Data analysis of a pilot self completed questionnaire for patients attending a men-having-sex-with-men (MSM) clinic

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Introduction

- Data from Health Protection Scotland has shown an increase in syphilis¹ and rectal gonorrhoea² diagnoses which are STIs that mostly impact the MSM population .
- Increasingly there is a need for MSM services to provide more efficient care, appropriately allocate resources and see high risk patients in a timely manner.
- Anecdotal evidence suggested that the majority of MSM currently attending services were low risk.
- The questionnaire was created to discover the characteristics and risk factors of MSM attending dedicated services.
- The aim of the questionnaire was to assess the reasons for attending in order to focus the skill mix of the clinic and improve patient pathways.

Methods

- Anonymous self completed questionnaire
- Questions on risk factors for sexually transmitted infections, blood-borne virus transmission, usage of post-exposure prophylaxis and pre-exposure prophylaxis.
- 28 April - 11 July, 2016.

Overall:

387 responses

Answered	Not answered
384	3
99.2%	0.8%

Cohort	Number of responses
Asymptomatic	219
Symptomatic	45
Contacts of infection	48
Other	46
Blank	29

Reason for attendance

Results

Acceptability of the questionnaire (based on response rate) was 99.2%.

- For contacts of infection, HIV and gonorrhoea were the most prevalent.
- 15% of clients did not use condoms.
- 49% of clients did not know a sexual partner's HIV status.
- 31 users of PEP, 5 users of PrEP.
- 83% of clients have had anal sex in the past 3 months.
- 4.3 partners was the average for sexual partners in the past 3 months.
- 15% of clients had engaged in group sex during the past 3 months.
- 2% of clients had paid for sex.
- 5% of clients were HIV positive.
- 7% of clients had used chemsex drugs (MCAT, GBL, methamphetamine)
- 3% of clients were never having sober sex.
- 4% of clients felt their drug and alcohol use had a negative impact.

Analysis of symptomatic patients

Patients attending due to contact with infection

Discussion

- The study showed a majority low-risk, asymptomatic MSM population using the dedicated clinic (57%).
 - The survey has influenced clinic redesign with the introduction of several test-only clinics for the low risk cohort.
 - There are plans to stream attendees more efficiently to see a Health Advisor, Clinician or Health Care Assistant.
 - This pilot questionnaire will form the basis for online self taken histories in the future.
- However the clinic may not be seeing the high-risk patients who would benefit from senior medical input rather than just a sexual health screen.

References

- Health Protection Scotland, HPS Weekly Report – Syphilis in Scotland 2015: Update (PDF), (Glasgow: HPS, 2016)
- Health Protection Scotland, Gonococcal antibiotic surveillance in Scotland (GASS): prevalence, patterns and trends in 2015 (PDF), (Glasgow: HPS, 2016)