Medicated sex associated with unsafe sex in men and women and STI diagnosis in men

The use of medication to enhance sexual functioning has increased in recent years. Foremost are PDE-5 inhibiting drugs, like Viagra, that treat erection difficulties. Medication for women largely focuses on low sexual desire and is more limited in comparison to drugs for men.

Recreational drugs such as crystal methamphetamine are sometimes used to enhance arousal and promote more adventurous sexual behavior and are often used in combination with PDE-5 inhibitors.

Little is known about medicated sex at the population level. Hence, this investigation was to prevalence of medication use to assist sexual functioning in Britain and to identify associated outcomes.

Methodology
Data from the British National Survey of Sexual Attitudes and Lifestyles (Natsal-3) described use of medication to enhance sex (ever and last year). In-persons interviews and computer-assisted interviews were conducted between September 2010 and August 2012.

Analysis of data for last year use of medication was limited to men as the same analysis was not possible for women due to low numbers using medication for sex.

Outcomes of the Study
The study sample was limited to 6863 and 7067 sexually experienced men and women, respectively. Major findings include:

- Ever use of medication was 12.9% for men and 1.9% for women.
- For both genders, ever use of medications was associated with low overall sexual functioning in last year.
- An association was found between ever use of medication with reporting higher number of lifetime sexual partners and with unsafe sex (reporting two or more partners, but no condom use in the last year) but the associations were stronger for men than for women.
- 7.2% of men reported medicated sex last year. Medication use was associated with reporting 3 or more partners in last year and eight or more occasions of sex in the past 4 weeks.
- In men, strong associations were found with using the internet to find a partner in the past year and with paying for sex.
- In men, unsafe sex (two or more partners and no reported condom use in the last year) and STI diagnosis in the past five years was associated with medication use.
- In men, the association with high-risk was not restricted to those practicing same-sex sex.

Implications for Prevention
This study found that medication use to enhance sexual functioning was reasonably common in Britain, more in men than women. It was associated with unsafe sex and use of other drugs in men and women and not confined to high-risk groups. In men, it was also associated with recent STI diagnosis.

With the increasingly easy access to these medications without prescription, better professional and patient education about the potential unsafe behavior with their use is needed.

SOURCE:
Alcohol use associated with casual sex

Causal sexual relationships and experiences (CRSE) is a term used to describe relationships that are causal and sexual in nature; that is, involve sexual behavior outside of a committed, romantic relationship. CRSEs include hookups, one-night stands, friends with benefits, and booty calls.

This study conducted a meta-analytic review of the association between alcohol use and engagement in CSREs focusing on community and college samples (29 studies).

Results from the meta-analysis indicated that alcohol use was significantly associated with engaging in CSRE. Age significantly moderated the effect of alcohol use on CSRE engagement such that the association was greater for emerging adults (ages 18-24 years) than older adults.

The study found no significant differences between studies conducted using college and non-college samples.


Drastic increase of HIV prevention needed to avert AIDS resurgence

United Nations disease experts stated that the global HIV epidemic could resurge within five years unless drastic efforts to prevent AIDS occur. The medical panel, commissioned by *The Lancet* medical journal noted that even though access to AIDS treatment drugs has increased, the rate of new HIV infections is not falling fast enough.

Peter Piot, director of the London School of Hygiene & Tropic Medicine stated that merely sustaining current efforts will not be enough and that we cannot treat ourselves out of the AIDS epidemic. Geographic growth in some areas is increasing the number of newly infected persons who will need lifelong treatment.

Global data suggest a tipping point has occurred in the AIDS epidemic for the first time with the annual number of new HIV infections lower than the number of HIV patients being added to those receiving treatment. However, recent research shows clear evidence of resurgence HIV epidemics among high-risk populations, such as gay men in Europe, North America and Asia.


Immediate HIV antiretroviral therapy found beneficial

Randomized trials compared HIV+ adults with CD4+ count of 500 cells per cubic millimeter or more who were given antiretroviral therapy immediately to those who deferred to CD4+ count of more than 350. 4685 patients were followed for 3 years. Data revealed that the initiation of ART in HIV+ adults with CD4+ counts of more than 500 provided net benefits over starting therapy in patients after their CD4+ count declined to 350.


Trichomoniasis most common nonviral STI

Trichomoniasis is the most prevalent nonviral STI in the U.S., affecting 3.7 million persons. 13% of black women are infected compared to 1.8% of non-Hispanic white women. *T. vaginalis* affects about 11% of women, aged 40 years or less. The prevalence of trichomoniasis among men who have sex with men is low.