A Collaborative Response to Chemsex & GHB Usage in Ireland

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Introduction

Chemsex refers to the *use of substances* to facilitate or enhance sexual experience.

Three drugs most commonly used are:

- Cocaine or Crack Cocaine
- **Methamphetamines** Crystal Meth ("T" or "Tina")
- **GHB/GBL** ("G") Gamma Hydroxybutyrate/ Gamma Butyrolactone

GHB - initially designed for <u>anaesthetic</u> uses. Then used by <u>body builders</u> to increase muscle mass.

1990's - Used <u>recreationally</u> due to euphoric effects without the "hangover feeling" afterwards.

Early 2000's - Underground raves abated and GHB -

By 2010, it was popularised as a "party drug."

use surfaced into mainstream clubs

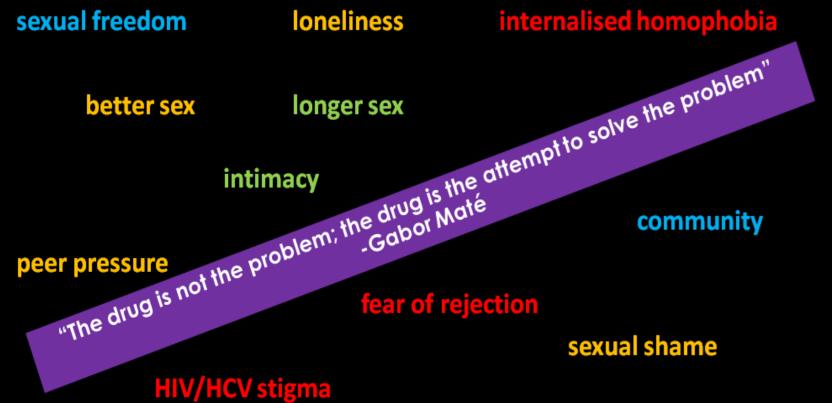
- Cheaper & No "hangover" after Around this time, *virtual social networking* increased. With the recession, *house parties* and *sex parties* also replaced socialising in clubs.

G withdrawal symptoms can *progress* in severity very *rapidly* if treated inadequately

- can result in a *medical emergency* with potentially fatal complications.

Reasons for Drug Use in Chemsex

Using substances during sex is associated with **disinhibition**, a sense of **"exploration and adventure"** and **euphoric** feelings.

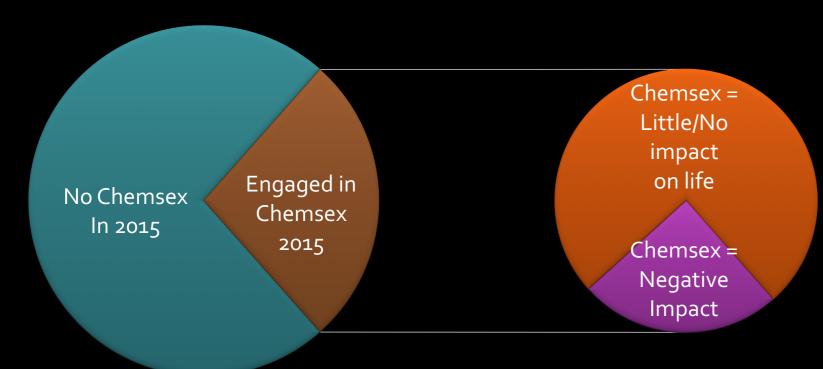


GHB is readily available online, and can be imported in large quantities into Ireland legally for industrial uses – then sold in smaller quantities.

Different psychology & different terminology regarding substance misuse in chemsex. e.g. "I 'slam' but 'junkies' inject!"

The Chemsex Population

Survey of MSM by the Gay Men's Health Service (2016) – <u>568</u> participants



1 in 4 (27%) – engaging in Chemsex in the previous 12 months.

Chemsex impacted negatively on the lives of 1/4 of this cohort

Half had taken 2 or more drugs during Chemsex

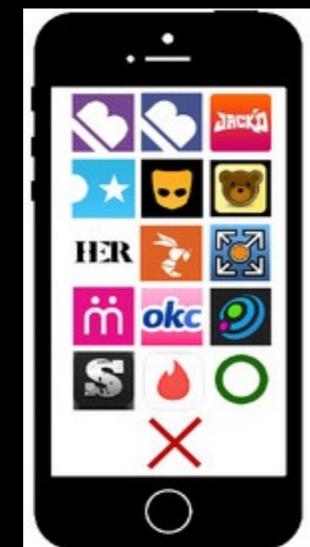


1 in 5 (23%) lost consciousness as a result of Chemsex

Problems Arising from Chemsex

Chemsex is prevalent mainly, but not exclusively, among the gay, bisexual, and MSM population.

Phone apps and websites make chemsex more visible and easier to access.



Chemsex parties typically involve:

- Multiple partners
- Polysubstance misuse
- Weekend long "binge sessions"

Increasing frequency of G being consumed with "T" (Crystal Meth - smoking/injecting)

"Novel injectors" present with physical and mental complications

Concerning risks as a result of "G&T" use include:

- Overdose & becoming unconscious
 - -Small Quantities measured
 - -Different **concentrations** in samples
 - -Polysubstance use increases risk
- Non-consensual sex
- Unprotected sex
- Presenting outside the window period for *PEP*

Chemsex Working Group Ireland

Established to address <u>chemsex</u> and the <u>harms</u> associated with its <u>related substance misuse</u> by developing innovative **harm reduction & awareness campaigns**.

Involves the integration and collaboration of governmental & non-governmental organisations within the **Sexual Health sector** and the **Addictions sector** including:

- HIV Ireland
- Gay Men's Health Service
- Rialto Community Drug Team
- HSE National Drug Treatment Centre
- -HSE Sexual Health & Crisis Pregnancy Programme
- Infectious Diseases Medicine, St. James' Hospital
- -Department of Public Health, Social Inclusion and Vulnerable Groups

Campaigns & Intervention Settings

Primary – harm reduction advice & information dissemination

Secondary – detecting the harmful use of GHB **Tertiary** – managing the harmful effects of chemsex and substance misuse, detoxification, and rehabilitation

Campaigns focused more on harm reduction advice, and emphasised personal safety.

This included developing:



G Cards – with information for both individuals and health care professionals

G Poster & Information Fact Sheets

G Harm Reduction video

Ongoing Chemsex Training Workshops – facilitated by GMHS & HIV Ireland

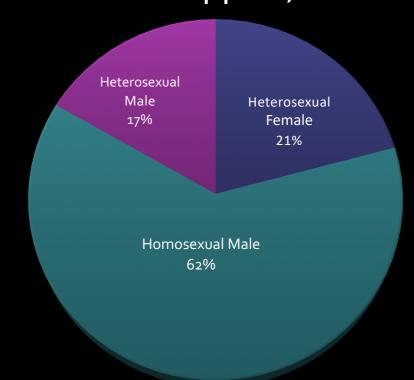
The Club Drugs Clinic Ireland

159 G detoxification episodes since 2014:

8 – admissions to *St. Michael's Ward*, Beaumont Hospital, HSE NDTC

16 – admissions under the care of *medical teams*, and completed in NDTC

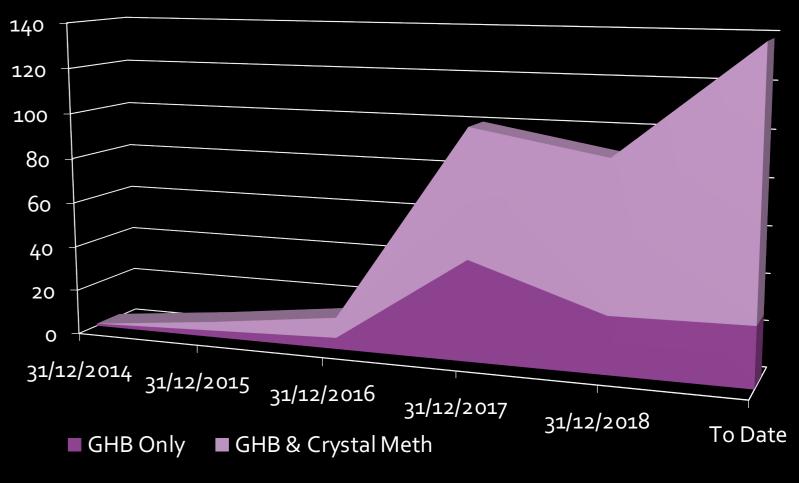
135 – *outpatient* detoxification episodes with continued support, counselling, and aftercare.



Demographics of the patient population attending the Club Drugs Clinic Ireland

Relapse rate for GHB is approximately **70**% in Ireland, and internationally.

Highest risk of relapse – 1 week post detoxification; Reiterates the need for structured, integrated follow up and ongoing Outreach support.



Graph showing increase in presentations with both GHB & Crystal Meth Dependence over the years

Conclusions

Competently addressing chemsex is challenging because it is a <u>combination</u> of issues involving substance misuse, sexual health, and mental health.

Chemsex and drug related interventions were adapted to ensure that high risk behaviours are addressed, and treatment goals relevant to sexual health and mental health are included.

Future plans would include "thinking outside the box" and utilising technology in order to engage the target population.

