

Methamphetamine and HIV: Basic Facts for Service Providers

Methamphetamine use is a serious public health concern in New York State. New cases of HIV and other sexually transmitted diseases (STDs), particularly among gay men and other men who have sex with men (MSM), may be related to methamphetamine use. Other people are affected as well. Although methamphetamine does not directly cause new HIV infections, research has shown that people who use the drug are more likely to have high-risk sex that increases their chances of HIV and STD infection. HIV-positive methamphetamine users may also harm themselves by not taking their medications on schedule and neglecting important aspects of their health. This fact sheet explains the physical and psychological effects of methamphetamine on users. It also details the short-term and long-term adverse effects of this dangerous, illegal drug.

What is methamphetamine and how is it taken?

Methamphetamine — often called “crystal meth” — is a powerful drug that stimulates the central nervous system and lasts for many hours. It generally comes in a white powder or solid crystal-like chunks, but its color may vary. It can be snorted, swallowed, smoked, injected into a vein, or inserted into the rectum. Some people call injection “slamming.” The slang terms “booty bumping” and “keistering” are used to describe inserting methamphetamine into the rectum. Compared with other illegal drugs, it is rather inexpensive and provides a strong high that lasts 6 to 12 hours. It is fairly simple to manufacture, but the process is dangerous because it involves heating chemicals that can explode.

What are the effects of methamphetamine?

Some of the desired effects include:

- A great boost in energy and mental focus that allows users to work or play for long periods without getting tired.
- A stronger sense of self-confidence and self-worth.
- Lower sexual inhibitions and increased sex drive. However, men who use methamphetamine may be less able to get and keep an erection without using erectile dysfunction drugs, such as Viagra® (sildenafil), Levitra® (vardenafil), and Cialis® (tadalafil).

Short-term adverse effects include:

- An increase in blood pressure, heart rate, and body temperature, sometimes to dangerous levels, which can lead to a heart attack or stroke.
- A “crash” period often occurs after several straight days of using methamphetamine. When they crash, users have little energy and feel depressed and isolated.

Longer-range adverse effects include:

- Intense craving for methamphetamine when not taking it. Users are likely to develop tolerance for the drug (more and more is needed to get high) and become dependent on it or addicted to it. However, some people can use methamphetamine, even for long periods, and not become addicted.
- Deterioration of teeth and gums is common and often severe.
- Reduced appetite, weight loss, and poor eating habits can be harmful, especially to people with HIV or AIDS.
- Potentially serious damage to nerve cells in the brain. The person may need to stop using the drug entirely for the brain to heal — but the damage may be permanent and cannot be reversed.
- Impaired memory, reasoning, and ability to process information.
- Psychological problems: depression, psychosis, aggressive behavior, hallucinations, and paranoia.
- Damage to the cardiovascular system, lungs, liver, muscles, and nerve cells; skin lesions.

Continued on next page

Methamphetamine and HIV (continued)

How does methamphetamine increase the risk of transmitting HIV and other STDs?

- It lowers sexual inhibitions and affects personal judgment, making users more likely to have unprotected sex.
- Users who cannot keep an erection may switch to receptive anal intercourse (“bottoming”), which can raise their risk of getting infected with HIV.
- Some methamphetamine users also take drugs to treat the erectile dysfunction (not able to get or keep an erection) that results from using methamphetamine. This may lead to having longer, more aggressive periods of sex, especially anal sex. When this occurs, condoms can break and tears can occur in the skin of the penis, anus, and rectum, which can cause bleeding and HIV transmission. The drug also causes skin tissues to dry out and be more likely to tear.
- Methamphetamine increases the likelihood of having unprotected sex. Its use is probably a factor in higher rates of new syphilis cases in the New York City area.

Why do gay men/MSM use methamphetamine?

Like other users, many gay men and MSM use methamphetamine because it allows them to work longer and party longer. It lowers sexual inhibitions and gives them the energy, confidence, and stimulation to engage in sexual activities for long periods of time — sometimes for hours or even days. They may engage in specific types of sex they would only have while under the influence of methamphetamine, especially unprotected anal sex (“barebacking”).

- Many methamphetamine users say the drug provides an escape from stress, depression, alienation, and loneliness.
- Gay men and MSM may find the drug helps them cope with the homophobia and prejudice

they experience in everyday life.

- HIV-positive gay men and MSM may be more vulnerable to using methamphetamine as a way to deal with their illness and the stigma of having HIV.

What are the specific risks of injection and rectal use?

Although methamphetamine can be swallowed, smoked, or snorted, injection and rectal use carry specific risks for disease transmission.

- Injecting the drug into the bloodstream increases the risk of transmitting blood-borne infections — HIV, hepatitis B, and hepatitis C — if syringes and other drug injection equipment (“works”) are shared. Users can greatly lower the risk of transmission by not sharing drug injection equipment.
- Inserting crystal meth into the rectum can damage this delicate tissue, making it more likely to tear and possibly transmit HIV by exchanging blood.

How does methamphetamine affect people who are HIV-positive?

Some research studies that used animals found that methamphetamine can damage the immune system. Other research also suggests that methamphetamine quickens the progress of HIV-related dementia (loss of mental function) in humans.

Methamphetamine is not known to have an effect on HIV medications. However, some protease inhibitors (a type of anti-HIV medication) cause the body to absorb methamphetamine at a much faster rate — which may cause severe reactions or possible overdose.

Methamphetamine can affect the health and well-being of HIV-positive persons in less direct ways. When users are high, they may forget to take their

Methamphetamine and HIV (continued)

HIV medications or lose their motivation to stay on their treatment schedule. This can lead to drug *resistance* (anti-HIV drugs fail to work properly); users would then have fewer treatment options and possibly develop AIDS more quickly. HIV-positive users also may not take proper care of their health, such as getting enough sleep and eating well.

What should service providers tell their clients about methamphetamine?

Health care and supportive service providers should educate clients about the effects and risks of methamphetamine use and the advantages of prevention and harm reduction. Clients may or may not feel comfortable talking about their substance use at a particular time. Ask clients about their substance use — including their methamphetamine use — during intake. Try to maintain an ongoing dialogue with clients about substance use during routine visits. Here are suggested key messages for clients:

Prevention messages for non-users

- Avoid or limit the use of methamphetamine. This may greatly improve your ability to prevent HIV infection and live a healthy life with HIV. If you can't stay within your limits, it may be a sign you need help.
- To prevent HIV infection, always use a latex condom correctly each time you have sex.
- Avoid sharing syringes and other drug injection equipment.
- Be aware that many people become addicted to using methamphetamine.

Harm reduction messages for users

- Make a plan to protect yourself BEFORE using methamphetamine.
- Have plenty of condoms and water-based lubricant ready before having sex.
- Try to eat some food, drink plenty of fluids, and get sleep while taking methamphetamine.

What types of help can people get to quit using methamphetamine?

For some users, quitting methamphetamine is very difficult, even with professional help. Many users have withdrawal symptoms that include intense cravings, anxiety, depression, and possible psychosis. Relapse is common. There is no specific medical treatment for methamphetamine use. Treatment options include:

- Supportive individual and group counseling sessions.
- Cognitive behavioral therapy.
- Motivational interviewing.
- 12-step programs, including Crystal Meth Anonymous in places where it is available.
- Medical support to handle the symptoms of quitting methamphetamine use, including withdrawal and depression.

How can service providers help prevent or reduce methamphetamine use?

Being on the front lines of HIV/AIDS counseling and treatment, service providers can help prevent or reduce methamphetamine use by taking these steps:

- Monitor the specific impact of methamphetamine on the communities you serve.
- Include methamphetamine education and prevention in programs that target gay men, MSM, and people who have HIV/AIDS.
- Identify other populations in your community (college students, rural residents, etc.) that use methamphetamine or who seem most vulnerable to the drug so they can receive education and services.
- Share ideas and “best practices” with other service providers for reducing methamphetamine use and HIV/STD transmission.
- Learn about treatment providers in the community who can help methamphetamine users and create referral relationships with them.

Methamphetamine and HIV (continued)

Resources for information and client treatment

New York State Department of Health AIDS Institute

For more information on methamphetamine and HIV, visit the New York State Department of Health website at: www.health.state.ny.us/diseases/aids/harm_reduction/crystalmeth/index.htm. The site also has a methamphetamine-related literature base.

For information on treatment programs:

New York State Office of Substance Abuse Services (OASAS) Electronic Methamphetamine Clearinghouse

www.oasas.state.ny.us/meth/index.htm
1-800-522-5353

LIFENET

1-800-LIFENET (New York City only)

For counseling and treatment:

Crystal Meth Anonymous

www.crystalmeth.org

New York City Crystal Meth Anonymous

www.nycma.org
212-642-5029

Gay Men's Health Crisis (GMHC)

www.gmhc.org
1-800-AIDS-NYC (1-800-243-7692)

The Lesbian, Gay, Bisexual, and Transgender Community Center

www.gaycenter.org
212-620-7310

Callen-Lorde Community Health Center

www.callen-lorde.org
212-271-7200

Greenwich House

www.greenwichhouse.org
212-242-4140

Addiction Institute of New York

(formerly Smithers)
www.addictionresourcesguide.com/listings/addictioninstitute.html
212-523-6491

LIFENET

1-800-LIFENET (New York City only)

How to get new syringes and dispose of used ones

The New York State Expanded Syringe Access Demonstration Program (ESAP) allows drug stores to sell new syringes to persons aged 18 years or older without a prescription. You can also go to Syringe Exchange Programs to trade in a used syringe for a new one. To find ESAP drug stores, Syringe Exchange Programs, or disposal sites for used syringes, call:

1-800-541-AIDS (English) or **1-800-233-SIDA** (Spanish). These are toll-free calls within New York State.

For more information, visit the New York State Department of Health website:

www.nyhealth/diseases/aids/harm_reduction/needles_syringes/index.htm.

**State of New York
Department of Health**