

ABSTRACT

Comprehensive sexual health screening among gay and bisexual men in Aotearoa/New Zealand

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Background

Sexually transmitted infection (STI) incidence among gay and bisexual men (GBM) is rising and is higher among HIV-infected GBM. Aotearoa/New Zealand guidelines recommend comprehensive STI screening (CSS) annually for all GBM regardless of sexual practices, though no studies have investigated CSS.

Methods

We examined a national cross-sectional community and internet study of GBM in 2014. Participation was anonymous, voluntary, and self-completed. We estimated recent (<12 months) prevalence of CSS [anal (exam or swab), throat, penile (swab or urine), syphilis test], and identified socio-demographic, clinical, and behavioural factors associated with recent CSS using multivariable logistic regression.

Results

3097 GBM participated. CSS was more common at a sexual health clinic than at a general practitioner (GP). Overall, 32% of HIV+ and 12% of HIV-/unknown participants had an STI diagnosed <12 months. HIV prevalence was 5% (n=155). Recent CSS prevalence among HIV+ participants was two-fold greater than among HIV-/unknown participants (45% and 21%, respectively). HIV-infection (aOR=2.1; p < 0.001), anal intercourse (aOR=1.83; p = 0.009), more than 20 male partners (aOR=1.85; p < 0.001) increased the odds of CSS, while being 45 or older (aOR=0.53; p < 0.001), having a GP who did not know their patient's sexual orientation (aOR=0.36; p < 0.001), and reporting Pacific Island ethnicity (aOR=0.52; p = 0.038) decreased the odds.

Conclusions

CSS prevalence fell short of guidelines for all GBM, though was twice as common among HIV+ participants. GBM experience a high burden of STIs; barriers to screening should be removed to expedite treatment and interrupt transmission.