

### Depression related to AIDS mortality among HIV+ women

Research has shown associations between depression and immune depression and other negative health outcomes, such as morbidity and mortality. This study examined the relationship between depressive symptoms and AIDS-related mortality. The sample was 1716 HIV-positive women at six clinic sites nationwide from 1994 and 2001.

Chronic depressive symptoms were significantly associated with a greater likelihood of AIDS-related mortality, even after controlling for clinic, substance abuse, and sociodemographic factors. However, despite the impact of depressive symptoms, women who received mental health services were significantly less likely to die from AIDS-related causes during the study period. Also, not only chronically but recently was associated with AIDS-related mortality.

Treatment for depression is an important component of care for HIV-positive women, especially those at end-stage disease.

SOURCE: Cook, J. A., et al. (2004). Depressive symptoms and AIDS-related mortality among a multisite cohort of HIV-positive women. *American Journal of Public Health, 94*, 1133-1140.

### Unprotected anal intercourse among MSM related to drug use

Some literature indicates associations between patterns of alcohol and drug use with high-risk sexual behaviors reported by men who have sex with men. This study measured associations of unprotected anal intercourse (UAI) and substance use by sexual partner (regular vs. casual) and insertive (I) or receptive (R) role.

UAI was significantly associated with sexual situation-specific use of marijuana, crystal methamphetamine, ecstasy and ketamine. Situation-specific associations with alcohol and GHB were not seen with global measures. GHB and ketamine were specifically associated with IUAI with regular partners, and methamphetamine with RUAI with casual partners.

Further delineation of complex pathways of drug use in relation to sexual behaviors related to acquisition and transmission of HIV among MSM requires a fuller understanding of the contexts of drug use, sexual partnerships, and anal intercourse role.

SOURCE: Rusch, M., et al. (2004). Unprotected anal intercourse associated with recreational drug use among young men who have sex with men depends on partner type and intercourse role. *Sexually Transmitted Diseases, 31*, 492-489.

### Sexual transmission of HCV low among heterosexual couples

The risk of sexual transmission of hepatitis C virus was evaluated among 895 monogamous heterosexual partners of HCV chronically infected persons. Data indicate that the risk of sexual transmission of HCV within heterosexual exclusive couples is extremely low or even null. No general recommendations for condom use seem required in exclusive partnerships with HCV-infected partners.

SOURCE: Vandelli, C., et al. (2004). Lack of evidence of sexual transmission of hepatitis C among monogamous couples: Results of a 10-year preprospective follow-up study. *American Journal of Gastroenterology, 99*, 885-859.

### Rapid HIV testing acceptable during labor

Voluntary rapid HIV testing for women was offered in 16 hospitals. Rapid HIV testing was found to be feasible and delivers accurate and timely test results. Test acceptance rate was 85%. Rapid HIV testing provides HIV+ women prompt access of intrapartum and neonatal antiretroviral prophylaxis.

SOURCE: Bulterys, M., et al. (2004). Rapid HIV-1 testing during labor. *Journal of the American Medical Association, 292*, 219-223.

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The opinions expressed here do not necessarily represent those of the cooperating universities.

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# RAP\* Time



## RURAL CENTER *for* AIDS/STD PREVENTION

A JOINT PROJECT OF  
INDIANA UNIVERSITY, PURDUE UNIVERSITY,  
and UNIVERSITY OF COLORADO

\*Rural AIDS/STD prevention. rap (rap) v. *Slang*. To talk freely and openly.

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## HIV-positive women report higher levels of unprotected sex after starting HAART

The benefits of highly active antiretroviral therapy (HAART) include improved life quality and physical and psychological functioning. As a result of these gains, persons receiving HAART may increase their sexual behavior. Some may believe that there are fewer consequences of sexual risk behavior and, hence, perceive less risk of transmitting HIV to a sexual partner because of HAART. The extent these individuals participate in unprotected sex has been understudied.

This study assessed the association between initiation of HAART and sexual risk behavior among HIV-positive women.

### Methodology

724 women who began HAART between January 1996 and January 2001 at six cities completed questionnaires and a physical examination at six month intervals. Three outcomes related to sexual activity with a male partner were assessed: (1) vaginal, oral, or anal sexual activity with one or more partners during the past six months; (2) among sexually active women, having two or more sexual partners during the past six months; and (3) among sexually

active women who reported vaginal intercourse, consistency of condom use during vaginal sex (always vs not-always) in the past six months. Participants were asked if they had been diagnosed with an STD in the past six months. Depression and substance abuse variables were also assessed.

### Outcomes of the Study

Slightly over one-half of the women were Black, about one-quarter were Hispanic, and about one-fifth were White or other race/ethnicity. Median age at HAART initiation was 38 years. About one-third reported less than a high school education. Major findings include:

- Nearly nine of ten reported sexual activity during the study period.
- About one-tenth reported more than one sexual partner during the study period.
- About one-fifth did not consistently use condoms during the study period.
- Participants were more likely to report inconsistent condom use after beginning HAART than before.
- STD diagnoses were associated with inconsistent condom use.
- Sexually active women were less

likely to report having two or more partners during a six-month period after beginning HAART than before taking HAART.

- Women who reported using drugs or alcohol were more likely than those who did not to be sexually active and report two or more partners.
- Smoking was associated with having two or more partners and inconsistent condom use among those having two or more partners.

### Implications for Prevention

The HIV-positive women in this study reported more occasions of unprotected vaginal sex after beginning HAART. Since inconsistent condom use is a risk factor for HIV transmission, educational efforts directed toward persons infected with HIV who are receiving HAART should emphasize the importance of condom use for each sexual episode.

### SOURCE:

Wilson, T. E., et al. (2004). Changes in sexual behavior among HIV-infected women after initiation of HAART. *American Journal of Public Health*, 94, 1141-1147.