

Impact of the COVID-19 pandemic on sexual behaviour and welfare of HIV preexposure prophylaxis users in Northern France: a prospective quantitative and qualitative monocentric study

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Introduction

Both COVID-19 pandemic and its control measures can affect the sexual behaviour and the adherence to treatment of people using HIV preexposure prophylaxis (PrEP).

Objectives

The objectives of this study were to determine whether and how PrEP users change their sexual behaviour and use of PrEP during the COVID-19 pandemic and the impact on their sexual welfare.

Patients and methods

We conducted a single-center cross-sectional study via an auto-questionnaire given to all PrEP users coming in scheduled consultation in Tourcoing Hospital from 1 February 2021 to 1 May 2021. Complementarily, 20 participants took part in semi-structured in-depth interviews (IDIs).

The present study got ethical approval from ethics committee (ref CPP: 2020-82; N° ID RCB: 2020-A02623-36). It was registered on ClinicalTrial.gov (NCT04772326).

Results

A total of 94 PrEP users completed the self-administered questionnaire and 14 took part in IDIs. All participants were men, with a mean age of 39±11 years. Most participants identified as gay (94%). On-demand PrEP was the preferred strategy (59%).

Table 1. Socio-demographic characteristics of the participants depending on the PrEP modalities.

Characteristics	Total (n=94)	Daily PrEP (n=39)	On-demand PrEP (n=55)	p
Age (years)	39±11	39±11	39±11	0,90
Male sex	94 (100%)	39 (100%)	55 (100%)	0,99
Sexual orientation :				
Homosexual	89 (94%)	36 (92%)	52 (95%)	0,99
Bisexual	6 (6%)	3 (8%)	3 (5%)	
In couple	34 (36%)	18 (46%)	16 (29%)	0,11
Professionnal status :				0,47
Employee	70 (74%)	29 (74%)	41 (75%)	
Self-employed	12 (13%)	6 (15%)	6 (11%)	
Job-seeking	7 (7%)	3 (8%)	4 (7%)	
Student	1 (1%)	1 (3%)	0	
Retired	1 (1%)	0	1 (2%)	
Use of toxic and psychoactive substances :				
Tobacco	31 (33%)	13 (33%)	18 (33%)	0,97
Alcohol	61 (64%)	26 (67%)	35 (64%)	0,93
Poppers	45 (47%)	22 (56%)	23 (42%)	0,29
Erectile-promoting drugs	21 (22%)	7 (18%)	14 (25%)	0,54
Cannabis	12 (13%)	5 (13%)	7 (13%)	0,49
Cocaine	22 (23%)	8 (21%)	14 (25%)	0,71
Anxiolytics	3 (3%)	1 (3%)	2 (4%)	0,99
Antidepressants	5 (5%)	4 (10%)	1 (2%)	0,18
Sleeping pills	4 (4%)	1 (3%)	3 (5%)	0,86
Others	18 (20%)	5 (13%)	13 (24%)	0,29

Mean (standard deviation) and number (%).

Almost half of the participants (49%) were living alone during the first lockdown, one third (33%) were in couple. The others have been lockdown with family or friends. Sixty participants (63%) continued to work, among them a majority embraced teleworking (75%). Concerning the overall experience of lockdown, a majority of participants reported having experienced it well (16%) or rather well (54%). But, 43% of respondents reported anxiety, 47% insomnia, and 53% libido disorders.

Health service use and sexual behaviour during the first lockdown :

Two thirds of participants continued PrEP. Only two of them experienced difficulties to obtain their treatment (delay in medical appointment, n=1; treatment unavailable at the pharmacy, n=1). One third of participants was tested for sexually transmitted infections (STIs), leading to the diagnosis of at least one STI in 11% of cases.

Among the respondents, 73% reported having sex during the first lockdown, with at least one new partner for 71% of them. New partners were met mainly through dating apps (94%). COVID-19 related risks were discussed with sexual partners often (n=12), sometimes (n=32).

Table 2. Reported sexual behaviour and welfare during and after COVID-19 lockdown.

Sexual behaviour	During lockdown	After lockdown
Use of condoms		
Never	70%	43%
Sometimes	24%	44%
Often	2%	8%
Always	4%	4%
Number of partners/month	6 ± 12	13 ± 17
Number of sexual encounters/month	3 ± 11	11 ± 34
Sexual practices		
Group sex	28%	55%
Sex with alcohol	28%	45%
Sex with drugs	28%	38%
Paid sex	1%	2%
Sexual welfare (on a scale of 0 to 10)		
Sexual satisfaction	6.4 ± 3.6	8.3 ± 1.7
Choice of partners	7.1 ± 3.9	9.1 ± 1.6
Sexual risk-taking	3.3 ± 3.9	5.2 ± 3.6

Mean (standard deviation) and %.

Analysis of IDIs :

During first lockdown, decrease in libido was frequently reported : « *Sex was not a priority* ». But several participants reported an increase in masturbation practice: « *I filled the real with exhausting masturbation* ». In case of new meetings, the partners were mainly chosen on the applications. Their number was reduced. The difficulties reported by the participants were the maintenance of physical but also emotional and intellectual intimacy « *you couldn't find someone* ».

Many perceived the release of lockdown as a sexual liberation. Restrictions were not respected : « *I knew it was illegal. But it was exciting* ». Chemsex was often mentioned during interviews. Participants spoke about private evenings with group sex and chemsex leading to extreme sexual satisfaction : « *more partners in group at sex parties, taking 3MMC, GHB, and cocaine* ». But many evoked the other side of the coin with control lost, drugs side effects and the fear of addiction : « *Some people have discomfort, it's bestial* ». High frequency of clandestine chemsex parties increased fears of overdoses. Dating at home via apps favoured feeling of insecurity especially during curfew forcing overnight stay : « *We act quickly; there is no trust. You don't feel safe...* ».

Conclusion

During the first lockdown, PrEP users continued to engage in sexual activity, but the number of casual partners decreased. Relief of containment measures led to increase in sexual risk-taking, especially chemsex. Adherence to PrEP appeared to be adequate, but STI testing was low. Vulnerability to intimate violence was frequently discussed.