

Gay, Bisexual and Other Men Who Have Sex with Men Are Disproportionately at Risk of Acquiring a Sexually Transmitted and Blood Borne Infection, Especially HIV and Syphilis

WHY DID WE RESEARCH THIS TOPIC?

- There's a lack of up-to-date information about the prevalence of HIV and other sexually transmitted and blood borne infections (STBBI) among gay, bisexual, and other men who have sex with men (GBM) in Canada's largest cities.
- Because of this lack of data, policy makers are limited in their ability to fine-tune and implement new strategies to reduce infection rates.
- The health consequences of HIV and STBBI among GBM are harmful; therefore, understanding their frequency among GBM in Canada is of utmost importance.



Sexually Transmitted and Blood Borne Infections:

An infection that is passed on from one person to another during sexual activity.

HOW DID WE RESEARCH THIS?

- We recruited 2,449 GBM across three of Canada's largest cities; 1,179 in Montreal, 517 in Toronto, and 753 in Vancouver. We did this through tapping into a participant's existing social networks.
- We tested participants for HIV, hepatitis C, hepatitis B, chlamydia, gonorrhea and syphilis.
- Participants also filled out a questionnaire about their social life, community involvement, relationships and sexual health practices.

WHAT DID WE LEARN?

- When it came to HIV, prevalence was lower in Montreal (14.2%) than in Vancouver (20.4%) or Toronto (22.2%).
- GBM in Vancouver were most likely to have never been tested for HIV (18.6%). But among all participants who had been tested, GBM in Vancouver were the most likely to have been tested in the past six months (61.9%).
- GBM in Montreal (74.9%) and Vancouver (78.8%) were more likely to have been tested for an STBBI other than HIV within the past six months compared with GBM in Toronto (67.4%).
- However, GMB in Montreal (17.9%) and Toronto (17.5%) had a greater proportion of participants who had never been tested for an STBBI other than HIV compared with Vancouver (12.9%).
- Across the three cities, we found a high prevalence of GBM with a history of syphilis infection (14.4%-15.9%), which is consistent with previous findings.
- Chlamydia prevalence ranged from 3.1%-5.8% across the three cities.
- The prevalence of gonorrhea was lowest in Vancouver (2.1%) compared to Montreal (5.5%) and Toronto (9.1%)
- The rate of current or past hepatitis B infection among GBM was 1.3% in Toronto, 0.6% in Montreal and 0.3% in Vancouver.

- A history of hepatitis C infection was greater among men from Montreal (7.3%) than Toronto (3.9%).
- GBM in Montreal (42.5%) reported having more condomless sex with a partner of opposite HIV status than men in Toronto (36.9%).
- More men in Vancouver reported using PrEP (Pre-exposure prophylaxis) in the past six months (18.9%) than in Toronto (11.1%) and Montreal (9.6%).



Pre-exposure prophylaxis (PrEP):
A pill that people regularly take to prevent getting HIV.

WHAT ARE THE IMPLICATIONS OF THESE FINDINGS?

- It is essential to scale up both PrEP use and STBBI testing in order to reduce HIV and the transmission of other STBBI among GBM in Canada.
- We need more HIV testing specifically for the minority of GBM who have never been screened. This is especially true in Vancouver, which had the highest rate of men who had never been tested for HIV.
- Because condomless anal sex is relatively common among GBM in all three cities (36.9%-42.5%), screening for additional STBBI like syphilis, chlamydia, gonorrhea, hepatitis B, and hepatitis C is essential.
- Our findings show that there hasn't been a marked increase in screening for STBBI (not including HIV) since the last major study in 2011.

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