Disjunction between self-perceived and clinically-assessed HIV risk among urban gay, bisexual, other men who have sex with men (GBM) in Ontario and British Columbia

Oscar Javier Pico-Espinosa¹, Mark Hull², Paul MacPherson³, Daniel Grace⁴, Mark Gaspar⁴, Kevin Woodward⁵, Nathan Lachowsky⁶, Saira Mohammed², Karla Fisher⁷, Simon Rayek⁸, Camille Arkell⁹, Tyllin Cordeiro¹⁰, Garfield Durrant¹¹, Warren Greene¹², David Hall¹³, Matthew Harding¹⁴, Jody Jollimore¹⁵, Marshall Kilduff¹⁶, John Maxwell¹⁷, Leo Mitterni¹⁸, Eric Peters¹⁹, Robinson Truong¹, Darrell H. S. Tan¹

1. St Michael's Hospital, Toronto ON; 2. BC Centre for Excellence in HIV/AIDS, Vancouver BC; 3. University of Ottawa, Ottawa ON; 4. University of Toronto, Toronto ON; 5. McMaster University, Hamilton ON, 6. University of Victoria, Victoria BC; 7. Toronto General Hospital, Toronto ON; 8. Health Initiative for Men, Vancouver BC; 9. Canadian AIDS Treatment Information Exchange (CATIE), Toronto ON; 10. Alliance for South Asian AIDS Prevention (ASAAP), Toronto ON; 11. Black Coalition for AIDS Prevention (Black CAP), Toronto ON; 12. Canadian Aboriginal AIDS Network, Fort Qu'Apelle SK; 13. Vancouver Coastal Health, Vancouver, BC, Canada; 14. MAX Ottawa, Ottawa ON; 15. Community-Based Research Centre, Vancouver BC; 16. AVI Health and Community Services, Victoria BC; 17. AIDS Committee of Toronto, Toronto ON; 18. Hassle Free Clinic, Toronto ON; 19. The Gay Men's Sexual Health Alliance, Toronto ON





Background

- Individuals' self-perception of HIV risk does not always align with the risk assessments generated by clinical screening tools.
- We compared self-perceived versus clinically assessed risk of HIV and reasons for perceived low risk among GBM from large cities in Ontario and British Columbia.

Methods

- Cross-sectional survey between July/2019 and August/2020
- Never PrEP users
- We contrasted self-assessed HIV risk against criteria from the Canadian PrEP guideline: condomless anal sex in the past six months with any of the following:
 - HIRI-MSM score>11
 - Syphilis
 - Rectal gonorrhea/chlamydia
 - Post-exposure prophylaxis (PEP) use ≥ 2



Methods – continued

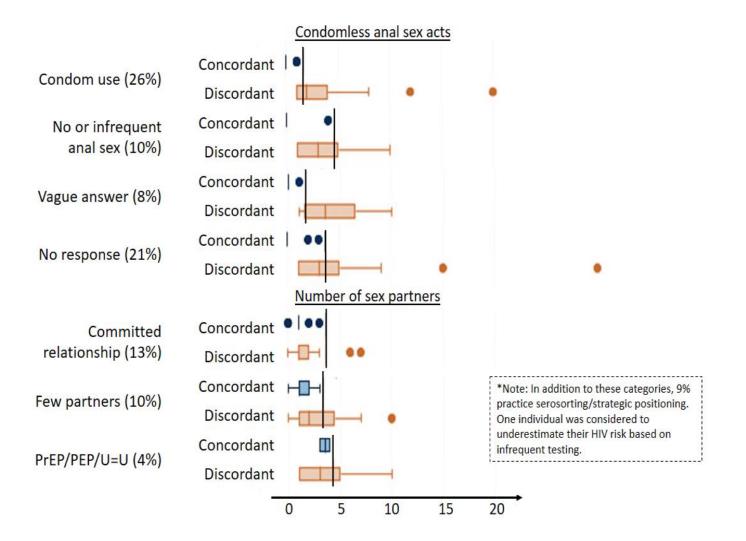
- Participants provided a written explanation of their selfassessment, including their strategies to avoid HIV infection.
- Responses were analyzed using content analysis.
- The resulting themes were compared with number of sex partners and number of condomless anal sex acts; those with numbers exceeding the highest values of their peers, were considered to be possibly underestimating their HIV risk.

Results

- Of 315 participants who perceived themselves to be at low risk, 146 (46%) were considered at high risk based on criteria from the Canadian PrEP guideline (labeled "discordant").
- Reasons for perceiving themselves at low risk of HIV in the discordant group included: condom use, being in a committed relationship/having one main partner, no or infrequent anal sex and having few partners. We estimated that 39% may, possibly, underestimate their HIV risk.



Results - continued



Conclusions

 More efforts to increase GBM's HIV risk awareness and of evidence-based HIV prevention options are needed.
Contextualizing individuals' sexual behaviours in relation to that of their peers could aid efforts to increase PrEP uptake.

Funding



