

16th Annual Conference of the National HIV Nurses Association (NHIVNA)

National HIV Nurses Association

David Stuart

Chelsea and Westminster Hospital, London

26-27 June 2014- City Hall, Cardiff

@NHIVNA @56deanstreet @davidastuart <u>ChemSex</u>" 10-10 8 BBChemPlay.com The sexiest MEN online and ready to **parTy** CLICK TO VIEW Sexualised Drug Use by MSM



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24 hour Saunas



Individuals/parties at homes via online "sex apps"



Typical, 3 day episodes ("benders") Chaotic, unboundaried, unsafe sexual behaviour Between 1 and 15 sexual partners per episode Typically happenning on a weekly basis Drugs sought/acquired/shared through on-line activity Popularity of "Barebacking" (Condom-less sex) Injecting use on steep rise (- 0% 2005 - 30% 2011 - 80% 2012)* **Reluctance to access non-LGBT services***

*REF; Stuart D. Sexualised drug use by MSM: background, current status and response. HIV Nursing Journal.2013;13.1(Spring 2013)

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Consequences; main concerns;

BBV's (HIV, HCV) and costs
STI's (steep rise in Shigella and Syphilis infections)
Overdosing (GHB/GBL)
Physical dependence/withdrawals (GHB/GBL)
Drug-induced psychosis/section orders
Well-being/poverty/crime
Loss of ability to enjoy sober sex

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WHY?

- Traditional drug services remain opiate/crack/alcohol/homelessness focused
- GUM services slow to address these trends
- Gay sex is about risk/danger/ disease/protection/getting tested/disclosure
- Confusion about "safe sex"; Undetectable/PrEP/'Truvada-Whore' stigma
- Sexualised norms/online apps highly sexualise/complicate gay sexual identity

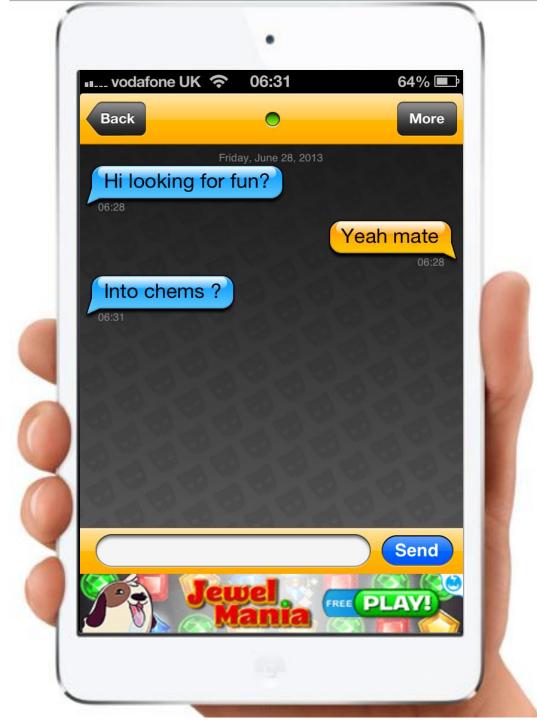


People struggling with

unprecedented on-line behaviour

norms

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^{@davidastuart} 56 Dean Street Response ^{@56deanstreet} @NHIVNA

Audit, Jan 2014; 144 MSM presentations at 56 Dean Street in 1 week

•9/144 MSM were asked about drug use (6%)

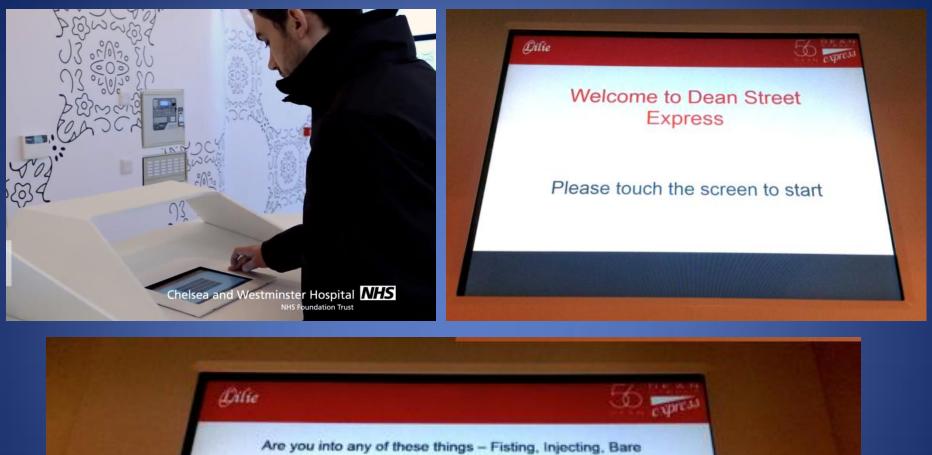
•9/9 admitted to previous club drug use (100%), and 8/9 had used in the last 3 months.

•1/9 clients was offered drug related support; 0/9 received any onward referral

GUM staff clearly needing guidance/support

- Full time Drugs Worker employed in clinic to address ChemSex behaviours
- Staff trained; awareness; what to ask; how to effect a happy referral to drug use support (usually to LGBT drug service/charity)
- Compulsory question for all MSM on Proformas Trust-wide; all MSM asked routinely about fisting, injecting, barebacking, ChemSex.
- Care Plans/Treatment Outcome Profiles* tailored to ChemSex'ers
- Needle/Syringe provision available in clinic
- Partnership work (Antidote, GMFA, Hep C Trust, Turning Point)

@davidastuart Simplifying access to treatment/rebranding @NHIVNA



backing, Chem sex?



No



REJECTION

Hep C

Isolation

Horny

HIV

Intoxicated

° (

Glad we're hooking up finally. Fancied you for ages. See you when you get here.

Me too. This'll be hot l'll bring Chems Do you BB?

HELP YOUR CLIENT/PATIENT PHRASE THEIR RESPONSE HERE



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HOOKING UP ONLINE

MR.

FUN?

CHEMS?

BB?

Are you getting what you want from using apps?

56 Dean Street and GMFA are hosting a series of workshops around hooking up online.

- Share your experiences
- Develop boundaries
- Build your confidence
- Communicate better

hoto: © Chris Jepson, www.chrisjepson.com



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When: Third Saturday of every month Where: 56 Dean Street, Soho Time: 11am to 12.30pm

For more information or to book Email: David.Stuart@chelwest.nhs.uk



When did YOU last have

sober sex?

Are Tina, Meph or G a regular part of your sex life? When was the last time you dated, or had someone sleep over?

If it's been a while ..

it can be difficult getting back into the swing of Sober Sex;

Do you want to be a part of a gay mens' discussion group that meets to explore our own fears, reluctance, or other issues around sober sex?

The first of these meetings will be Saturday 8th March 1pm to 2.30pm

at 56 Dean Street in Soho.

For more information, or to book a place, please contact David at 56 Dean Street, on david.stuart@chelwest.nhs.uk







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Walk-In appointments are now available at the following times;

Needle/syringe provision

at

Dean Street

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- •Tuesdays, 5 to 7pm
- •Thursdays 1 to 4pm
- •1st Saturday of each month, 1 to 3pm
- •3rd Saturday of each month, 1 to 3pm

ChemPaycon Ceder Dary Cader of Sexualised Drug Use by MSM

Awareness-raising events for Health Sector

- •'Consent to Sex while High on Drugs (ChemSex)'
- •'Safer Injecting techniques'
- •'How to ask ChemSex questions' (for nurses)
- •'How to work with ChemSexers' (for Health Advisors)
- •'How to discuss online-hooking up with your patients'

General drugs awareness
ARV – recreational drug interactions

With support from



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Hosted by Pat Cash of QX Magazine, in association with David Stuart of 56 Dean Street. 56 Dean Street will also be on site offering free sexual health testing and advice upstairs.

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Questions to ask

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- •"Do you use Party Drugs for sex?"
- •(and if so...) "Tina, Mephedrone or G? (Ketamine?)"
- •"Are you taking G every day?"
 - (and if so.. It can be dangerous to stop without medical advice)
- •"How long do you stay awake for?"
- "Have you had any bad experiences?" (eg; paranoia)
- "Do you sometimes regret the choices you make when high?"
- •When did you last have sober sex?
- "What's your non-sexual/non-clubbing social life like?"
- •"Are you slamming (injecting)?"
- •"Do you want to talk to someone about being safer with drugs?"

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<u>Acute concerns</u>

- If patients are using GHB/GBL, check if they are using every day (for 4 consecutive days or more); in this case, they should be advised *not* to stop using without medical advice.
- If they have no more supply of GBL, they ought to go immediately to A&E. Call ahead to ensure the A&E duty staff are aware of the GBL withdrawal dangers.
- If patients present with what appears to be drug-induced psychosis (commonly caused by Methamphetamine/Mephedrone use/lack of sleep), they can sometimes be re-assured that they are safe. Some services prescribe 5mg diazepam twice daily for 2 days. Assess if patient is a risk to themselves or to others, and refer to A&E if you feel it appropriate.

Recommendations

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 Create a 4 week drug use survey within your clinic, to assess need.

•Add compulsory drug use questions to MSM proformas.

- ChemSex training for GUM/HIV staff
- Needle/syringe provision for MSM in GUM services

•Develop a working relationship with your local drug and alcohol service (& Substance Misuse commissioning teams))

 Improve relationships with MSM Voluntary Sector organisations/charities

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