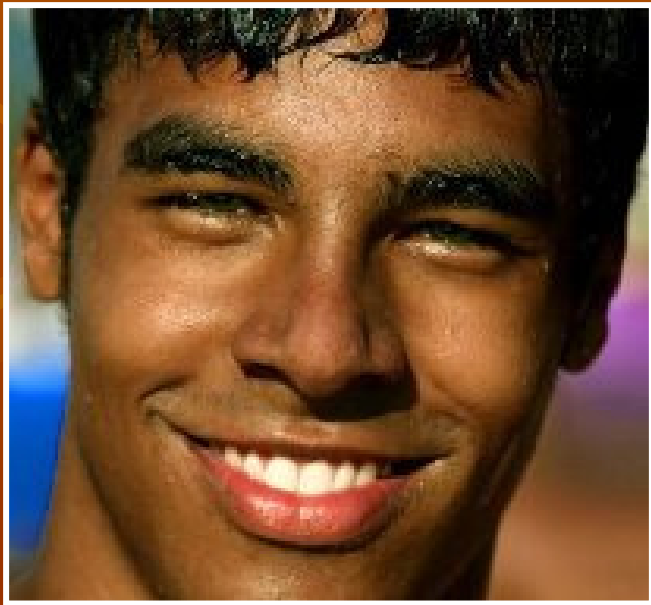


**ManAlive 07**  
**November 3, 2007**  
**Center on Halsted**

# **Desire, Disclosure, Protection and Pleasure**



**The Ins and Outs of  
Sero-Adaptation**

**with Dr. Will Wong  
and Jim Pickett**

# What we are chatting about this afternoon

- What is sero-adaptation?
- What is the data?
- What are the benefits of this strategy?
- What are the limitations of this strategy?
- New prevention technologies
- **DISCUSSION**, small group work



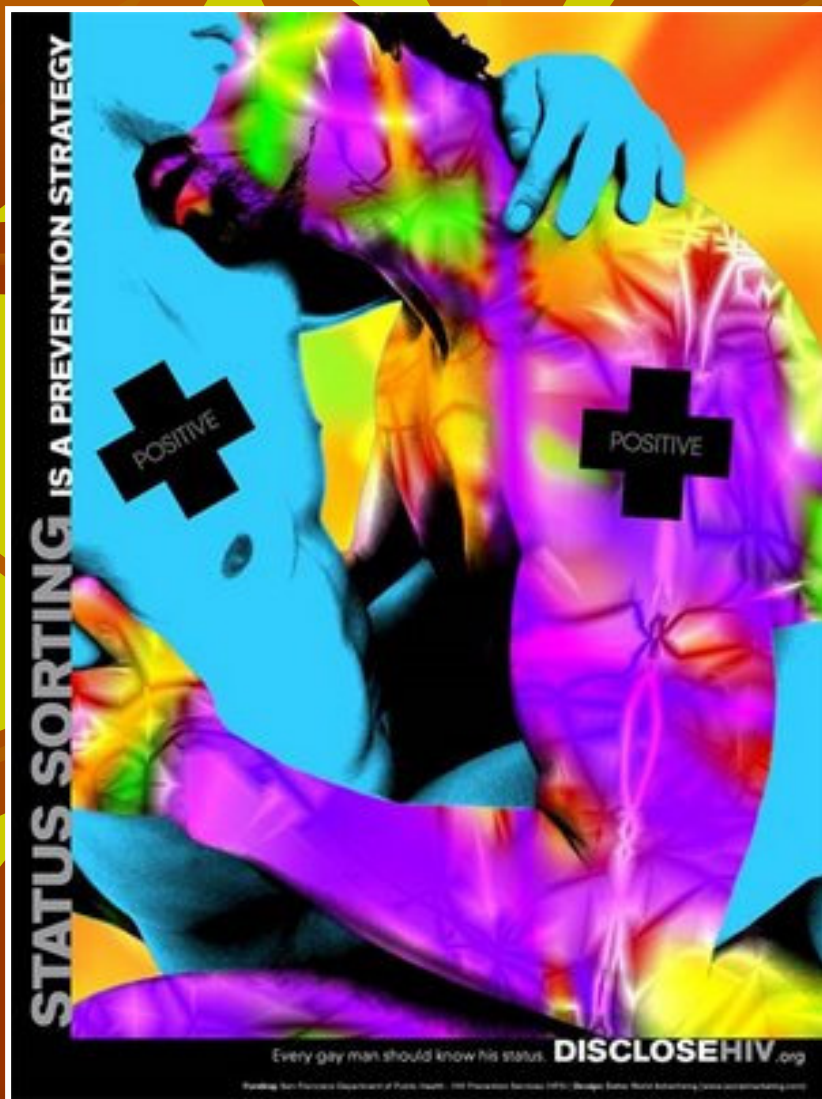
# What is sero-adaptation?

- Coined by “The Warning” in Paris

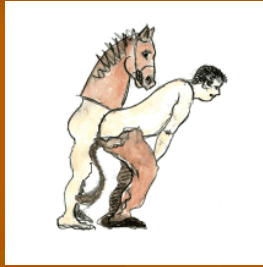


- Includes, but not limited to, "sero-sorting."
- The selection of sexual partners, practices, and positions to reduce the spread of HIV.
  - Harm reduction strategies that don't involve condoms. May reduce HIV risk, but not a guarantee. Require clear-headed risk analysis, weighing good, bad and ugly for you and your partner
- Also referred to as "sero-guessing" by some

# Examples of sero-adaptation



- Sero-sorting
  - Strategic positioning
  - Dipping
  - Pulling out
  - Lubrication
    - Oral sex
  - Viral load?



## Who is doing it?

- April 2007 American Journal of Public Health
  - **Dennis Osmond et. al at UCSF**
  - **27% gay men in SF practiced serosorting 2002, compared to 19% 1997.**
  - **40% of men ages 18-29 reported serosorting 2002.**
- "There seems to be a tendency favoring serosorting over condom use, especially among younger men," said Osmond.

# Unprotected AI (UAI) & Receptive (URAI)

Population	Any UAI	RAI
5 City Cohort HIV Neg <sup>1,*</sup>	30%	48% (of UAI)
SF HH –MSM <sup>2,a</sup>	38%	
Young MSM – 5 cities <sup>3,b</sup>	41%	31%
Young MSM in SF <sup>4,c</sup>	50%	41%
MSM at circuit parties <sup>5</sup>	28%	38% (of all UAI)

1. Koblin, 2003; 2. Chen, 2003; 3. Valleroy 2000; 4. Ekstrand 1999; 5. Colfax 2001  
 a Past year; b Past 6 months; c Past 30 days

**\*Thx to Dr. Pamina Gorbach, UCLA**

# Relative Risk of HIV Acquisition by Sex Act and Condom Use for HIV-negative Sex Partners of an HIV-positive Person

<b>Sex Act</b>	<b>Relative Risk of HIV Acquisition</b>
<b>Insertive fellatio</b>	<b>1</b>
<b>Receptive fellatio</b>	<b>2</b>
<b>Insertive vaginal sex</b>	<b>10</b>
<b>Receptive vaginal sex</b>	<b>20</b>
<b>Insertive anal sex</b>	<b>13</b>
<b>Receptive anal sex</b>	<b>100</b>
<b>Condom used</b>	<b>1</b>
<b>Condom not used</b>	<b>20</b>

Adapted from Incorporating HIV prevention into the medical care of persons living with HIV. MMWR 2003;52(RR-12):9

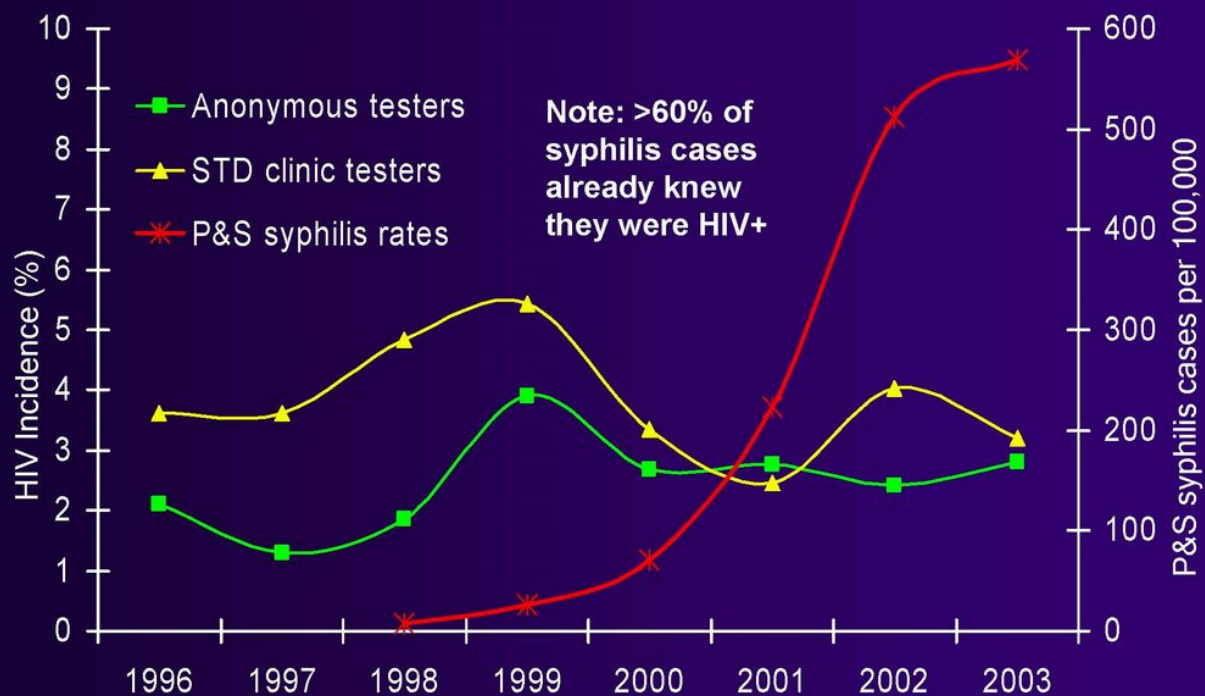
# How gay men believe they became infected with HIV

- A study of 158 Australian MSM recently diagnosed HIV+
  - 91% identified the high-risk event they believed led to HIV seroconversion
  - 71% reported UAI
  - 21% were certain partner was HIV-negative
  - 18% suspected partner was HIV-negative
  - 17% were certain partner was HIV-positive
  - 6% suspected partner was HIV-positive
  - 37% did not know partner's HIV status



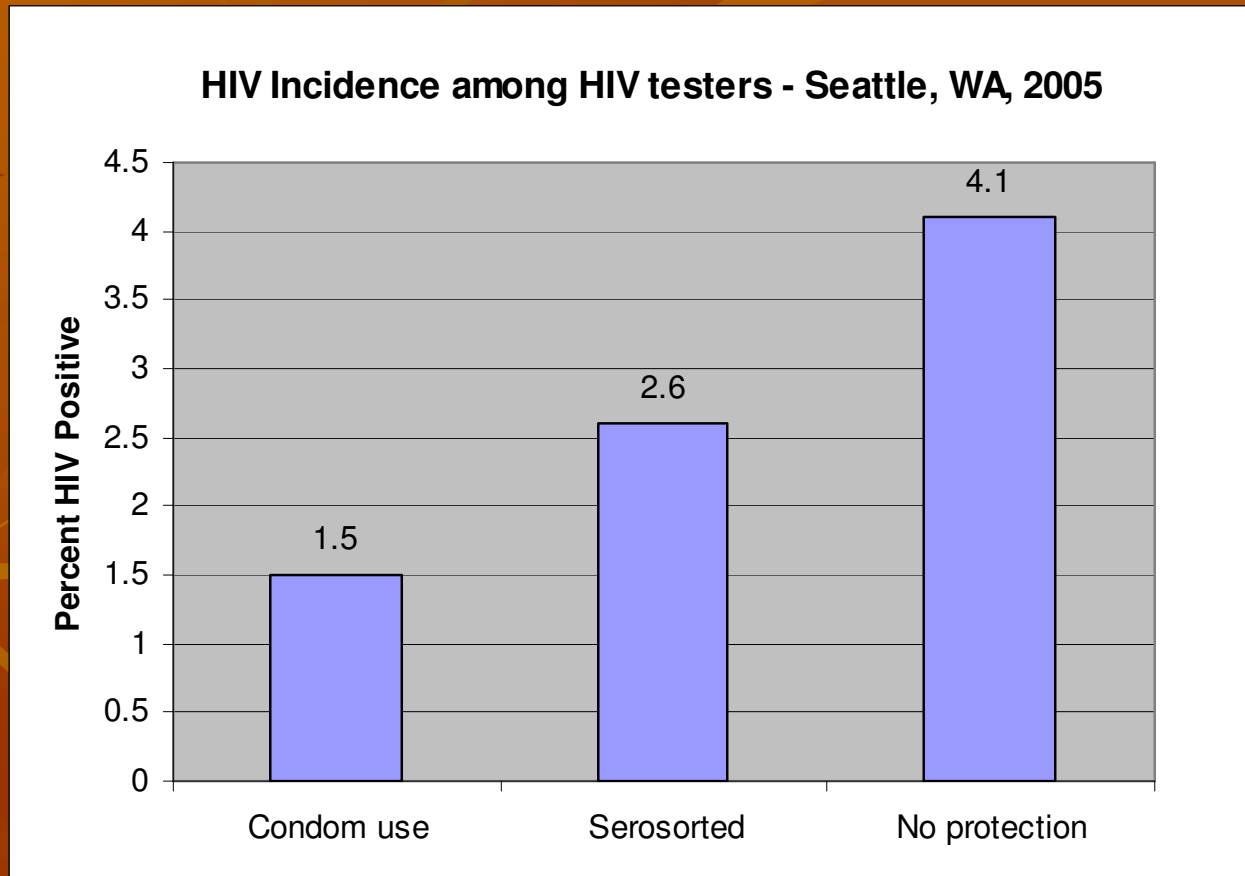
# Is sero-sorting/sero-adaptation having an impact on the HIV epidemic?

## HIV incidence and syphilis, MSM, San Francisco, 1996 - 2003



Source: McFarland W, SFPDPH

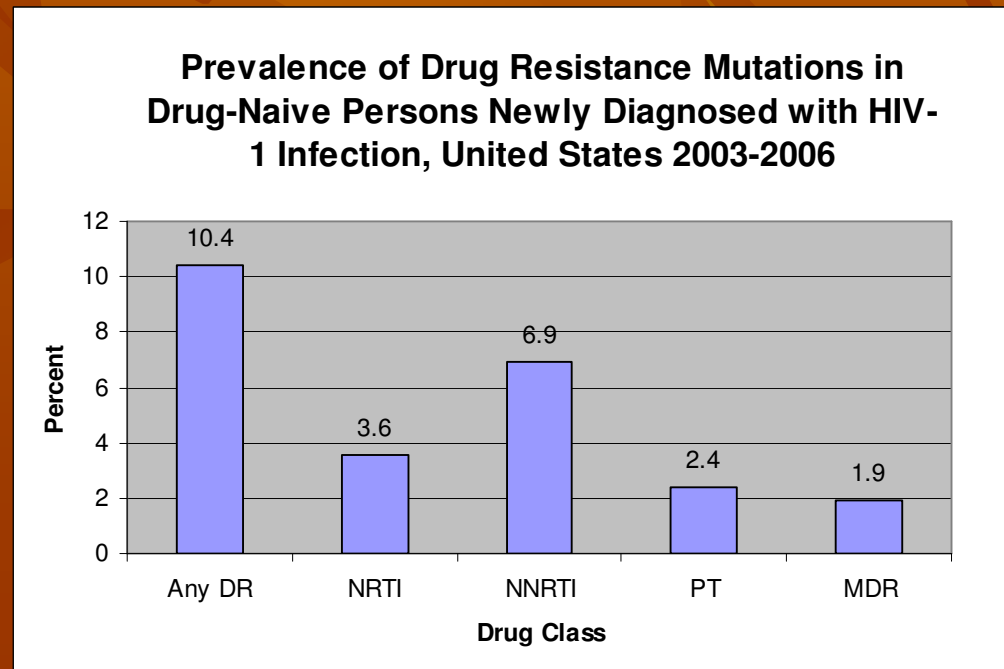
# How effective is serosorting?



Golden M, Public Health Seattle & King County, University of Washington

# Drug resistance found in persons newly infected with HIV

- Variant, Atypical, and Resistant HIV Surveillance System (VARHS)
- Purpose: to estimate the prevalence of mutations associated with HIV drug resistance, resistance patterns, and trends
- 3,130 samples analyzed from March 2003 to October 2006
- 409 clinical sites in 11 U.S. cities



# The controversy of the “Rare, Aggressive, Highly Resistant HIV” case – New York City, 2005

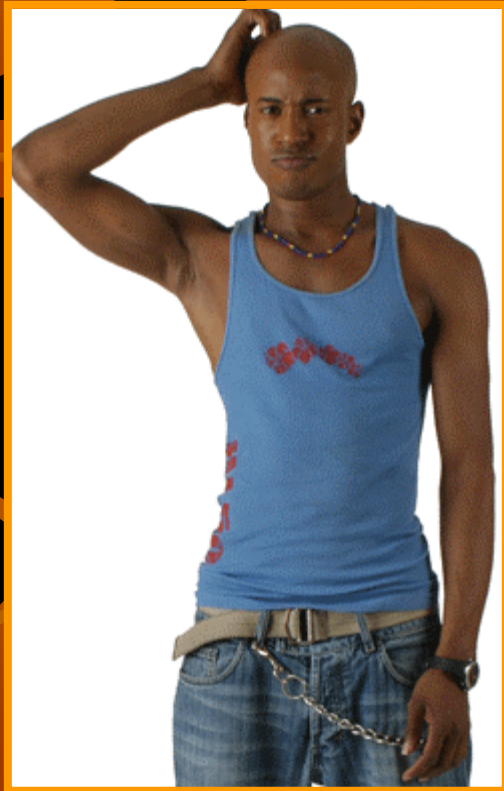
- May 2003: Patient A tests HIV negative
- Oct 2004: Suspected time of HIV infection when he engaged in unprotected anal sex with multiple partners while using crystal meth, meeting partners on the Internet.
- Nov 2004: He begins to feel sick
- Dec 2004: He tests HIV positive
- Jan 2005: HIV had progressed to AIDS. Drug resistance found against 3 drug classes: NRTI, NNTRI, PI
- **Today? What do we know now?**

# HIV re-infection: what we know

- Also known as superinfection in an HIV+ person getting infected with a different strain of HIV
- 16 documented instances in the literature to date
- Example: ♀ Initial HIV AE → AE/B  
♂ Initial HIV B → B/AE
- Associated more with recent HIV infection (1-2 years), HIV seroconversion, on no meds, taking meds incorrectly
- Less associated with longer-standing HIV infection (>3-5 years), on meds, taking meds correctly



# Questions on HIV Re-infection Remain



- What are the true risks at the individual- and population-level?
- Will it lead to rapid disease progression?
- Will it lead to limited HIV treatment options?

# **What are the benefits of sero-adaptation?**

- **Reduce the number of new cases of HIV in the community**
- **Reduce the risk of an individual who is not using condoms for anal intercourse**
- **What else?**

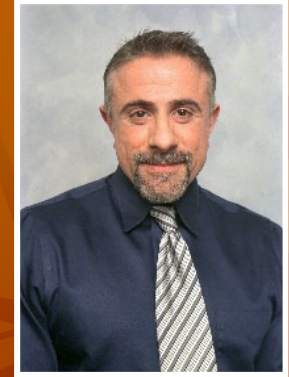
# What are the limitations of sero-adaptation?

- Sero-adaptation is not 100% protective – but what is?
- Not all know their real HIV-status – how HIV-negative are you?
- Everyone does not disclose their status
- Sero-adaptation provides no protection against STDs
- HIV positive men may also risk getting re-infected with other HIV strains which have the potential to destabilize an effective HIV medication regimen
- What else?

# ***Quote Unquote***

**Perry Halkitis – NYU**

**Oct 18 New York Blade**



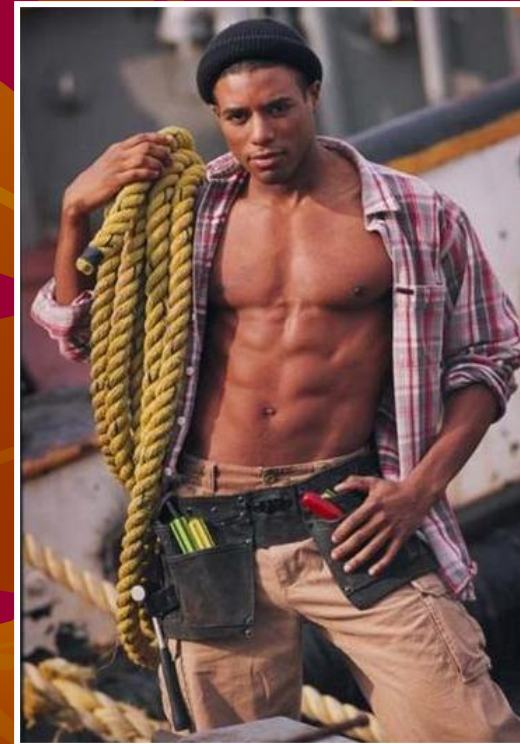
- ***You need to equip individuals to handle more complex decision-making rather than being expected to use a condom every time. That's too simplistic.***
  - ***It's time to stop talking about negotiating safer sex and start talking about negotiating desire. We're talking about emotions and feelings. How do you negotiate that desire to keep yourself safe?***





# The Future of Anal Sex

- **Expanding the prevention toolbox**
- **New prevention technologies**
  - **Rectal microbicides**
  - **Pre-exposure prophylaxis**
  - **Vaccines**
  - **Post-exposure prophylaxis**



# CAPTAIN ANSWER



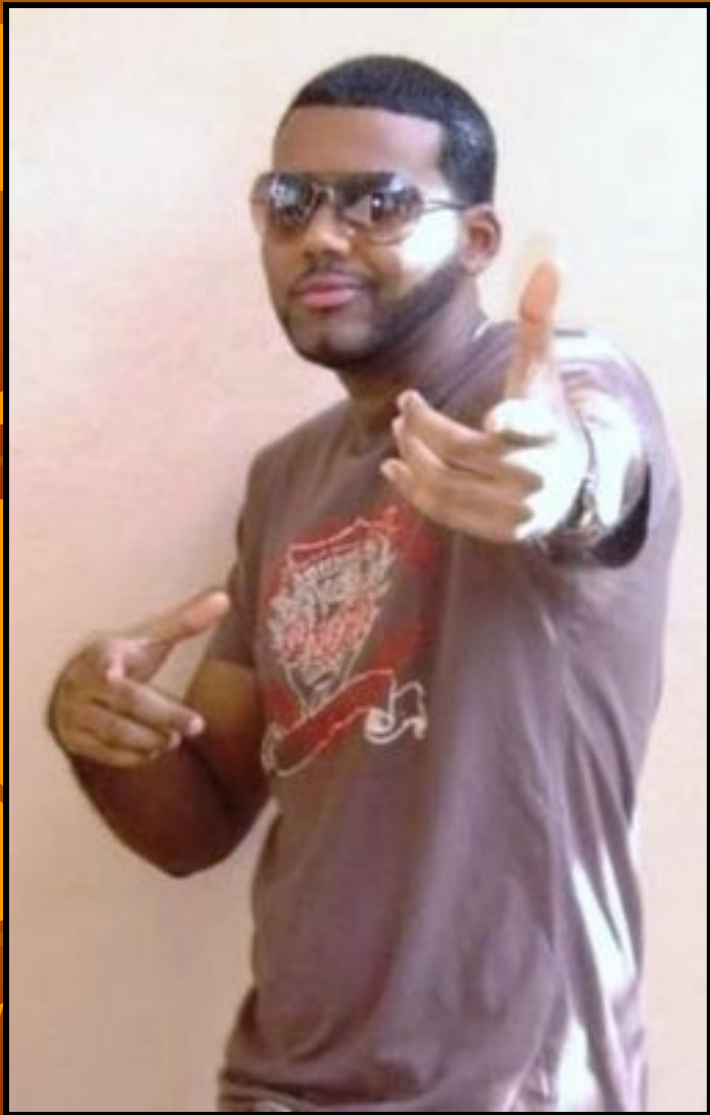
# QUESTIONS?



# Small Group Work

- **What are 5 reasons to SUPPORT sero-adaptation as a strategy?**
- **What are the SOCIAL IMPLICATIONS in the community for advancing a strategy like sero-adaptation?**
- **You are assigned to create MESSAGES for gay men in the community discussing sero-adaptation. What are these messages?**

# Report Back



[LifeLube.org](http://LifeLube.org)

# **Report Back – All three groups**

- **What are 5 reasons to SUPPORT sero-adaptation as a strategy?**
  - **Provide alternative strategies supporting safer sex practices other than condoms**
  - **Personal empowerment**
  - **Promotes greater interaction between partners**
  - **Promotes more discussion /awareness in the community**
  - **Clarifies what is already happening and gives more structure to this safer sex practice technique**

# **Report Back – All three groups**

- **What are the SOCIAL IMPLICATIONS in the community for advancing a strategy like sero-adaptation?**
  - **Potential stigmatization of HIV-positive people**
  - **Help us realize that there are options**
  - **Sero-status discussions can be sexy**
  - **Empowerment to make risk-aware, educated choices**

# Report Back – All three groups

- You are assigned to create **MESSAGES** for gay men in the community discussing sero-adaptation. What are these messages?
  - Sero-adaptation – talk about it
  - Talk Together Test Together
  - - / + Talk
  - Minimize Risk, Maximize Pleasure

# Contact



**Dr. Will Wong**

**Wong\_Will@cdph.org**

**Jim Pickett**

**jpickett@aidschicago.org**

Thank You

