

Overview:

Studies of people who use drugs found that people who disclose stimulant use reported more sexual partners of unknown HIV and STI status and are also less likely to use protection during sexual activities.

People who use methamphetamines (meth) are more likely to engage in unprotected sexual activity with a person who injects meth and are also more likely to have contracted an STI at some points in their lives.

hat are Stimulants?

Stimulants is a general description of prescribed, illicit and recreational drugs that can increase alertness, attention, energy and pleasure while also elevating heart rate, breathing and blood pressure.

Most common stimulants are:

MDMA

MDMA, also known as molly or ecstasy, is often orally ingested and can have hallucinogenic effects.

Meth

Methamphetamine comes in several forms and can be smoked, snorted, injected, or orally ingested. It releases large amounts of dopamine (the "feel good" chemical), which can result in altered judgement and inhibition.

Cocaine

Cocaine is an illicit drug that is often smoked or snorted.

Rx

Prescription stimulants such as Ritalin and Adderall are used to treat attention deficit hyperactivity disorder (ADHD).

ow Does Meth Use Affect a Person's Risk for HIV?

Methamphetamine use can increase ones' risk of transmitting or contracting HIV, hepatitis B and C, regardless of whether a person injects, smokes, or snorts. Sharing needles, syringes, or other drug equipment puts people at increased risk.

Methamphetamine use is on the rise, and usage among men who have sex men (MSM) living with HIV or unaware of their HIV status, use at notably higher rates than MSM who are HIV-negative.²

Crystal meth in particular functions as a sex drug in MSM communities, where it is used to initiate and enhance sexual encounters. While the spread of HIV/AIDS as a result of meth use is not exclusive to the MSM community, there is considerable research documenting the connection between meth use and sexual behavior that can increase HIV risk for MSM.

Rates of new HIV infections have not declined significantly in recent years. Increased access to substance abuse treatment, greater use of harm reduction principles, and ensuring medical care does not differ based on drug use behavior can assist in decreasing the impact Meth use has on gay/MSM health and decrease rates of new infections.³

The California HIV Planning Group (CPG) created the Methamphetamine and Other Stimulants (Meth) Committee. Contact Meth Committee Liaison, <u>Loris Mattox</u>, or Community Co-Chair, <u>Robyn Learned</u> to join, contribute, and learn more about stimulant use related to HIV/AIDS and other risks.





¹National Institute of Health, Research Report, Are People who Misuse Methamphetamine at Risk for Contracting HIV/AIDS and Hepatitis B and C?

² CDC, HIV Surveillance Report, HIV Infection Risk, Prevention, and Testing Behaviors Among Men Who Have Sex with Men National HIV Behavioral Surveillance 23 U.S. Cities, 2017

³ CDC, Morbidity and Mortality Weekly Report, Vital Signs: HIV Infection, Diagnosis, Treatment, and Prevention Among Gay, Bisexual, and Other Men Who Have Sex with Men – United States, 2010–2019