

IMPLICATIONS OF HIV SELF-TESTING FOR FREQUENT STI TESTING AMONG AUSTRALIAN GAY, BISEXUAL AND OTHER MEN WHO HAVE SEX WITH MEN: RESULTS FROM A CROSS-SECTIONAL SURVEY

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Background: While HIV self-testing (HIVST) may overcome barriers to frequent HIV testing among gay, bisexual and other men who have sex with men (GBM), less is known about its impact on other STI testing. We explored the likely impact of HIVST on STI testing among Australian GBM.

Methods: We explored attitudes towards STI testing among self-reported HIV-negative ever-tested GBM participants of an online survey who expressed interest in self-testing at least once annually. Participants were recruited mostly online in March-May 2019. We explored factors associated with intention to replace most HIV clinic tests (HIVCT) with HIVST using logistic regression.

Results: Of 323 participants, we included 190 (59%) GBM ever-tested for HIV who would self-test at least annually. Most (159, 84%) reported STI testing with all previous HIV tests.

Three quarters (140, 74%) would replace any and 52 (28%) would replace most HIVCT with HIVST, with HIVST mostly preferred for its convenience (136, 72%). If using HIVST, participants would test for STIs if at a clinic for HIV testing or other reasons (137, 73%), while only 34 (18%) would seek standalone STI screening. Nearly all (169, 92%) would use a hypothetical non-clinic-based STI testing model. In logistic regression, intending to replace most HIVCT with HIVST was independently associated with reporting >12 months since last HIV test (n=33 (17%), aOR:5.2, 95%CI:2.1-13.3) and inconvenience as a barrier to previous HIVCT (n=127 (91%), aOR:2.5, 95%CI:1.2-5.3). PrEP use, low perceived risk as a barrier to previous HIVCT and recent group sex were associated in bivariate but not multivariate regression.

Conclusion: GBM want to test for STIs but are likely to do so less often if using HIVST. Convenience is both the greatest motivator for HIVST use and the greatest barrier to concurrent STI testing. Novel non-clinic-based approaches to STI screening are urgently needed.

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