



## New HIV diagnoses in London's gay men continue to soar

HIV infections in London's men who have sex with men have risen sharply from 2011 to 2012, according to the latest government statistics. Tony Kirby and Michelle Thornber-Dunwell report.

In January this year, *The Lancet* reported concerns over high-risk drug practices in the London gay scene, including smoking, injecting, or snorting of party drugs such as crystal methamphetamine (crystal meth) and mephedrone, often in combination with sex parties. Serious concerns existed about these behaviours leading to an increase in new HIV infections, hepatitis C (HCV) infections, or both.

Latest statistics from Public Health England (PHE) show that HIV infections among men who have sex with men (MSM) are indeed soaring. In January, 1296 new HIV infections were thought to have occurred in London's MSM in 2011; but more recent data from PHE, which reflect the latest information submitted by sexual health services, have updated this 2011 figure to 1420 new infections. The latest figure for 2012 is 1720 new HIV infections in London's MSM, an increase of 21% on the 2011 number. However, based on how data has been updated over time in previous years, the final 2012 figure could easily rise to 1900 or more, a rise of at least 33% compared with 2011. Whatever the final number, experts agree that London has a serious problem. Overall in the UK, there were 3240 new infections in MSM in 2012, a rise of 8% on the 2011 figure of 3010. When each newly diagnosed person eventually begins antiretroviral treatment, the cost to the UK National Health Service is around £11400 per patient, per year.

Some of the 2011-12 rise can be attributed to increased HIV testing, with 43404 tests in London MSM in 2012, a rise of 17% on the 2011 figure of 37010. Valerie Delpech, head of HIV surveillance at PHE, says: "The latest data show that the year on year increase in new HIV diagnoses amongst gay men continued in 2012, with a

concerning rise seen in London. The good news is that increased HIV testing in recent years accounts for some of this rise, however the scale of the increase seen shows us that high rates of transmission are ongoing." She adds: "There is anecdotal evidence from drug and alcohol clinics in London that recreational or club drug use amongst gay men is a growing issue, which warrants further investigation. PHE, in collaboration with London clinics, is initiating enhanced behavioural surveillance amongst gay men likely to have acquired their infection in the 6 months before diagnosis, to explore this issue."

**"...the potential for a costly and culturally harmful epidemic of HIV and HCV and drug use is enormous'..."**

HCV data are much harder to come by, and there are fears about continuing ignorance in London's gay scene about HCV. Mark Nelson from the Chelsea and Westminster NHS Trust, UK, and colleagues recently presented a study at the International AIDS Society meeting in Kuala Lumpur, Malaysia, showing that around a quarter of HIV-positive MSM in London who were infected with HCV and subsequently cured of HCV, later become re-infected. Nelson estimates around one in 14 (7%) of HIV-positive MSM in London are co-infected with HCV. "There will soon be new drugs that will clear hepatitis C much more easily, yet will be much more expensive", says Nelson. "Questions may be asked about whether these drugs are affordable if there is rapid re-infection."

Many MSM control their drug use and use condoms but the risk-taking behaviour reported in these pages

earlier this year continues to occur across London every week. Some MSM seek websites or parties where they can find partners who will bareback (have sex without condoms). There are even anecdotal reports of HIV-negative men borrowing 4 days worth of HIV medication from their HIV-positive friends so they can have sex without condoms at sex parties with HIV-positive men present, in the hope that they themselves will not get infected (a strategy that has not been proven effective). A trial (PROUD) is ongoing in the UK to determine the effectiveness of giving daily antiretroviral drugs to high-risk HIV-negative men to prevent them becoming infected.

56 Dean St, a sexual health clinic in Soho, London, is at the centre of the MSM HIV epidemic. David Stuart manages the Antidote Substance Misuse Service at London Friend—a lesbian, gay, bisexual, and transgender health and wellbeing charity—that also operates the CODE Clinic, a service run in conjunction with 56 Dean St that caters for MSM who have high-risk drug use and sexual practices. "Some gay men are preferring to have sex without condoms for a variety of complicated reasons associated with a changing HIV health situation and using drugs to manage a complex relationship to sex, intimacy, and gay identity. Mix this with an alarming increase in injecting use and a reluctance to access traditional drug services, and the potential for a costly and culturally harmful epidemic of HIV and HCV and drug use is enormous", says Stuart. "We need to support the sexual health clinics and substance use sectors to do shared, tailored work, and improve targeting and monitoring so empirical data can qualify this anecdotal concern."

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For a *Lancet News* podcast interview see <http://www.thelancet.com/lancet-news-audio/>

For the January *World Report* see *Lancet* 2013; **381**: 101-102

For the *HIV data* see [http://www.hpa.org.uk/webc/HPAwebFile/HPAweb\\_C/1215589013442](http://www.hpa.org.uk/webc/HPAwebFile/HPAweb_C/1215589013442)

For more on the *cost of HIV treatment in the UK* see <http://www.publications.parliament.uk/pa/ld201012/ldselect/lddaids/188/18802.htm>

For more on *HCV reinfection among HIV-positive MSM* see [http://journals.lww.com/aidsonline/Abstract/publishahead/HCV\\_reinfection\\_incidence\\_and\\_treatment\\_outcome.98577.aspx](http://journals.lww.com/aidsonline/Abstract/publishahead/HCV_reinfection_incidence_and_treatment_outcome.98577.aspx)