

Protecting Pleasure: Sexual Health Service Users' Oral STI Prevention Strategies And Views On STI Prevention Measures

Authors:

King AJ^{1,2}, Bilardi J^{1,2,3}, Maddaford K^{1,2}, Fairley CK^{1,2}, Chow EPF*^{1,2,4} Phillips TR*^{1,2}

* Co-last authors

¹ Central Clinical School, Monash University, Melbourne, VIC, Australia, ² Melbourne Sexual Health Centre, Alfred Health, Melbourne, VIC, Australia, ³ Department of General Practice, The University of Melbourne, Melbourne, VIC, Australia, ⁴ Centre for Epidemiology and Biostatistics, Melbourne School of Population and Global Health, The University of Melbourne

Background:

Rising prevalence of bacterial STIs such as gonorrhoea, chlamydia and syphilis is a concern in the context of antimicrobial resistance, patient and healthcare burden, and reproductive outcomes. This research sought to explore strategies used by attendees of a sexual health service to reduce oral transmission of STIs, and their views on measures currently under investigation (i.e., mouthwash, vaccination and DoxyPEP).

Methods:

A qualitative research design was used to explore strategies people used, or might be willing to use, to prevent being infected with or transmitting an oral STI. Purposive sampling and semi-structured interviews allowed for description and comparison of participants' perspectives from a range of ages, sexual orientations, genders and nationalities.

Results:

Twenty-one participants with and without a history of an oral STI were interviewed. Whilst individuals varied in the STI prevention strategies they used, and would consider, generally they were unwilling to engage in STI prevention measures that impacted the pleasure and intimacy of sex. As such, use of barrier methods like condoms and dental dams for oral sex were considered unacceptable to many participants and their partners. Conversely, STI testing, treatment and partner notification were preferred to protect themselves and others from STIs. Strategies with unproven efficacy (e.g., mouthwash, showering before sex) were acceptable in the context of improving the pleasure of sex for themselves and their partner. Factors influencing the acceptability of prevention measures (e.g., vaccination, DoxyPEP) included accessibility, practicality, effectiveness and safety. Participants enjoyed a range of practices that increased their risk of an oral STI (e.g. oral sex, spit play, etc) but generally had not been engaged in conversations about these by health care professionals.

Conclusion:

This research highlights the central role pleasure plays in decision-making about STI prevention strategies. It is important this informs discussions within clinical practice, research and public health planning

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