

Bellevue Hospital/New York University (NYU) Langone Medical Center Men's Sexual Health Project (MSHP):

A Collaborative HIV and Sexually Transmitted Infection (STI) Testing Strategy Targeting Highly Sexually Active Men Who Have Sex with Men (MSM) in New York City (NYC).

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Objective

MSHP is a collaborative HIV and STI testing program located at two NYC Bathhouses. MSHP combines diagnostic and referral services from Bellevue Hospital Center (BHC), NYU Center for AIDS Research (CFAR), and the New York City Public Health Lab (PHL) to extend HIV and STI testing services to these commercial sex venues (CSV) catering to MSM in NYC.

Despite being a national and international epicenter for the MSM HIV epidemic, such testing services had never been provided at these long-lived NYC CSV until establishment of this program.

Methods

MSHP has combined the diagnostic services of Bellevue Hospital Center (BHC) and the NYC Public Health Lab (PHL) with research supported by the NYU CFAR. Confidential, rapid HIV testing services and staff are provided by BH-HHC. In-kind testing for STI including Gonorrhea, Chlamydia, and Syphilis are provided through the NYC PHL. Pooled viral load testing of rapid test negative plasma and Serologic Testing Algorithm for Recent HIV Seroconversion (STARHS) of Western Blot confirmed plasma to detect acute and recent HIV infections are provided by NYU CFAR. Between 30-35 hours of testing are offered weekly at two NYC bathhouses. Outreach had initially been limited to patrons of these venues, but aggressive internet marketing, introduced in late 2007, has diversified sources of referrals to MSHP services. This strategy included a very successful "blast" email to all NYC area subscribers of Manhunt.net, a popular MSM social and sexual networking web site.

In addition to testing services, men participating in MSHP completed an NYU/Bellevue Institutional Review Board (IRB) approved questionnaire administered by testing staff to gather demographic and behavioral data of clients.

Results

As of October 9, 2008 1306 MSHP visits had occurred among 962 unique clients at two New York City bathhouses. 22% of all clients were between age 18-29, while 39% of men referred to the program from internet outreach were in this young MSM age bracket ($p < .001$). 51% of men categorized themselves as a racial or ethnic minority. 10% of clients had never been tested for HIV prior to their MSHP visit. 57% of clients reported that they were under the care of a primary care provider (PCP). Of these men connected to primary care, 46% has not disclosed same sex behaviors to their PCP.

25% of clients did not identify themselves as gay. The median number of male sex partners clients reported in the three month recall period prior to their MSHP visit was 5. 37.5% of all clients reported unprotected anal intercourse (UAI) over this recall period. UAI was more commonly reported by men recruited from the internet (45.5%). Unprotected insertive intercourse was reported with greater frequency than unprotected receptive intercourse, 40.3% and 33.6% respectively.

23% reported female sexual partners over the recall period.

Among unique clients agreeing to HIV testing, 3.6% were newly diagnosed with HIV infection. 38% of these infections were dated as recent or acute using pooled plasma viral load or STARHS testing guided by rapid test results. Of these recent infections, three were detected during the acute phase of infection through the use of pooled plasma HIV viral load testing in the setting of a negative OraQuick Advance 1/2[®] test. One additional acute HIV infection was detected through partner referral initiated through MSHP to an affiliated program outside the bathhouse testing milieu. The remainder of the recent infections were western blot positive and were dated using STARHS.

75% of these newly diagnosed men have been connected to care facilitated by the use of a secure internet link to the Bellevue Hospital scheduling system. All rapid HIV test results were communicated at the time of MSHP visit.

STI have been detected in 6% of clients seeking these testing services. 4.2% demonstrate serologic evidence of syphilis infection. 6.5% have been diagnosed with a rectal STI. STI are more common among men tested through internet outreach.

Conclusions

Housing an HIV and STI testing program in the context of a CSV, such as a bathhouse, may neutralize stigma and appeal to a particularly high risk and diverse group of MSM recruited from multiple sources. The MSHP model of collaboration has created an integrated service adding a CSV-based HIV/STI diagnostic and preventive presence in NYC for sexually active MSM. The inclusion of STI testing in this program highlights the need for further integration of HIV and STI testing and referral services.

Although unidentified HIV infections are expected among such a population, MSHP has identified an alarmingly high rate of early infection. Notably, the pooled plasma viral load testing has identified 4 infections that would otherwise not have been detected in as timely a manner. Such testing is an important supplement to field-based rapid serologic testing and deserves further evaluation in similar non-traditional environments.

High rates of rectal infections and reports of UAI highlight the need for the development and evaluation of both barrier and non-barrier preventive strategies among populations such as the one we service.

Figure 1. Palm Card

	ALL CLIENTS	INTERNET CLIENTS
Age 18-29	22.1%	39.0%
Race		
White, non-Hispanic	49.1%	64.5%
White, Hispanic	21.9%	12.8%
Asian Pacific Islander	10.8%	7.1%
Black, non-Hispanic	8.5%	6.4%
Black, Hispanic	3.1%	2.1%
Native American	0.2%	0.0%
Other	5.6%	4.3%
Sexual Identity		
Gay	74.9%	74.5%
Bisexual	18.5%	14.2%
Straight	3.2%	5.0%
Other	1.6%	4.3%
Reported Unprotected Anal Sex		
Any	37.5%	45.5%
Receptive	33.6%	37.7%
Insertive	40.3%	55.6%

Table 2. HIV RESULTS

HIV detected	(3.6% of all testers)	35
Acute Infection	(11% of detected infections)	4*
STARHS Recent	(26% of detected infections)	9
STARHS Established	(63% of detected infections)	22

*1 of these infections identified by partner notification by an affiliated program

Table 3. Rates of STI Among Men Tested

STI	ALL	INTERNET
Syphilis	4.2%	3.3%
Urine Gonorrhea	1.1%	2.7%
Urine Chlamydia	4.9%	10.7%
Rectal Chlamydia	6.5%	9.2%
Rectal Gonorrhea**	0.4%	2.4%

**Rectal GC by culture, other tests by nucleic acid amplification

Figure 2. Manhunt Email Blast

On August 13, 2008, Manhunt.net sent a subscriber-wide email blast to the New York City Tri-state area. The email was sent to 30,000 users and resulted in an eight fold increase in internet traffic to the Men's Sexual Health Project web site. For one month following this blast 45% of men tested through the project reported that they heard about the MSHP service through this email communication.

Although referrals continue to be generated through Manhunt, this initial burst of activity declined over the subsequent weeks. Negotiations continue for a more standard schedule of email reminders through this partner recruitment internet site.

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