Stimulant Drug Use among HIV positive men who have sex with men (MSM): Findings from the Medical Monitoring Project (MMP) Michael Navejas, Kathleen H. Reilly, Shavvy Raj-Singh, Chi-Chi Udeagu

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Background

- > Studies have shown that stimulant drug use (e.g., methamphetamine) may be disproportionately used by MSM.
- > To determine the impact of this high risk behavior in NYC, we examined data from the CDC-funded Medical Monitoring Project (MMP).
- > Our objective was to examine the frequency and correlates of self-reported non-injection stimulant drug use (methamphetamine, cocaine, crack, or other amphetamine) in the past 12 months among HIV-positive MSM.

Methodology

MMP is a national study of HIV-infected persons receiving outpatient medical care for HIV that monitors health behaviors, clinical outcomes, and HIV-related health and social service needs through structured interviews and medical record abstractions.

> MMP uses a 3-stage clustered sampling design to produce nationally representative estimates. The data collection year was for 2013.

1st stage - Local Areas



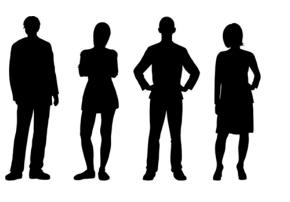
- 23 areas selected (16 states, 6 cities, and 1 US territory)
- Probability of selection is proportional to size (PPS) (# of reported living AIDS cases in 2002)
- Includes >80% of US AIDS cases in 2002

2nd stage - Providers



- Deliver HIV medical care
- Monitor CD4 count, viral load
- Prescribe antiretroviral therapy (ART)
- Probability of selection is proportional to size (facilities with higher patient loads are more likely to be selected)

3rd stage - Patients



- Randomly sampled
- HIV-infected
- \geq 18 years of age
- Received HIV medical care at facility 1/1 4/30 in a given cycle year
- Participation was voluntary; \$40 incentive (MetroCard, cash, or Visa Card)

Statistical Analysis

 \succ Analyses were restricted to MSM who used stimulant drugs (n = 99).

Associations between stimulant drug use and relevant variables—based on the findings of previously published research—were examined through the estimation of odds ratios (OR) and 95% confidence intervals (CI) using logistic regression models.

> Analyses were conducted using SAS 9.3 (Cary, NC, USA).

		R	esults				
Variable	Ν	N (%) engaging in	Bivariat	e	Multivaria	te	
		Stimulant drug use	OR (95% CI)	p Value	AOR (95% CI)	p Value	
Race							
Black	28	3 (10.7)	0.18 (0.04, 0.76)	.02	.22 (0.05, 0.99)	.05	
White	44	7 (16.0)	1		1		
Hispanic	25	10 (40.0)	0.28 (0.09, 0.89)	.03	.28 (0.08, 0.94)	.04	
Other	2	1 (50.0)	1.50 (0.08, 26.86)	.78	4.79 (0.22, 105.01)	.32	
•							
Age							
18-29	20	4 (20.0)	1				
30-30	28	8 (28.6)	1.60 (0.41, 6.29)	0.50			
40-49	23	7 (30.4)	1.75 (0.43, 7.17)	0.44			
50+	28	2 (7.1)	0.31 (0.05, 1.88)	0.20			
ducation							
E High School	33	3 (9.1)	0.27 (0.07, 0.98)	0.05			
> High School	66	18 (27.3)	1				
Number of Sex Partners †							
1-2 partners	42	4 (9.5)	1		1		
\geq 3 partners	53	17 (32.7)	4.61 (1.42, 15.04)	.01	5.60 (1.46, 21.)	.01	
							

Limitations

- Self-report; possible social desirability bias
- Complex survey sample
- Small sample size

Conclusion

Stimulant drug use is more common among white HIV positive MSM than among other MSM and is correlated with multiple sex partners—five times more likely—among MSM of all races.

- Age, education, and condomless anal sex were not independently associated with stimulant drug use in the multivariate analysis.
- Closer examination of stimulant drug use in this population is necessary to develop targeted interventions.

Condomless Sex				
No	52	6 (11.5)	1	
Yes	47	15 (31.9)	3.59 (1.26, 10.26)	.02
Total	99	21 (21.2)		

Results

- In the adjusted model whites were almost 5 times more likely to report using non-injection stimulant drugs in the past 12 months compared to blacks and were 3 and a half times more likely than Hispanics to report using non-injection stimulant drugs in the past 12 months.
- MSM of all races who used stimulant drugs were almost 5 times more likely to have ≥3 sex partners in the past 12 months.

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