Non-medical use of prescription drugs by transgender women related to HIV risk

Male-to-female transgender women (TGW) experience high rates of substance abuse and HIV infection. Transgender women are persons classified as male at birth but personally identify as female in later life.

A meta-analysis of TGW in the United States found an HIV prevalence rate of 28%. This review also found high rates of sexual risk behavior, including unprotected sex and sex with multiple partners. Injection drug and substance use behaviors among TGW have also been found.

A recent substance use trend in the US is the non-medical use of prescription drugs (NMUPD). No research to date has examined the associations between the non-medical use of prescription drugs and HIV risk behavior among male-to-female transgender women.

Methodology
TGW were recruited from community venues (N = 104) in the Mid-Atlantic region of the United States (Richmond, VA and Washington, DC). Participants completed a brief paper survey assessing demographic information, non-medical use of prescription drugs, other substance use, injection practices and sexual risk behavior. Four categories of NMUPD were assessed: analgesics, sedatives, anxiolytics, and stimulants.

Outcomes of the Study
Major findings include:
- 24% TGW reported lifetime NMUPD: 21% analgesics, 14% anxiolytics, 13% stimulants, and 9% sedatives.
- NMUPD participants were significantly more likely to report being HIV positive (52%) than individuals who did not report NMUPD.
- Participants reporting NMUPD were also more likely to report having been in jail in their lifetime than those not reporting NMUPD.
- Participants who engaged in NMUPD were more likely to report recent use of illicit drugs, injecting drugs, injecting silicone, and sharing needles.
- TGW face additional risks associated with injecting silicone, which is seen as a rapid method of feminizing body parts.
- Persons reporting NMUPD were more likely to report unprotected sex, sex after using a substance, and commercial sex work.
- Participants reporting NMUPD were less likely to use condoms with a new partner and were less likely to find out a partner's HIV status before having sex.
- Self-esteem and social support from family served as protective factors for non-medical use of prescription drugs.

Implications for Prevention
This study found that nearly one in four TGW reported lifetime NMUPD. NMUPD was associated with both sexual and injection-related HIV transmission risk, including commercial sex work.

TGW may be especially vulnerable to deleterious effects of the combined use illicit drugs, prescription drugs used non-medically, and prescription drugs prescribed by a physician (e.g. hormone therapy, antiretrovirals).

SOURCE:
79% cancers at sites associated with HPV caused by HPV

Human papillomavirus (HPV) is a known cause of cervical cancers, as well as some vulvar, vaginal, penile, oropharyngeal, anal and rectal cancers.

Although most HPV infections are asymptomatic and clear spontaneously, persistent infections with one of 13 oncogenic types can progress to precancer or cancer. CDC assessed the incidence of HPV-associated cancers from CDC data banks for 2008-2012.

Each year during 2008-2012, an average of 38,793 HPV-associated cancers were diagnosed, including 23,000 among females and 15,793 among males; 79% were attributed to HPV. Of these 38,793 cancers, 24,600 are attributed to HPV types 16 and 18. 28,000 are attributed to high-risk types included in the 9-valent HPV vaccine. An overall increase in HPV-associated cancer incidence occurred from 10.8 per 100,000 persons during 2004-2008 to 11.7 during 2008-2012, despite a slight decrease in the rate of cervical carcinoma.


Two-thirds of HIV-positive persons had condomless sex

Antiretroviral therapy (ART) improves the health of people living with HIV and can reduce infectiousness thus preventing HIV transmission. These possible benefits can be undermined by briefs that condomless sex is safe when viral loads are below detection.

Sexually active, HIV+ men (n=538) and women (n=166) completed computerized interviews.

313 (44%) participants had engaged in condomless sex with HIV-negative/unknown status sex partners, and these individuals demonstrated higher rates of sexually transmitted disease symptoms and diagnoses. Two-thirds of participants who had condomless sex with HIV-negative/unknown status had not disclosed their HIV status.

Beliefs regarding viral load and HIV infectiousness and perceptions of lower risk of HIV transmission resulting from HIV viral suppression predicted condomless sex with potentially uninfected partners.


Douching related to higher rates of HIV and herpes virus 2

Vaginal douching and selected correlates were assessed among female sex workers in Yunnan Province in southern China. Vaginal douching was reported by 84% of 837 FSWs. Douching was linked to higher rates of HIV and herpes simplex virus type 2 infections. Douching was more common among the more educated FSWs, those with greater HIV/STI knowledge, and those experiencing clinical symptoms in past 12 months.


HIV death rates inch down

Fewer Americans died in the first quarter of 2016 than in the same period a year ago according to the CDC’s National Center for Health Statistics. The death rate per 100,000 for quarter 1 for HIV was 2.1 in 2015 and 1.8 in 2016.