

Speaker Name	Statement
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How safe are you?

A guide to harm reduction and chemsex'ers health needs

Annette Colcutt – Lead Health Adviser

Health needs of ChemSexers

MSM engaging in Chem Sex are:

- More likely to report unprotected AI
- Have higher rates of STI's
- Have higher numbers of sexual partners
- Are at greater risk of overdose when taking GHB/GBL
- Maybe Injecting (Slamming) Crystal Meth or Meph and unaware of safer injecting techniques

The Chemsex Study , Sigma research, 2014

Best Practice

BASHH Hep C Guidance 2015

Recommends we offer testing for Hep C

- To all PWID, including people who inject steroids and recreational drug use and all HIV positive patients.
- MSM attending Chem Sex parties reporting multiple partners, GHB/GBL, Mephedrone and Crystal Meth use.

BASHH MSM Working Group

- Drug use may be a marker of high risk behaviour and a detailed sexual history is required from this group
- All MSM reporting Chem Sex, Known to be HIV positive or rectal LGV should have a Hep C test.

Routinely asking about chems enables us to...

- Offer the right tests
- Offer brief interventions/access to support
- Assess knowledge and give information about safety and dosing
- Explore the impact of Chems on sexual decision making and sexual health

Challenges in practice

- Identifying chemsex'ers
 - probably holding down regular jobs
 - may not perceive themselves as high risk
 - may not consider themselves a drug user
- Whose responsibility is it to raise?
 - Patients fears of being judged negatively by HCP
 - Reluctance of HCP to ask
 - Language
 - knowledge i.e.terminology
 - Worry about offending patients
 - What to do next?

What do we need to establish?

- ‘The Operational’
 - What?
 - How often?
 - Administration/route?
- ‘The Self-evaluation’
 - Comfort with current chem use
 - Perceived control of behaviour?
 - Concerns?

Questions to ask

Operational

- Are you using chems for sex? Which ones? Do you slam?
- Are you using G everyday?
- How long are you staying awake for?

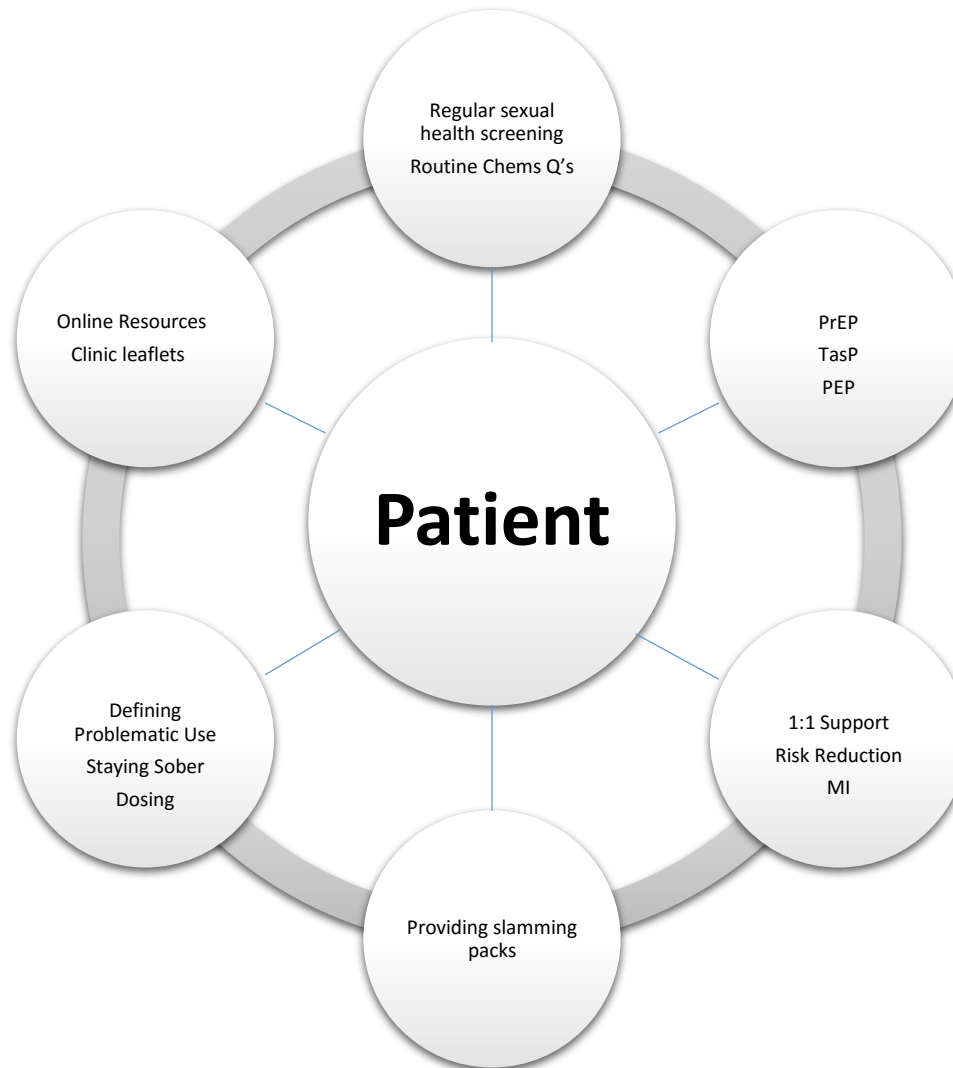
Self- Evaluation

- How happy are you with your current use?
- How confident do you feel in making decisions around your use and sticking to them on a night out?
- Have you ever tried to stop and how did that go?
- Do you have any concerns about your current chems use and where it leads sometimes?
- What are those concerns?

Making questions about chems part of routine history taking

- Helps to normalise
- Avoids having to make a judgement
- Standardise the service offered and enabling ease of data gathering/audit
- Makes it a routine and therefore comfortable line of enquiry for HCPs
- Enables a dialogue between the HCP and patient which is a basis for offering support

Harm reduction interventions



MI Assessment

IMG_7007 - Windows Picture and Fax Viewer

MI Assessment proforma (DL)

1) What are your thoughts about this referral?

2) How important is it for you to reduce your risks?

3) **Desire to change** – how much change would you like to make?

No change / **Not sure a little change** / **Yes – substantial change**

A No change
Any reason not to change

B Not sure - a little change
Reason to change / not to change ?

Importance of change
1 2 3 4 5 6 7 8 9 10

Confidence to change
1 2 3 4 5 6 7 8 9 10

What would help to increase your confidence ?

Tel fup / 3/12 fup

C Yes – substantial change
What changes would you like to make ?

Importance of change
1 2 3 4 5 6 7 8 9 10

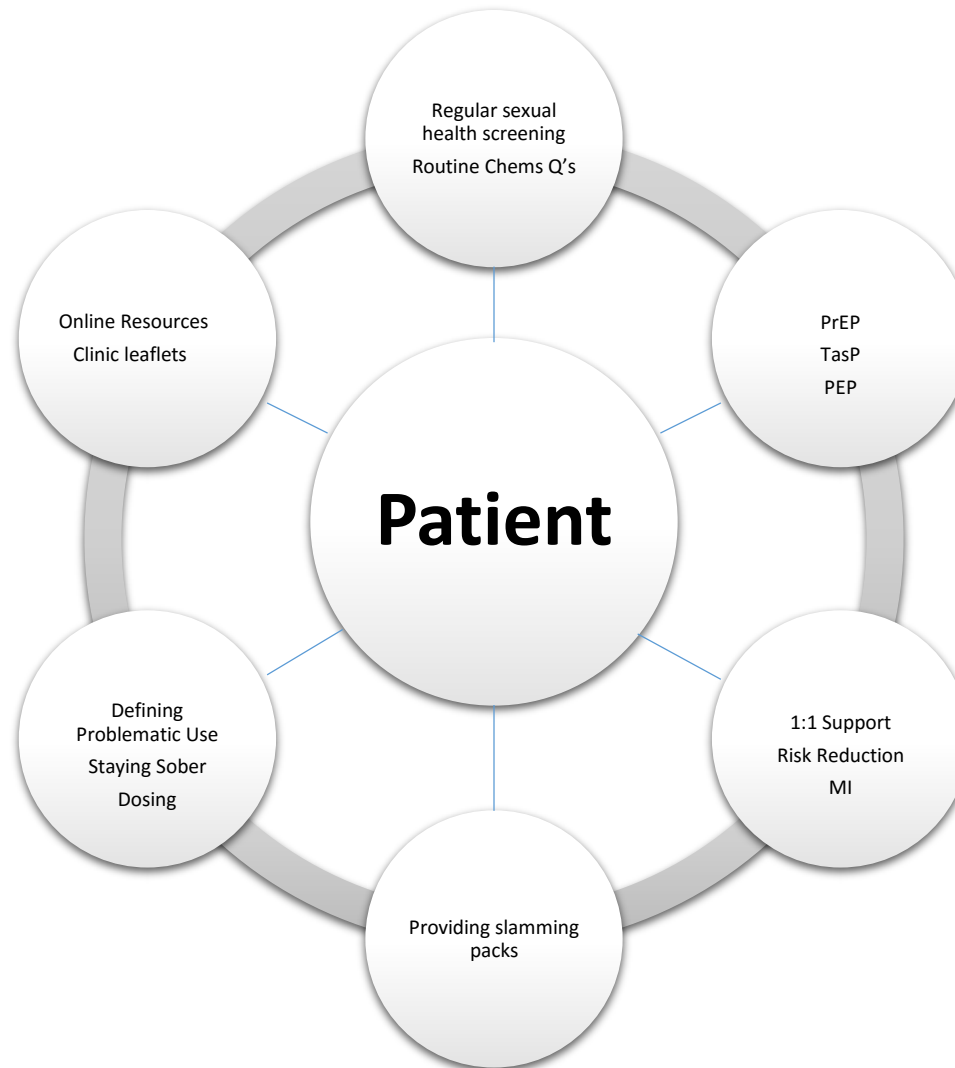
Confidence to change
1 2 3 4 5 6 7 8 9 10

What is your action plan ?
What could you give yourself for completing each action point ?
What you do if you get stuck ?

Tel fup / 3/12 fup

start | 3 Microsoft O... | Lille - Sexual He... | NHIVNA 2.3 No... | 2 Windows Ex... | Microsoft Excel ... | IMG_7007 - Wi... | 11:05

Harm reduction interventions



Slamming Packs

If you're going to slam, do it safely.

Slam as safely as you can

Inject properly – if you're injecting the wrong way it can cause veins to shrink, collapse or shut down completely in the long term. Injecting incorrectly also causes the tissue to break down, causing sores and abscesses, which can get infected and spread. They also don't look very nice.

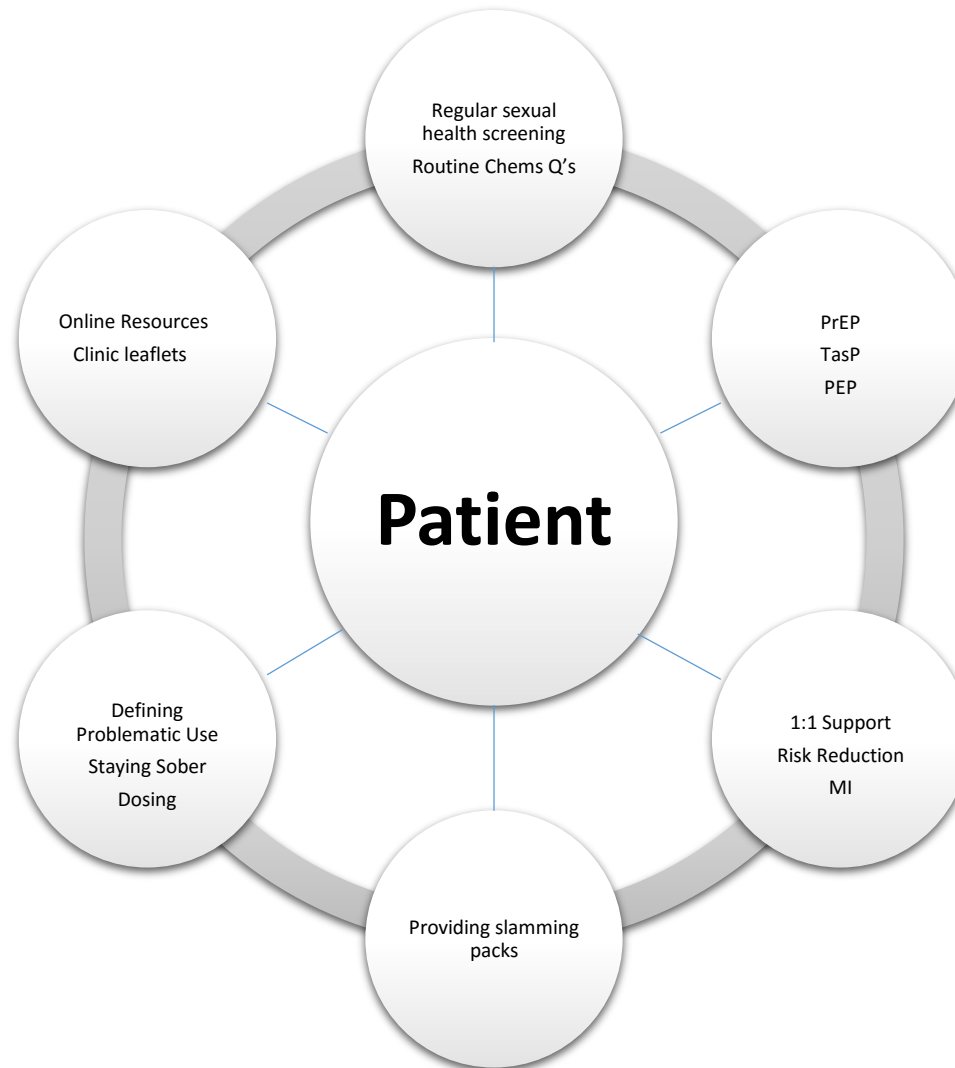
Don't share – sharing your equipment can pass on hep C and HIV. You can get different coloured needles so you know who is using which needle. These can be found in slam packs.

Don't reuse – needles go blunt after a few uses. Once they are blunt they can damage your arms and they don't feel nice to use.

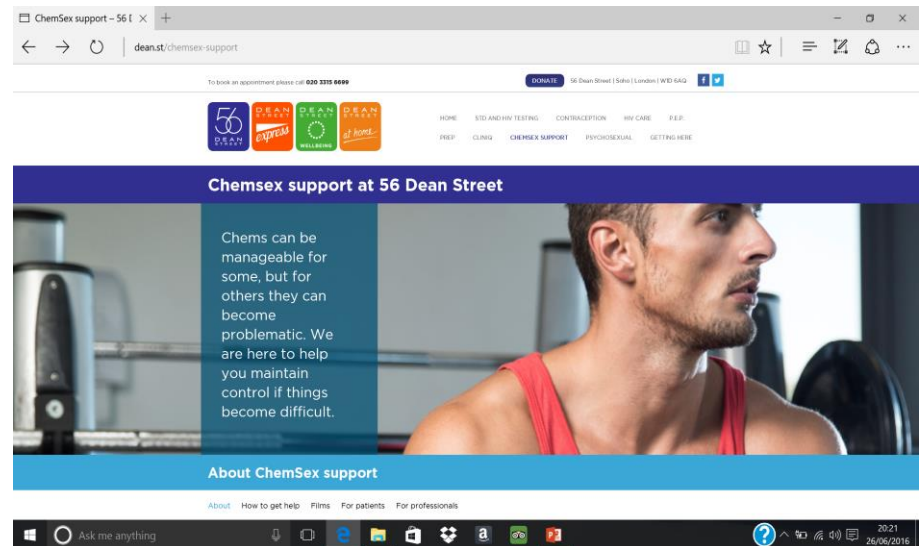
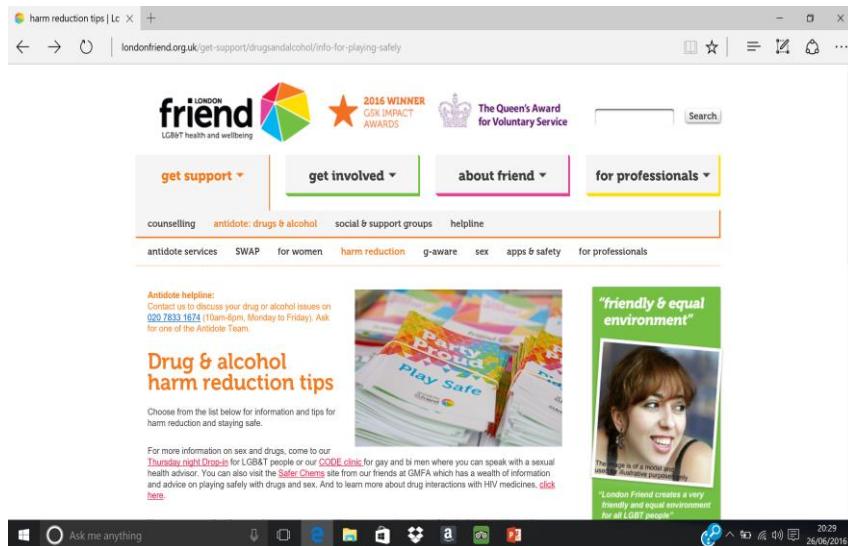
Make sure you are taught how to inject properly



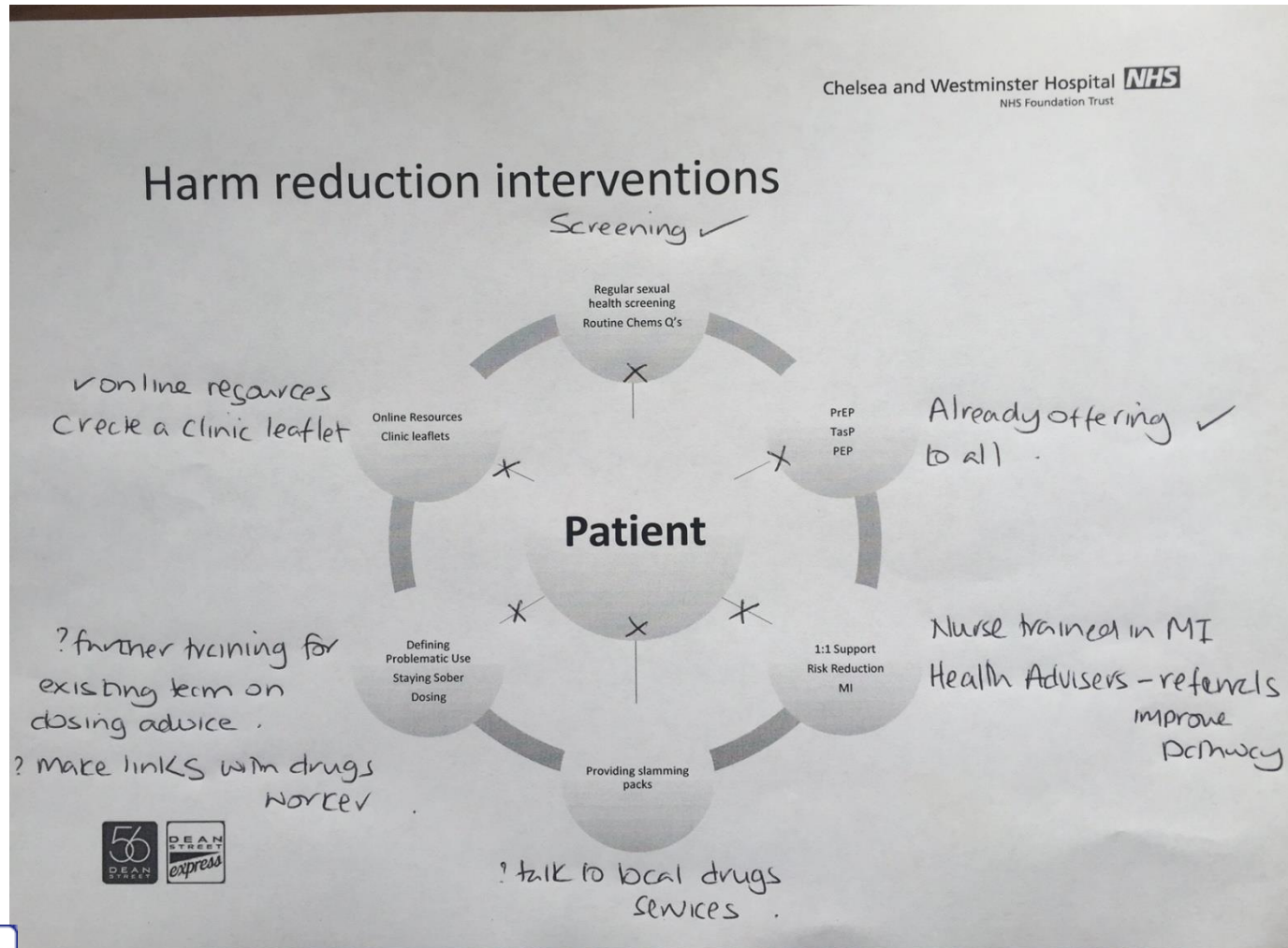
Harm reduction interventions



Online Resources



Harm reduction interventions



Useful links and papers

- Stuart D. Sexualised drug use by MSM (ChemSex): a toolkit for GUM/HIV staff. HIV Nursing Journal.2014;14(Summer2014):15
- The Chemsex study <http://sigmaresearch.org.uk/files/report2014b.pdf>
- www.chemsexsupport.com/chemsex-co-infection-booklet
- <http://dean.st/chemsex-support/>
- <http://i-base.info/guides/prep>
- <http://londonfriend.org.uk/get-support/drugsandalcohol/>