries, having sex without condoms without disclosing that you are HIV positive is a criminal offence, regardless of the likelihood of HIV transmission

# ASKING "ARE YOU CLEAN?" WON'T PREVENT STI'S USING A

CONDOM WILL

#### SEXUALLY TRANSMITTED INFECTIONS (STIs)

## HAVING ANOTHER INFECTION CAN INCREASE THE RISK OF HIV TRANSMISSION.

STIs can increase the viral load in a HIV positive man increasing the risk of HIV transmission during unprotected sex.

If a HIV negative partner has another infection, this can increase the risk of HIV being passed on during unprotected sex. For example, STIs like genital warts, herpes and syphilis can cause sores, blisters or broken skin which can create openings where HIV can get in or get out.

Most STIs can be treated, but some can be more difficult to treat when you have HIV. Remember that some sexual practices which may be described as 'safer' in terms of HIV transmission, might still be risky for transmission of other STIs like syphilis.

Keep in mind that it is possible to have an STI and show no signs or symptoms. If you are sexually active it is advisable to have a regular STI check-up every six months.

Vaccinations are available for Hepatitis A and Hepatitis B and are recommended for all men. More information on STIs is available at www.man2man.ie.

#### HIV IS NOW A MANAGEABLE CHRONIC ILLNESS, BUT STIGMA AND DISCRIMINATION STILL PERSISTS.

In a sexual context, people are sometimes rejected because they choose to disclose they are HIV positive. While some men may make an informed and personal choice not to have sexual relations or relationships with HIV positive men, others may make decisions and choices that stem from misinformation, myths, fear, and ignorance, based upon an outdated reality of what it is to live with HIV today.

Men have reported being asked stigmatising questions on social contact and sexual networking sites such as 'are you clean/unclean?' or 'have you got anything?'. Name-calling has also been reported when a person discloses their HIV positive status such as 'leper' and 'criminal'.

HIV positive and HIV negative men can play a vital role in challenging negative, stigmatising and judgmental attitudes, particularly on social contact websites and Apps.

If you are, or have been, offended by comments or questions you have received about your HIV status (or someone else's), and are contemplating challenging this, consider the following:

#### **STIGMA**

- Make sure you feel safe and comfortable when starting or joining the conversation. If you are upset or angered by a remark, consider time-out before responding;
- Try to establish the facts about why someone might make a derogatory or stigmatising comment. Some men may make comments because of fear or misinformation:
- Some men may be well-informed about HIV. They may just choose not to have sex with someone who is HIV positive. That is their choice to make;
- remember this is your opportunity to educate and inform, not to judge someone else;
- know where to direct people for further information about HIV (for example online at www.man2man.ie or to an HIV organisation):
- consider (while no one likes to give in) that some people are not worth the
  effort and will not change! Know when it is time to end the conversation.
  Besides there's always the 'block' button!

If you are affected by HIV-related stigma, and/or discrimination, seek support and advice (see page 43).

#### CONDOMS

WITHOUT THEM

IF YOU DO

ACCESS REGULAR

STITESTS

#### THE LAST WORD - RESPONSIBILITY

#### YOUR SEXUAL HEALTH IS YOUR RESPONSIBILITY. CONDOMS OFFER THE BEST PROTECTION AGAINST THE TRANSMISSION OF HIV.

Preventing new HIV infections is a shared responsibility. When having sex with others, everyone involved (whether HIV positive or HIV negative) has an individual and collective responsibility to take steps to prevent infection, including seeking out information and making informed choices.

Whatever you choose, the basic safer sex messages remain the same:

- use condoms and lube consistently to prevent HIV and STI transmission and infection:
- get tested if you have ever had unprotected sex and don't know your HIV status;
- get tested regularly for STIs (whether you are HIV positive or negative).

Barebacking and unprotected sexual activity is a choice of some men who have sex with men. If you choose to have unprotected sex there are a number of ways you can reduce the risk of HIV transmission and infection:

- taking HIV treatment and considering viral load levels;
- access to PEP;
- HIV positive men assuming the 'bottoms up' position during unprotected anal sex (sometimes called 'strategic positioning');
- PrEP not yet available in Ireland.

#### SERVICES AND SUPPORT

## FREE COUNSELLING AND SUPPORT SERVICES FOR PEOPLE LIVING WITH HIV AND PARTNERS

www.man2man.ie

#### **GAY MEN'S HEALTH SERVICE**

Free counselling service, condoms and lube. Outhouse, 105 Capel Street, Dublin 1 Tel: 01 873 4952 Email: info@outhouse.ie www.gmhs.ie

#### **POSITIVE NOW**

Members access to peer and group support. Online chat rooms. 70 Eccles Street, Dublin 7. Tel: 01 873 3799 Email: hello@positivenow.ie www.positivenow.ie

#### HIV IRELAND

Free counselling service, condoms and lube. 70 Eccles Street, Dublin 7. Tel: 01 873 3799 Email: info@hivireland.ie

#### GOSHH

Counselling and Peer Support Groups. Free condoms and lube. Redwood Place, 18 Davis Street, Limerick. Tel: 061 314 354 Email: info@goshh.ie www.goshh.ie

#### THE SEXUAL HEALTH CENTRE

Support and Advice. 16 Peters Street, Cork Tel: 021 427 6676 Email: info@sexualhealthcentre.com

#### AIDS WEST

One-to-One and Peer Support. Ozanam House, St. Augustine Street, Galway. Tel: 091 566 266 Email: info@aidswest.ie

#### GAY SWITCHBOARD IRELAND

Helpline 7 days a week. Online chat service at weekends. Tel: 01 872 1055 Email: ask@ghn.ie

For your nearest free local HIV medical care centre in Dublin, Cork, Limerick and Galway visit: www.man2man.ie

# HIV STATUS THERE ARE BENEFITS OF HIV MEDICATION

### HIV+ SEX INFORMATION FOR **HIV POSITIVE** AND HIV NEGATIVE MEN WHO HAVE SEX







