

Information for gay and bisexual men
who have sex on drugs

Terrence
HIGGINS
TRUST



UNDERSTANDING

**CHEM
SEX**



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The term 'chemsex' means 'sex while using drugs'. This booklet gives you practical advice about safer drug taking, and how to lower the chance of sexual health risks when mixing drugs and sex.

Drugs can make us feel confident, part of the group, relaxed and hornier. For some guys sex and drugs/ alcohol go hand in hand. If you choose to use drugs, we want you to look after yourself and protect your sexual health.

We know that mixing sex and drugs often leads to risky sexual behaviour. We also understand that everyone makes a personal choice about when and where they choose to use drugs.

Apart from becoming dependent, the biggest risk can be that drugs cloud judgement or make you unaware of what you're doing or what you have done. Whether it's one-on-one sex or group sex, it's not uncommon for guys to take sexual risks. If you are going to get involved in chemsex, it is important that you know how to keep you and your partners as safe as possible.

Key facts:

Drugs can make you downplay or forget the risks involved in bareback sex.

Sharing needles to inject drugs increases the chances of getting HIV or hepatitis B or C.

Think about situations you might find yourself in so you have limits in mind, rather than working them out as you go along.

If you're having group sex, remember to check condoms are being changed in between fucks with different guys.

Some HIV drugs can push levels of ecstasy (E), ketamine (K), speed, GHB and crystal meth towards overdose or life-threatening levels.

Sex, drugs and partying

What's the deal?

At parties and chill outs or in a sauna, you might be meeting and having sex with several different men over a night or a weekend. A sex environment can seem a bit like a 'bubble' where you feel safe, connected and part of a group - especially if drugs are being shared and passed around. In these situations and when high, everything can feel really positive and lots of the doubts you have (or concerns about consequences) may be put to the back of your mind.

Drugs can make us feel hornier and the urge to lose ourselves in sex more intense. Drugs can also make us downplay or forget the risks involved.

Due to the effects of the drugs and the intimacy of sexual contact, you may feel a trust and closeness with someone you don't know that well, or have only just met.

How do I stay in control?

Drug taking always comes with the potential for a loss of control – for a lot of people that’s the point. However most people also want to keep control over the sexual risks they are willing to take. These tips might help increase the chances of you staying in control:

- **Know your limits.** It’s easy to take too much or to mix, especially if you’re already high. Try to keep track of what you’ve taken, how much and when.
- **Be in the right headspace.** Some people use drugs and sex more harmfully if they are feeling upset, angry or low. If you know that using drugs while feeling a certain way means you’ll end up out of control, consider alternative ways to feel better.
- **Make decisions sober.** Think ahead to the situations you might find yourself in and how you want to handle them. It’s much easier to have clear boundaries or limits in mind than to work them out as you go along.
- **Take your essentials** – enough condoms, lube, clean injecting equipment (works) and cash to get home safely. This means you have what you need if it turns into a long session. If you are on HIV treatment, also ensure you have enough meds.
- **Think about who you’re partying with.** Do they want to do similar things to you? It will be easier to stick to your boundaries if you’re with other people trying to do the same.
- **Look out for each other.** Keep an eye out for others. If you’re at a chemsex party with friends, agree to check in with each other at points throughout the night.

What if things happen too fast?

Sometimes it can help to take yourself out of the situation for a moment. For example, find somewhere to take a few minutes for yourself to check in and think about your choices. Ask yourself:

- Am I in control – do I feel able to make decisions?
- Are there any risks here, am I safe?
- Will I feel okay about the sex I’m having tomorrow?

What if the good times become a problem?

Feeling upset, scared and out of control of your behaviour – or the sex you’ve had when on drugs – might mean that it’s time to take a look at the choices you’re making. Maybe it’s time for you to think about cutting back or stopping your drug use if you’re:

- Putting yourself or others at risk of HIV or other sexually transmitted infections (STIs).
- Aware that you had sex but unable to remember what happened, or whether you consented.
- Using more than you planned to and for longer – losing days at a time.
- Repeatedly missing work or other social arrangements.
- Feeling guilty about your drug use or about things you did when high.
- Spending a lot of time thinking about or wanting drugs, or recovering from them.
- Unable to enjoy or have sex unless you’re on something. Drugs can be used as a way to have sex, and you can end up feeling that you can only have sex while using drugs.

Chemsex questionnaire

Answer these questions to find out if you're happy with your drug use, sex life and level of control:

1. In the last six months, roughly how much of the sex you've had has been without the use of drugs or alcohol?

None Some Roughly 50/50 Most All

2. Have you taken a sexual health risk during chemsex that you've regretted?

Yes No

3. If yes, write what it was in the box below:

Example: A guy came in me at a party.

4. How likely is it that you'll take this risk again?

Very likely Likely Possible Unlikely Very unlikely

5. How in control do you feel of your drug/alcohol use and the decisions you make?

In complete control Mostly in control
 Not always in control I don't feel in control

6. How in control do you feel of your sex life and the decisions you make?

In complete control Mostly in control
 Not always in control I don't feel in control

Why is that? Sometimes it doesn't matter how much we know, we still do things we know are harmful to us.

7. Think about your feelings relating to having sex sober, and your feelings about sex while on something. Write as many as you can think of in the boxes below:

Sober sex *Example:*
Boredom, intimacy, orgasm
(satisfied), awkward.

Sex involving drugs/alcohol
Example: Excitement, anxiety,
confidence, escapism.

8. Do you feel able to make any of the changes relating to drug use and sex that you'd like to make?

Yes No

Now take a look at your answers. If you need some support around making the choices that are right for you, or regaining control of your drug use and/or sex life, check out the services at the back of this booklet.

Drugs and the law

Drugs are grouped into three categories, Classes A, B and C, with Class A carrying the heaviest penalties. The following website link has full information on classification, possession, supply and prosecution: drugfucked.tht.org.uk/home/thebasics/drugsandthelaw

What about mental health issues?

If you suffer from anxiety or depression, using party drugs increases your risk of these getting worse or of you developing more serious mental health problems. If you're prone to mental health problems, using drugs can trigger them. You might not realise you're vulnerable to mental health problems and might only discover this when drugs trigger a problem.

What are the other risks?

If you're high, you might not be aware that a condom has broken or slipped off. Long or rough sex sessions are more likely to cause condoms to break. Condoms should be checked during sex and changed after about half an hour. Lots of lube reduces the risk of condoms tearing or slipping off. Drugs can stop you feeling pain, so you may not be as likely to notice if you've damaged the skin of your arse or cock. This could make you more susceptible to injuring yourself or getting or passing on STIs such as hepatitis C.

If you're having group sex it can be difficult to keep track of the sex you've had. Check condoms are being changed in between fucks with different guys as HIV can be transmitted in the anal mucus or through small amounts of blood left on a condom.

Post-exposure prophylaxis (PEP)

What is PEP?

Maybe you are HIV negative and want to stay that way. Or perhaps you have HIV and want to stop another guy getting it. PEP is a month-long course of HIV medication. If it is started soon after HIV enters the body (within 24 hours is best, within 72 hours at the latest), PEP stands a good chance of stopping the virus before it permanently infects someone.

Research shows that up to 8 in 10 guys get HIV from someone who doesn't know they have it. Also, people are most infectious when they've recently been infected, so even if a guy has tested negative recently he may have been infected since his test and be at high risk for passing on HIV.

PEP is free of charge but can only be prescribed by doctors. Sexual health and HIV clinics can provide it, as can Accident and Emergency (A&E) departments out of hours. Regular family doctors (GPs) don't give PEP.

Find out more on this webpage:
tht.org.uk/takenarisk

Are there side effects?

PEP often caused diarrhoea, headaches or feeling sick - but new PEP drugs mean people are much less likely to get side effects.

Pre-exposure prophylaxis (PrEP)

Is fucking on PrEP safe?

You may have also heard of PrEP. This is a new way to reduce the risk of getting HIV. It involves HIV negative people taking HIV medication before sex. If used correctly, PrEP is highly effective at reducing your risk of acquiring HIV (but not other STIs).

PrEP is not currently available in the UK outside an NHS clinical trials (which is now closed and not open to new people).

Unless you can be sure that the guy you're having sex with is currently taking part in a PrEP trial and taking his pills every day to keep him HIV negative, you're still putting yourself at significant risk of HIV if you bareback with him. Remember PrEP needs to be taken every day to get the maximum protection.

PrEP is a new way to reduce the risk of getting HIV.

Safer drug taking

GHB/GBL (G)

With G, the high comes on after about 20 minutes. It lasts about one hour but may last for up to four hours. A dose of G can make you feel chilled out, horny or high. It's often used to boost the effect of other chems such as MDMA.

Dosing

A little G goes a long way, with not much difference (maybe only a millilitre or so) between the dose that gets you high and one that has you hitting the floor. Overdosing is easy to do and happens with little warning. You can pass out, vomit, act erratically, become incoherent, suffer facial distortions, have a fit and be unable to communicate.

Overdose often happens when you take a second dose before the first takes effect or when the G is stronger than you're used to. It can also happen when you've been drinking alcohol or using other depressant drugs, such as ketamine or diazepam. There may be no warning signs at all before passing out. It's hard to judge dosage as strength varies from batch to batch.

Safer G tips

Many people measure precise doses by using eye dropper pipettes or small syringes. It is crucial to measure an accurate amount. The effects of one dose last around an hour but can last for up to four hours. Waiting at least two hours before taking a second dose makes overdosing less likely.

G can accumulate in your body over time, so you are more likely to overdose the longer you spend doing it. If you can't wait two hours consider slightly reducing your doses over time and add more time between doses (for example, doing it every hour and a half as opposed to on the hour).

Avoid taking G with alcohol, or other depressant drugs such as ketamine, as this can knock you out.

Stick to your own doses and times rather than being influenced by friends' doses or times as they may not correspond with yours. Drinking from a cup or bottle - especially someone else's - comes with high risk of overdosing.

Steve Time: Time: Time: Time: Time:
12.45am
Dose: Dose: Dose: Dose: Dose:
0.5ml

Peter Time: Time: Time: Time: Time:
11.30pm
Dose: Dose: Dose: Dose: Dose:
0.5ml

If you lose track of when you have taken a dose, wait at least two hours before taking more.

As collapsing is not uncommon, never take G alone. If you or someone else feels ill, don't stay on your own - tell someone you trust that you've taken G (and anything else). Try to avoid falling asleep.

Store the G in a container which someone would not drink from normally, such as an ashtray or a flat low bowl. This reduces the chance that someone will pick it up accidentally. Also, store it away from a normal drinking area.

While measuring your own doses, it is a good idea to get someone else to watch you. If you forget whether you've taken a dose or you've forgotten to write it down, a friend can remind you or pick up on something you miss.

If someone is getting drowsy from GHB/GBL, don't let them fall into a 'G-sleep' - they're not sleeping, they're unconscious and may not wake up. Try to keep them awake and moving until the effects wear off or medical help arrives. Lie them on their side - not their back - to stop them choking on their own vomit. Check they're breathing, call 999 and ask for an ambulance.

Avoid G if you have high or low blood pressure, epilepsy, convulsions, heart or breathing problems.

Dependence

If you use G regularly you could soon find yourself showing signs of physical dependence to G – this can even happen after one long weekend of use. These withdrawal symptoms can include panic attacks, sweating and convulsions.

If withdrawal symptoms are severe, go to your nearest A&E department. Be completely honest about your G usage. This is the safest course of action as withdrawal can be dangerous and in some cases life-threatening.

Stimulants

- Mephedrone (meow)
- MDMA (Mandy)
- Cocaine (coke)
- Ecstasy (E)
- Speed
- Tina.

Stimulants speed up your body's functions. They may make you feel more alert and confident, as well as making you feel 'loved up' or have a powerful need to connect to another person – often sexually. The comedown can make you feel depressed and anxious. Stimulants can cause acute insomnia with increased heart rate and palpitations long after the last dose; so it is important to think about how long you want to be awake for as well as managing a comedown.

Dependence

Tolerance of stimulants can build, with more needed to get the same effect, and you can become reliant on the drug.

Mephedrone (meow)

Mephedrone is a stimulant drug in the form of a white powder that can be snorted, swallowed, injected (slammed) and injected in the arse with a syringe with the needle taken off (booty bump).

For about an hour after taking mephedrone you may feel high, alert, close to those around you, confident and horny. Slamming will bring on a more immediate and intense high which will last longer. Slamming runs the risk of serious health problems – see the Injecting (slamming) section for details.

As the effects wear off, repeat doses are needed to maintain the high. Some people report finding it hard to stop taking mephedrone once they have started a session.

Dependence

Tolerance to mephedrone can build quickly, with people needing to take more to feel the same effects. Frequent and prolonged use can result in a strong psychological dependency, particularly in relation to sex.

If you use mephedrone at chemsex parties, keep an eye on how often you are using over time and for how long. Slamming is more likely to become addictive and some gay men report feeling addicted to the act of slamming itself.

Crystal meth (Tina, ice)

Crystal meth is a very powerful stimulant that can be smoked through a glass pipe and snorted. It can also be injected (slammed) and injected in the arse with a syringe with the needle taken off (booty bump).

Crystal meth can make you feel high, wide awake, confident, impulsive and very horny with fewer inhibitions. Crystal also increases body temperature, heartbeat and blood pressure, with possible risks of heart attack, stroke, coma or death – especially if mixed with other drugs, including some HIV and anti-depressant medications.

You might go days without eating or sleeping. The comedown can leave you feeling exhausted, aggressive and paranoid, in some cases even suicidal.

Dependence

Crystal meth is quickly addictive as tolerance soon builds and users need more to get the same high. People can soon find themselves out of their depth with crystal and waving goodbye to jobs, homes, money, boyfriends, friends and health.

Injecting crystal meth is the quickest way to becoming addicted. It also runs the risk of serious health problems (skin abscesses, collapsed veins, blood poisoning and heart infections). Quitting can be very hard and the effects of crystal meth on the brain can last long after quitting. See the Injecting (slamming) section for details.

If you're with someone who has taken crystal meth and is paranoid, scared or talking about someone trying to hurt them, they may be experiencing a **psychotic episode**. Remember that they believe what they are experiencing is real. This might lead them to act aggressively if they feel they are in serious danger or that someone at the party is 'out to get them'.

If this happens, avoid confrontation with that person. Speak to them in a quiet voice, avoid physical contact, do not try to argue or disagree with them and try to reassure them that they are safe. If a person is acting dangerously you may need to consider calling emergency services. Be honest about any drug use so emergency services know what they are dealing with and can act safely.

Ketamine (K)

Ketamine is a powder which is usually snorted, the effects usually last around 45-90 minutes. If injected or swallowed, effects can last for up to three hours.

Ketamine can make you feel horny. As the drug numbs your body, sex may go on for longer and lead to damage such as internal injuries during arse play.

It is used by some fisters to relax the arse muscles. Reduced ability to feel pain can lead to bleeding or abrasions during sex that isn't noticed but which can help pass on HIV, hepatitis C and other STIs.

A large enough dose can put you in a 'K hole'. This is where you are cut off from your sense of self for 45-90 minutes and will have difficulty moving, talking, swallowing or even breathing.

Dependence

Tolerance to ketamine builds and it's possible to become dependent on it. It can cause anxiety, depression, suicidal urges, memory loss and other mental health problems. Frequent use of ketamine can cause kidney, liver or permanent bladder damage.

Injecting (slamming)

Sharing needles to inject drugs into a vein increases the chances of getting HIV or hepatitis B or C. Injecting a drug gives a more intense hit and so is more likely to lead to problem drug use.

Safety tips if injecting:

- Get immunised for Hep A and Hep B.
- Make sure you have enough needles so that you won't need to share.
- Use a new needle if you fail to find a vein straightaway.
- Use the smallest needles you can (those colour-coded orange are the smallest).
- Don't inject a mix of different types of drugs. The effects are unpredictable and you increase the risk of overdosing.
- Know where to get clean works and take back used equipment. Both can be done at needle exchanges, drug agencies and many chemists.
- Don't pool drugs in a shared pot. There's a danger of contaminated blood getting into the drugs you're sharing.

It's also important to know that:

- The temptation to share is strongest for many people when they're coming down from drugs, not before they take them.
- Sharing with people you feel close to may feel safer but this is often an illusion, with infections spreading between friends, lovers and fuck buddies.

Downers (benzos)

The more commonly-used downers are known as benzos. These include diazepam (Valium) and flunitrazepam (Rohypnol). The effects of benzos are similar to tranquilisers.

Dependence

Benzos can be highly addictive and can increase overdose risk when mixed with other downers such as GBL. Being sedated also means you may not be able to stay in control of any sex that takes place.

Mixing with HIV drugs

Some HIV drugs can push levels of street drugs in somebody's body, such as MDMA, K, speed, GHB and crystal meth, towards overdose or life-threatening levels. Being high can also make you less likely to take your HIV pills at the right time, or at all.

Erection drugs

Viagra and other erection drugs can interact with some HIV meds, so take a lower dose of any Viagra-type drugs. Poppers and Viagra-type drugs might also cause a dangerous drop in blood pressure, especially if used together.

Getting help with drugs

For more about what's available for gay and bisexual men who are worried about their drug use, check out these options:

Terrence Higgins Trust Information about sexual health, drugs and alcohol. tth.org.uk/chemsex

Scottish Drugs Services Directory Information on all drug treatment and rehab services in Scotland. scottishdrugservices.com

Scottish Drugs Forum National resource of expertise on drug use. sdf.org.uk

Drugsmeter Feedback on your drug use. drugsmeter.com

Exchange Supplies Safer injecting supplies. exchangesupplies.org

Hardcell All the facts you need about barebacking, drugs and harder sex. hardcell.org.uk

myHIV A comprehensive online resource for people living with HIV. tth.org.uk/myhiv

THT Direct This helpline offers sexual health advice and information, and emotional support.

Call **0808 802 1221** from 10am–8pm, Monday to Friday, or email: info.scotland@tth.org.uk

Survivors UK Offering support for people who have experienced rape or sexual assault. survivorsuk.org

The HIV and sexual health charity for life

Website: www.tht.org.uk/scotland **THT Direct:** 0808 802 1221

Registered office: 134 Douglas Street, Glasgow G2 4HF

Tel: 0141 332 3838 **Email:** info.scotland@tht.org.uk



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