

Background:

The practice of chemsex consists of the intentional use of substances, including methamphetamine (meth), γ-hydroxybutyrate (GHB), γ-butyrolactone (GBL), mephedrone, cocaine, MDMA (ecstasy) and ketamine, to increase activity or sexual pleasure. Other substances often used together with, but not typically considered chemsex drugs, are: cannabis, alkyl nitrites (poppers), phosphodiesterase inhibitors (sildenafil) and alcohol.

These drugs are often used in combination to facilitate sexual sessions lasting several hours or days (chemsex users often describe “losing days”) with multiple sexual partners. This practice could be associated with high-risk sexual behaviors that can increase the transmission of STIs as well as expose users to substance overdoses. A history of having practiced chemsex was associated with a greater probability of having a diagnosis of syphilis, gonorrhea, or chlamydia in PrEP users.

In Argentina there is a lack of information regarding this problem.

This research aims to measure the prevalence and characterize the practice of chemsex and STIs in PrEP users in a reference Sexual Health Clinic in the City of Buenos Aires.

Methods:

This is a descriptive, cross-sectional study.

The medical records and a self-administered questionnaire were used to obtain the information.

The prevalence of the variables that were measured was defined as at least once in the last 12 months.

Descriptive statistics and the χ2 or the Mann–Whitney test were used to compare categorical and continuous variables, respectively.

Results:

From February to September 2024, all the PrEP users attending the Sexual Health Clinic of the Hospital Ramos Mejia were invited to participate. The study is still enrolling and we report here preliminary results.

124 participants contributed with data for this report. The median age was 35 years old (IQR 30-42). 119 (96%) identified as cisgender men, 4 (3%) as cisgender women and 1 (1%) as transgender woman. The prevalence of chemsex practice was 54.8% (Figure 1). Regarding condom utilization, 94 (76%) reported an irregular use, while 20 (16%) reported that they never used condom (Table 1).

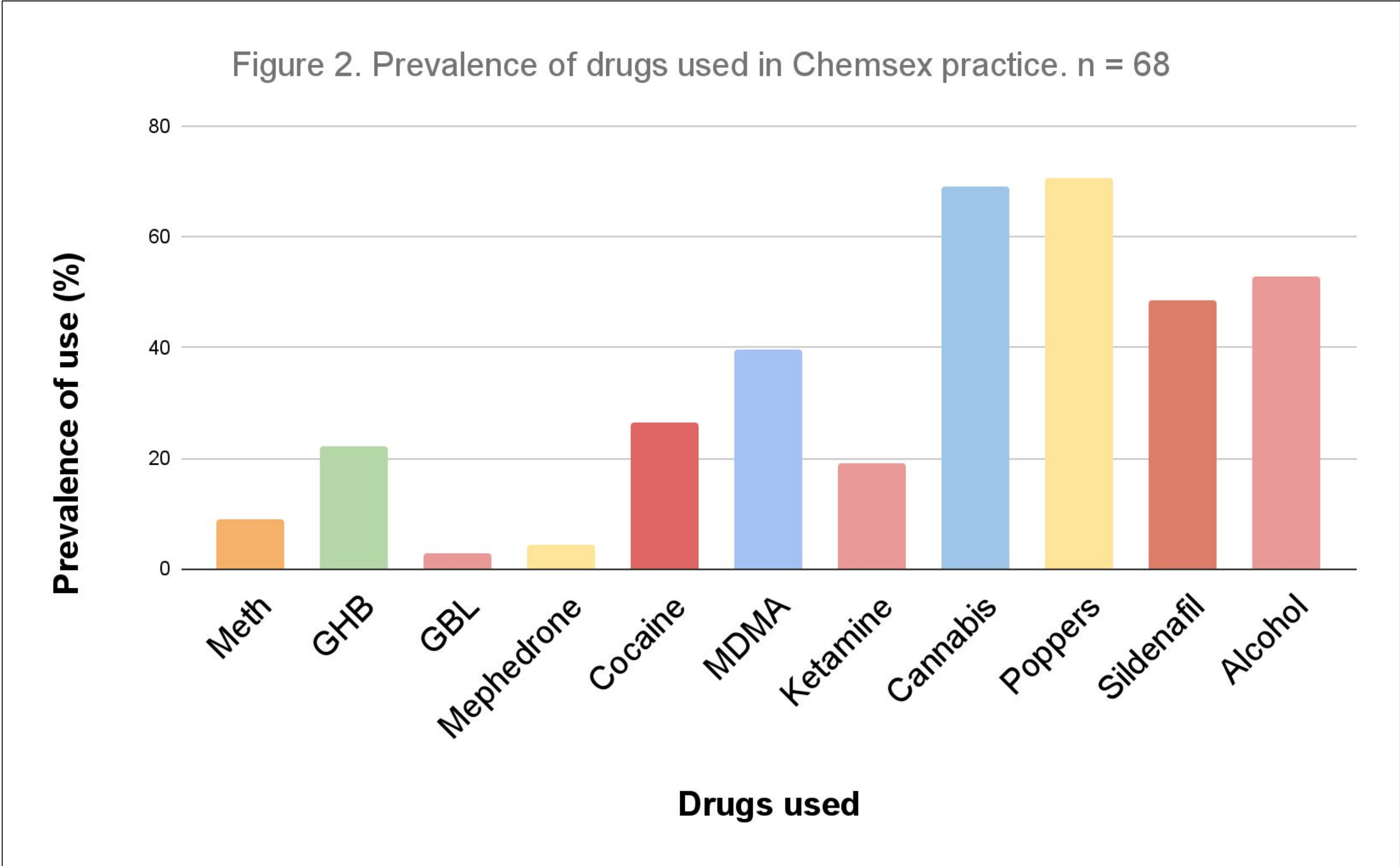
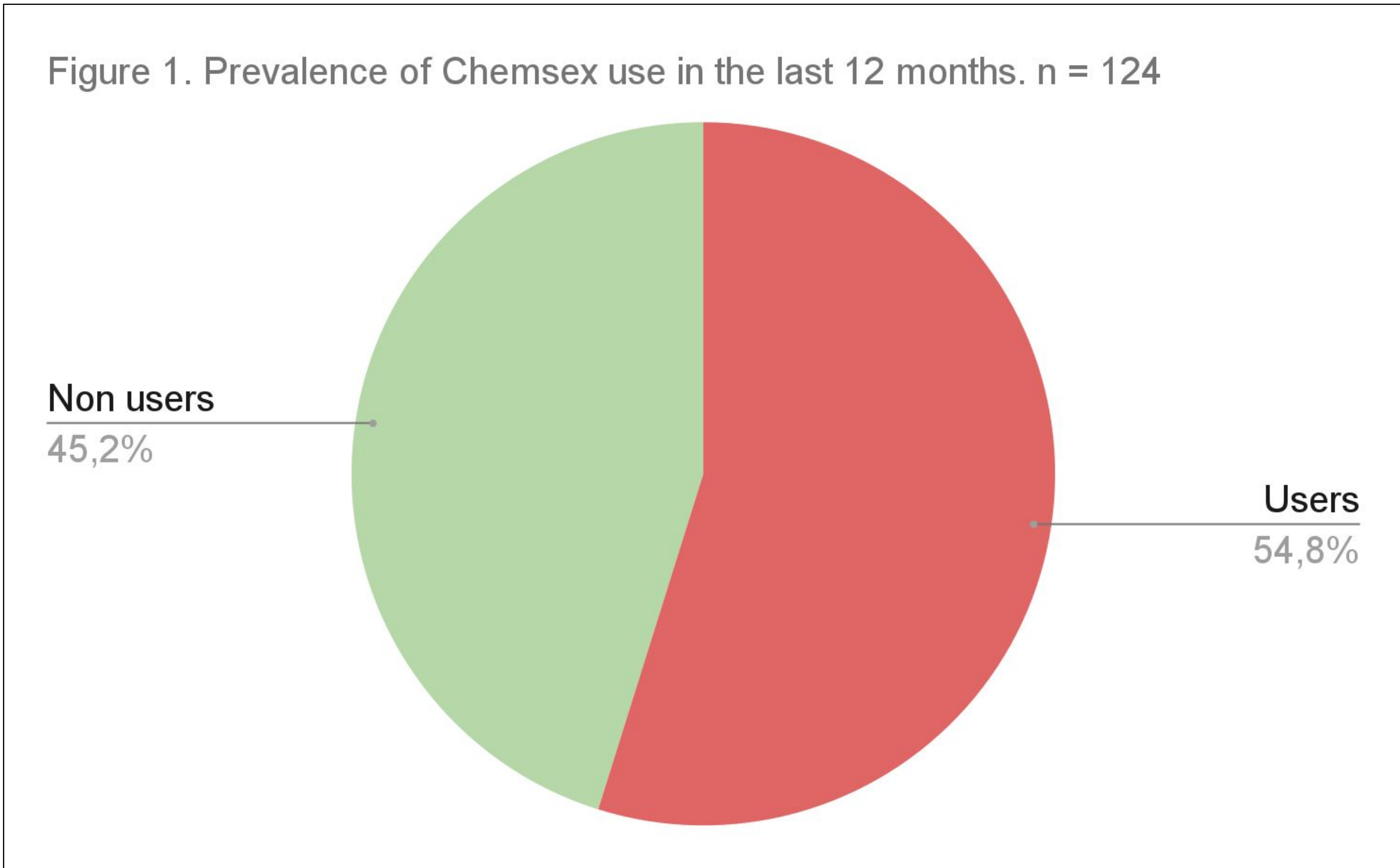
The prevalence of never using condom and STIs were, for chemsex users and non users respectively: 22% vs. 9% (OR 2.88 (CI 0.97-8.52); p-value 0.04) and 53% vs. 30 % (OR 2.58 (CI 1.22-5.42); p-value 0.018). The number of sexual partners, also comparing chemsex users and non users demonstrated significant differences, p-value 0.002 (Table 1).

In the last 12 months, 54.8% practiced chemsex, the drugs used were: Poppers, 70,58%; Cannabis, 69,11%; Alcohol, 52,94%; Sildenafil, 48,52%; MDMA (ecstasy), 39,70%; cocaine, 26,47%; γ-hydroxybutyrate (GHB), 22,05%; ketamine, 19,11%; Methamphetamine, 8,82%; mephedrone, 4,41%; γ-butyrolactone (GBL), 2,94% (Figure 2).

42.64% reported use of two or more drugs at the same time, 11.76% recognized chemsex as a problem in their life.

48.52% of the chemsex users reported that they will be willing to talk about their behaviors with their healthcare providers.

Table 1. Socio-demographic and clinical characteristics, overall and among chemsex users and non users. n = 124				
	Overall	Chemsex users. n = 68	Chemsex non users. n = 56	P value
Age in years, median (IQR)	35 (30-42)	35 (32-43)	33 (29-39)	0.441
Gender, n (%)				
Cisgender men	119 (96%)	66 (97%)	53 (95%)	-
Cigender women	4 (3%)	2 (3%)	2 (3%)	-
Transgender woman	1 (1%)	0	1 (2%)	-
Condom use in the last year, n (%)				
Never	20 (16%)	15 (22%)	5 (9%)	0.04
Sometimes	94 (76%)	51 (75%)	43 (77%)	0.8
Always	10 (8%)	2 (3%)	8 (14%)	0.02
Number of sexual partners in the last year, median (IQR)	20 (10-40)	30 (15-50)	20 (9-30)	0.002
At least one STI in the last year, n (%)	53 (43%)	36 (53%)	17 (30%)	0.018



Conclusions:

In this preliminary analysis we have found a significant prevalence of chemsex use in PrEP users in ClinSex Buenos Aires. The practice was associated with a greater number of different sexual partners and risk of not using condom and acquiring an STI in the last year. We also found a significant prevalence of polysubstance used and willing to talk about it with the healthcare providers.

This findings are consistent with the reports of other sexual health clinics worldwide and highlights the need to deepen our understanding of chemsex practice, including risks and adverse events, in order to develop new strategies according to the needs in our community.