

Authors: Carles Pericas, David Palma, Adrià Arconada, Pere Simón, Vicente Descalzo, Eva Masdeu, Cristina Domingo, Lídia Arranz, Isabel Moreira, Cristina Rius.

Epidemiology Service, Public Health Agency of Barcelona.

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Introduction



Gay, bisexual men and other men who have sex with men (GBMSM) have presented a historical and multifactorial vulnerability when it comes to their sexual health and rights linked to a higher probability of STI and HIV acquisition.



Heterogeneous group with different distributions of social privilege.



Recent changes on how they live their sexualities and take care of their sexual health

Public Health efforts need to approach sexuality going beyond the risk paradigm. Cultural dimensions of sexual practices as well as pleasure need to be incorporated in all interventions.

Introduction

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Barcelona has certain characteristics that translate into very closed sexual networks, favouring sexual health-related emergencies and outbreaks.

General increase of all STIs, particularly among GBMSM Men 800 677.7 700 600 504.3 500 355.9 400 350.46 299.7 273.3 263.2 300 250.1 225.3 171.9 152.5 200 152 135.8 130.1 106.1 161.2 100 33.8 37.1 38.3 22.4 2017 2018 2019 2020 2021 2022 Chlamydia trachomatis **S**ífilis -LGV Gonocòccia

Figure 1: STI incidence in Barcelona (x100.000 inhab.) 2018-2022. Epidemiology Department Registry. Public Health Agency of Barcelona...

Introduction



Centres declare an increase of new HCV cases among GBMSM. Those cases were initially linked to shared usage of douching shower heads in a sexual club.



Objective: Present the interventions done by the Public Health Agency of Barcelona in the context of a potential HCV outbreak among GBMSM.

1

Period of Study

1st cluster of cases October 2022.

Based on incubation time, period of study starts October 2023.

2

Population

All acute HCV cases notified starting on April 2022 (men).

3

Epidemiological survey addendum

30 acute HCV cases among GBMSM were identified April 2022-March 2023.

The epidemiological survey carried out included:

- A wider range of sexual practices that could lead to easier HCV transmission.
 - Chemsex
 - Participation in multitudinous events.
- Participation in sexual parties (either in private venues or clubs).

Constant communication with community-based organisations, STI and HIV Units, Hospitals and Primary Care Centres.

Results



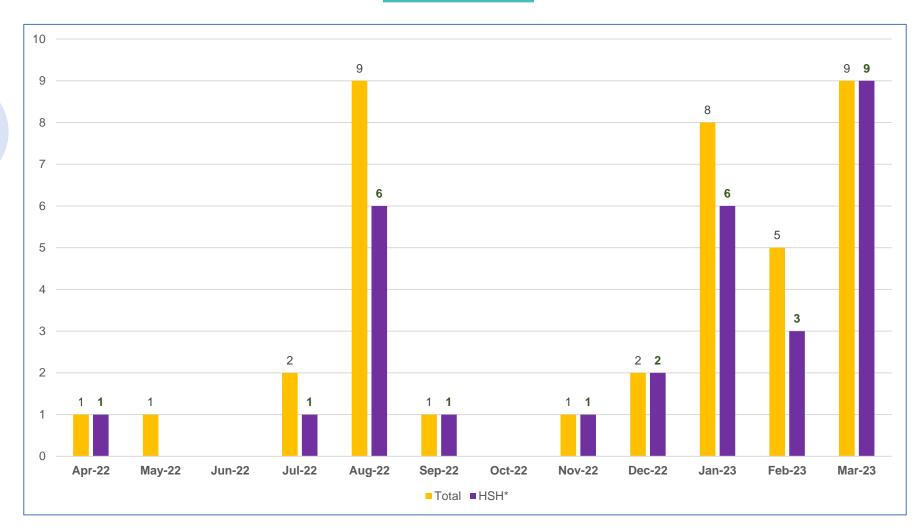


Figure 2: New acute HCV cases in the city of Barcelona. April 2022 – March 2023.

Results



After extended epidemiological survey:

- 1. Only 1 case had used the douching shower head in the sexual club. 2 other cases had been to that same sex club, none matched in time.
- 2. 2 cases were a stable but not exclusive couple. They both did porn both together and with other people.
- 3. No epidemiological link between the cases, outbreak option is discarded. General increase of acute HCV among GBMSM.
- 4. All cases were either living with HIV or PrEP users. 23% of them had mpox in 2022. Most of the cases were asymptomatic and detected during regular screening appointments.
- 5. Many had condomless sex but did not refer having "unconventional" sexual practices. No chemsex or group sex. Many cases weren't aware HCV could be sexually transmitted.

Intervention











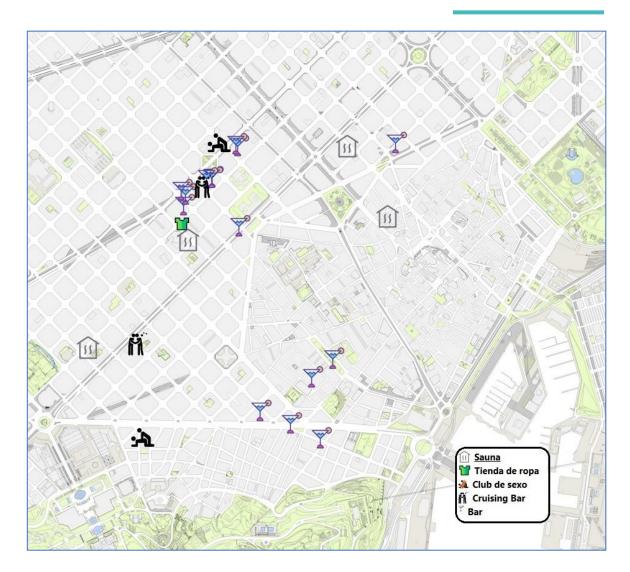






Changes in the frequency of HCV testing during PrEP appointments

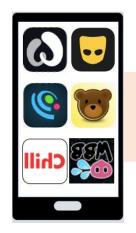
Intervention

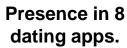






Intervention











Automatic Appointment

Public Health Agency Testing programme

Lessons learned and recommendations

- 1. Preventive strategies in the field of STIs must be aimed at specific populations and be developed and executed with community-based organizations.
- 2. Sex clubs, saunas, dating apps and private chill venues are important stakeholders to work with when it comes to STI-related epidemiological surveillance interventions.
- 3. We must work together with specialized units and centers to guarantee testing and care circuits. Particularly in PrEP appointments.
- 4. It must be determined whether this is a specific increase or a new baseline incidence among GBMSM, as the result of a rapidly changing context when it comes to their sexual health and sexual experiences.

Thank you!



cpericas@aspb.cat