

UNPROTECTED ANAL INTERCOURSE ASSOCIATED WITH RECREATIONAL DRUG USE AMONG YOUNG MEN WHO HAVE SEX WITH MEN DEPENDS ON PARTNER TYPE AND INTERCOURSE ROLE

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Objectives: To measure associations of unprotected anal intercourse (UAI) with global and situation-specific substance use, by sexual partner (regular vs. casual) and role (insertive vs. receptive).

Methods: Prospective cohort of young HIV-seronegative men who have sex with men (MSM), from 1997-2002. Substance use and UAI were defined as any during the past year. Substance use measures were global (any use) as well as sexual situation-specific (use of a drug during or within two hours of sexual intercourse). Odds ratios were adjusted for age and calendar year.

Results: UAI was associated with sexual situation-specific use of marijuana (OR: 1.43: 95%CI: 0.99, 2.07), crystal methamphetamine (OR: 1.75: 95%CI: 1.00, 3.05), ecstasy (OR: 1.88: 95%CI: 1.20, 2.95) and ketamine (OR: 2.17: 95%CI: 1.08, 4.33): global use associations were similar. Additional associations of UAI with alcohol (OR: 1.93: 95%CI: 1.08, 3.47) and gamma-hydroxybutyrate (OR: 1.98: 95%CI: 1.01, 3.87) were observed using sexual situation-specific measures. GHB and ketamine were specifically associated with insertive UAI, but only with regular partners [K OR: 2.87(1.20-6.85): GHB 2.62(1.16-5.93)]. Crystal methamphetamine tended to be associated with receptive UAI, but only with casual partners (OR: 1.75: 95%CI: 0.95, 3.21). In contrast, marijuana associations with UAI were non-specific, indeed stronger for non-sexual use (OR: 1.96: 95%CI: 1.39, 2.79). Associations of UAI and marijuana use were observed only among regular partners: there were no significant associations with casual partners.

Conclusions: Type of drug use measure, partner type (regular vs casual) and intercourse role (insertive vs receptive) are important determinants of the association of UAI and use of specific substances. Research and prevention efforts to reduce sexual transmission of HIV among MSM need to account for type of relationship and sexual positioning when relating sexual risk and substance use.