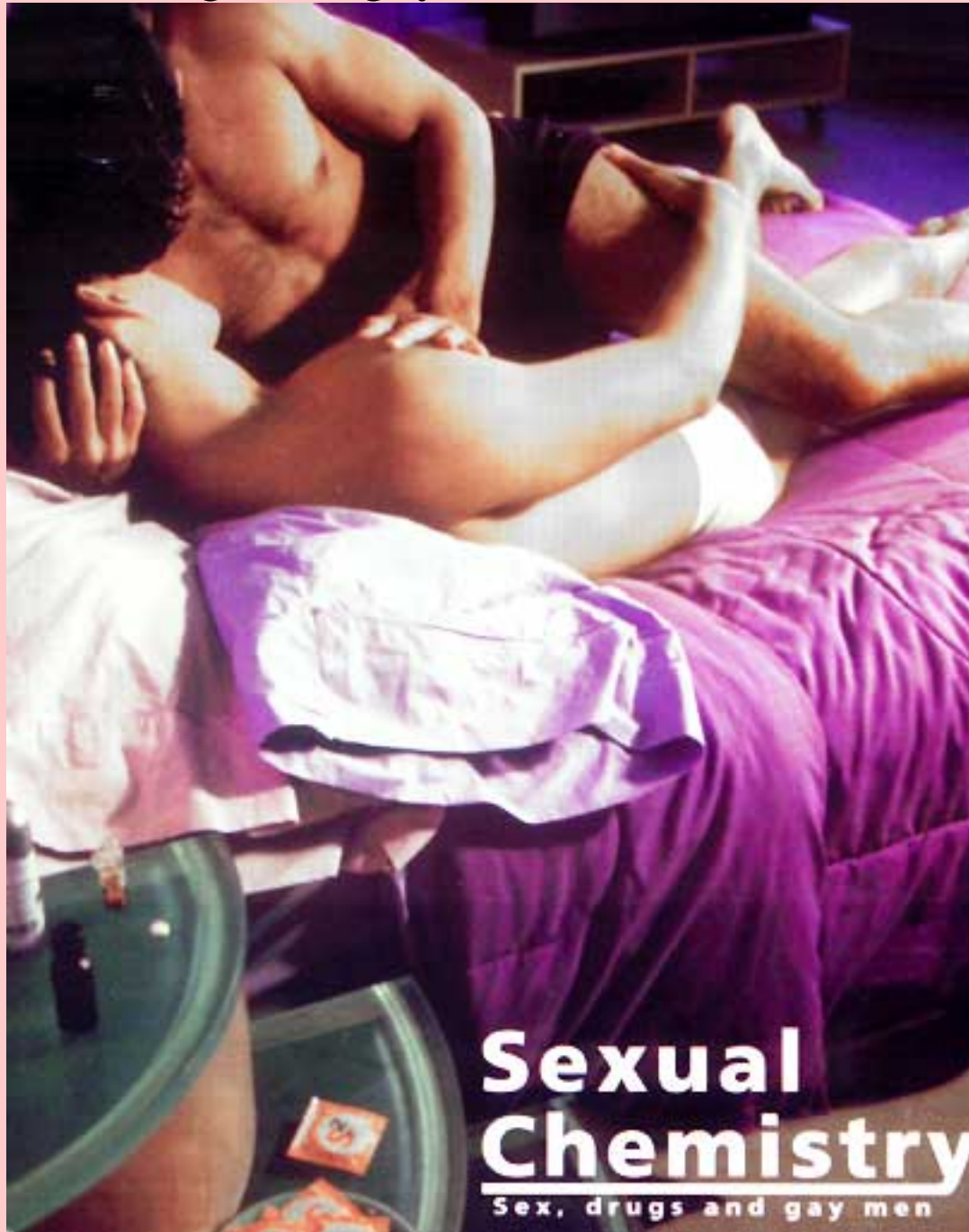


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Sexual Chemistry

Sex, drugs and gay men



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Introduction

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Sex, Drugs and Gay Men



'Sex' and 'drugs': the two words almost beg to be said together. Not surprisingly, perhaps, since for many gay men they are two parts of the same experience.

Whether it's a stiff drink to loosen you up and give you the courage to chat to the guy you've been cruising since you walked into the bar, a line of coke to make sex "as good as it gets", or a snort of poppers to send the blood rushing to where it's needed most, few of us can say we haven't mixed sex and drugs or alcohol at some point.

What this booklet attempts to do is to have a full and frank discussion about the often complex and varied relationships between drugs, sex, and sexual health for gay men, and address some of the more often raised issues. It's non-judgmental and realistic about drug use and risk-taking in the gay community.

It consists of five sections, the first of which is an overview of the subject, discussing the

different experiences that gay men have with sex and drugs. Sections two to four contain information about the risks and potential problems associated with sex and drug use. The final section, five, lists services where you can get more information and advice.

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1

Drugs and sex: a cocktail mixed in heaven?

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The ties that bind us: a social context

Drugs form a major part of the social gay scene. If you're a gay man in a town or city the chances are your main point of contact with other gay men is through bars and clubs which serve two legal drugs: alcohol and tobacco. Those who use clubs will also find themselves in contact with party drugs such as ecstasy, cocaine, crystal, ketamine (special K), and GHB. Use a gym and you can add contact with steroids to that list. And, since most scene users will access the scene most of their adult lives, contact with drug use or drug users is more or less continuous. Even if you yourself are not a regular scene user you're likely to come into contact with a gay man who is and uses drugs. Combine these facts and it is easy to see why gay men tend to have much longer and more experimental 'drug careers' than many straight men and women.

So how does this relate to sex and drugs? Well, the venues in which people take drugs are often the places where we find sexual partners (and sometimes where we actually have sex). All the drugs listed above, and more besides, can play a part in our identity and sex lives.

Understanding sex and drugs



Where we've been ...

The role of drugs in sex is by no means a new phenomenon, nor a peculiarly gay one either. Humans have sought to alter their perception of reality since the dawn of time, to escape normality and experience new feelings at new heights. We do this in all manner of ways, one of which is by taking mood-altering substances. People have been taking drugs to enhance sexual pleasure for a very long time.

Up until about 1980 the major risk to gay men taking drugs and having sex was the risk from the drugs themselves: excessive use of drugs and alcohol can and does have serious physical and psychological consequences.

Sex, drugs, HIV and AIDS

What has changed for gay men in the past two decades is the emergence of the AIDS virus, HIV, which is passed on mainly through unprotected fucking.

A number of false assumptions have been made along the way. Because many gay men who contracted HIV through anal sex also happened to use poppers (alkyl nitrites), poppers were thought to be responsible, causing immune system suppression and irreparable damage. It has also been suggested that the use of poppers for sexual pleasure typified the hedonism which was surely to blame for HIV and AIDS.

Both of these views are, of course, quite misguided. Those who believed them failed to take into account that just because two behaviors happen side-by-side, one doesn't necessarily cause the other. To even begin to understand the relationship between sex and drugs, we must first understand a subtle, but crucial, distinction between 'cause' and 'association'.

So, for example, poppers are associated with sex for very many people. But, as we now know, they don't cause the transmission of HIV. No more so than they cause everyone who uses them to behave with wild and reckless sexual abandon. Humans just don't behave in such uniformly predictable ways.

Where we are now.

Research has repeatedly attempted to explain the nature of the relationship between sex and drugs: do drugs (including alcohol) cause sexual risk-taking? Do they lower the immune system and make transmission of STDs (sexually transmitted disease) more likely? Do they make using condoms more difficult? Do drugs like cocaine always make you horny? Does alcohol always make it more difficult to 'get hard'?

There have been many questions and few conclusive answers

What we can say with a degree of certainty is that many gay men use drugs as part of their sexual experiences. Crucially, though, there is no predictable outcome when mixing a 'sex and drugs' cocktail.

- ❑ some do so without running into problems, being able to negotiate safer sex and use condoms perfectly well, no matter how intoxicated they feel.
- ❑ others report that they find safer sex and using condoms more difficult when they're intoxicated, exposing them to a risk they might not otherwise have taken.

✘ many people use drugs to get something more out of sex. Sometimes people want to fuck without condoms and will use drugs to make them feel more comfortable about it, mentally and physically. In such cases, drugs haven't caused unsafe sex but have been used in a predetermined, if potentially risky, way.

✘ the same drug can give different people different effects. Some find cocaine makes them want sex, others that it reduces their desire, and others that it increases their desire but reduces their ability.

Where we're going...

Clearly sex and drugs have a complex relationship. No single, simplistic explanation is adequate. To suggest that drugs cause unsafe sex ignores the varied experiences (unsafe, safe, and safer) which gay men have with sex and drugs. It also fails to take account of the enhancing effect that many people cite as their motivation for taking drugs for sex.

If you continually tell people that when they take drugs they'll have unsafe sex, there may be a danger that you make it a reality. What's the point in anyone ever trying to have safer sex on drugs if you're told at the outset that the chances are you won't?!

Drug and alcohol use, particularly in excess, carries with it inherent risks. But it does not lead necessarily to unsafe sex. It's not taking drugs that poses the risk in terms of getting and passing on HIV and other STDS, it's how you have sex when you take drugs that's the risk. Keeping sex as safe as possible is crucial. Blaming drugs misses the point and it also risks overlooking ways that we can make things safer.

The threat of HIV is as real as we enter the millennium as it was 15 years ago. Treatment advances help people live longer but they do not cure HIV and there is no vaccine yet. Also, HIV is not the only risk associated with sex and drug use. Section 2 details a range of other potential risks that you should know about.

In practical terms none of this means we have to lead lives of abstinence and denial. it does mean, though, that we should equip ourselves with as much information as we can find and, if necessary, take some steps to reduce the risks to our and others' health.



Sections 2 - 4 of this booklet examine some of the ways we can help ourselves to stay safer when using drugs for sex.

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Drugs and sexual health: factors to consider

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This section is divided into two parts. The first discusses the effect that drugs might have on your sexual health in a broader sense than just HIV and also looks at ways that you might protect your sexual health.

The second part is an easy reference table listing commonly used drugs down one side and the range of effects these drugs might have on your sexual health on the other.

Slipping and sliding: back to basics

OK, you've had a great night. For once the drugs worked perfectly, the DJ played his heart out and you're on cloud nine. Only one thing could make you even happier: great sex.

Sex without condoms is a risk in terms of passing on or getting HIV and other STDS. If you're not 100% sure about your partner's HIV status the safest sex involves using extra-strong condoms and water-based lubricant.

Even if you're both HIV positive you can still get and pass on HIV. Re-infection, with potentially different strains of HIV, might make staying well more difficult and reduce your treatment options. Again, condoms and lube are the best protection if you're fucking.

Now, if you've been taking drugs like ecstasy, crystal, coke, or alcohol, and have been dancing all night in a sweaty club, chances are you'll be dehydrated, even if you're a sensible clubber and have been drinking water throughout.



This dehydration dries up the natural lubricant up your ass. Not only that, but because your body temperature is raised the tissue on your cock and up your ass is potentially more delicate. Both of these physical changes to your body might make tearing, cuts, and abrasions more likely, providing a route for passing on or getting an STD, including HIV.

More information:

Getting It On is a comprehensive and easy-to-use guide to successful condom use. **Thinking It Through** is a guide for gay men in relationships who wish to give up using condoms (see Section 5 for the web site to access these booklets).

Sex, drugs and urban myths

Some drugs get a 'name' as being particularly good for sex, e.g. cocaine and crystal. The difficulty with this idea is that drug experiences are highly subjective, particularly when it comes to the short-acting, mood-altering drugs like cocaine, ecstasy, and ketamine. How you feel on such drugs will depend very much on how much you take, how you were feeling when you took it, where you are, who you're with, even why you've taken it. Just as many people say that cocaine makes them horny as say that it puts them off sex entirely. While many find poppers enhances their hard-on and orgasm, just as many report that all they get is a thumping headache. The effect of a drug will always amount to more than its chemical make up.



During sex

Aside from the obvious risk of losing your balance in the heat of passion and falling off the kitchen table, there are a number of physical and psychological factors to consider when having sex on drugs.

The pain barrier

Most drugs alter our perception of pain and discomfort, either because they have direct analgesic (pain-killing) properties or because they stimulate the release of hormones like dopamine and adrenaline in the body which act to subdue pain.

Either way, the result is a loss of sensitivity. Of course for some this is the hope: more comfortable or longer-lasting sex, since loss of sensitivity can delay orgasm (or even prevent it entirely).

What you need to be mindful of, though, is that loss of sensitivity might mean that you are doing damage to yourself and/or others that you don't realize or intend.

If you're fucking you might bruise yourself or your partner. There are some cases of internal tearing and bleeding and even people 'breaking' their cocks while fucking too hard.

So, if you're both on drugs it's up to you both to keep this in mind and check out with one another that neither is getting hurt.

Oral health

There are two possible issues here. The first is linked to how you take your drugs. If you 'dab' them onto

or under your tongue you should be aware that many drugs can cause tiny your mouth. If you rub your drugs onto your gums, this can make them swell and bleed. Taking drugs like this could increase the risk that HIV and other STDs could be passed during oral sex.

The second issue is to do with the effect of some drugs, namely chewing. Stimulants like ecstasy, crystal, and coke tend to make people clench their jaws and want to chew something, such as gum. In so doing, it's possible to bite the delicate skin in your mouth, without realizing (see [The pain barrier](#) above), causing cuts and grazes in your mouth. Again this could increase the risk from HIV and other STDs during oral sex.

It should be emphasized that these risks are potential. There is no way to assess the increased risk from HIV, if any, caused by cuts in the mouth.

To help protect against HIV and other STDs, it seems common sense to avoid having unprotected oral sex within, say, an hour of having taken drugs by dabbing or rubbing them in your mouth or from when you last chewed gum. This will give any cuts and grazes a chance to heal. If you can't wait that long a condom or dental dam might be a safer way to give head. Failing that, not getting cum in your mouth will reduce the risk too.

Sense of time

Most drugs alter our perception of time. Suddenly you realize you've been doing the same thing for an hour and, boy, your hips are stiff! It seems obvious to say but the longer you fuck, the greater the opportunity for doing damage and passing on or getting HIV and other STDs. If you're using condoms and lube be aware that they may be likely to wear out before you do. Check the condom regularly to make sure it hasn't torn or come off. For vigorous fucking this is particularly important. When you withdraw to change positions you can use this opportunity to check the condom and, if you need to, rubber up with a new one. And, remember, water-based lube is essential. It protects the condom and makes fucking more comfortable for you and your partner.

Concentration

Drug use also tends to bring with it variable concentration. One minute sex is the only thing on your mind, the next you're back on the dance floor, thinking about work or whatever. Keeping your mind on the job can be a trial and frustrating for all concerned. Getting and keeping a hard-on can be made much more difficult while under the influence. Be realistic about how good sex really can be on drugs. Generally the more of a drug you take, or the more drugs you mix, the less likely you will be to hold it together for good sex. The best laid plans are often laid to waste by too many drugs, or drugs of the wrong kind. In particular, ecstasy, ketamine, crystal, LSD/trips, pot, and alcohol are all widely reported to impair sexual ability. Of course, not everyone will experience the same problems, nor all the time, but it pays to bear these in mind.

In the longer term

The effect of drugs on sex is by no means limited to what happens while you're getting it on. Over the longer term, repeated drug use can have an impact on your sexual appetite and your ability to have sex, even if you desire it.

Libido and sexual dysfunction

Almost all drugs, used regularly, can cause a number of potential problems linked to sexual desire (libido) and ability.

For some people the association between sex and drugs becomes so strong that they feel unable to have sex when they've not taken drugs. If the association is particularly strong even thinking about sex is governed by whether there is an opportunity to take drugs.



Some drugs, such as certain anabolic steroids, can alter the hormonal balance in your body, leaving you with lower levels of naturally occurring testosterone. Though the link between testosterone levels and libido and impotence is not fully understood, many long term steroid users report a loss of sexual appetite and an inability to maintain a hard-on or to achieve orgasm.

When drug use becomes a focal part of someone's life it can lead to lifestyle 're-prioritizing' which might mean losing out on activities that you have otherwise enjoyed, such as sex. Many long term, problematic drug users lose any interest in sex for many years at a time.

Finally, even recreational users may feel 'off sex' due to drug use. After the highs of a weekend clubbing and taking drugs many people feel distracted, listless, and depressed during the mid-week blues. Sex isn't always top of the list under these conditions.

Drugs and fertility

There are two ways in which drug use can affect your fertility. One is the direct action of the drug, as is the case with anabolic steroids. Taken over a long period anabolic steroids might reduce your sperm count resulting in a loss of fertility which will, with a break from steroids, recover.

Fertility is also affected by other lifestyle factors such as your nutritional state and levels of exercise. For example, a weekend's serious clubbing, little rest, excessive sweating, and prolonged dancing in a hot environment might mean loss of appetite for several days. In the short term your fertility may suffer as a result. Smoking and drinking affect the nutritional balance of your body which may have an effect on your fertility.

The ill effects attributed to any given drug often have much more to do with the lifestyle that goes hand-in-hand with drug use. Giving your body a break will benefit more than just your testicles!

If you are considering having children, or donating sperm to someone who is, it would be worth talking to a fertility doctor about your lifestyle to see if there are short term changes you might need to make.

Sex, Viagra and other drugs

Viagra (or sildenafil) is considered by many as a breakthrough in the treatment of impotence (the inability to get or keep a hard-on). It works by opening blood vessels allowing greater blood flow to your cock.

Some people without a diagnosed clinical need (impotence) have started to use Viagra in the belief that it

will enhance sex. In short, it's become a recreational drug. A word of caution is needed here. As with any new drug the side effects are still not fully understood. It is safest to take Viagra only under the medical supervision of someone who can make sure the dose is correct, that it won't interact with any other medications, and that there will be no bad side effects.

What are the side effects?

If blood pressure drops too far, breathing can become difficult. This may result in feeling faint, black-outs, unconsciousness, and coma. Other, less serious side effects include headaches, facial flushing and redness, and sight problems. There is also the possibility of getting a prolonged and painful erection (called priapism) which may need surgery to correct.

Safer Viagra use



Less really is more. There's a very fine line between an optimum dose (getting you a nice hard-on) and an overdose (getting you priapism, dizziness, shortness of breath, chest pains, to the emergency room). Take the smallest dose possible. Half a 50mg tablet should suffice (but see advice below on drug interactions). It takes about an hour to work, taken orally so be patient and don't be tempted to take more before the first dose has had a chance to work.

As a drug which is thought to place a great strain on your heart you should avoid mixing it with others that do the same: stimulants like cocaine, crystal, ecstasy, and poppers. People with pre-existing heart complaints should obviously avoid taking Viagra without medical supervision, as should people on HIV treatments such as protease inhibitors.

Viagra and HIV drugs

Viagra is thought to interact with a number of drugs, both as they pass through the liver and as their effects are experienced.

Some drugs used in the treatment of HIV and related infections inhibit liver enzymes which are needed to breakdown other drugs in the blood. These enzyme inhibitors, in particular the protease inhibitors ritonavir, indinavir, and nelfinavir, anti-fungal medicines like itraconazole and ketoconazole, and the antibiotic erythromycin all potentially slow the action of an enzyme needed to clear Viagra from the body: P450 3A4. The result is a potential build up of Viagra in the blood which may increase the side effects to dangerous levels.

Further information on HIV drugs and their interaction with a range of drugs can be found in the handbook **Positive About Drugs** (see [Section 5](#) for the web site to access this booklet).

Viagra and poppers

Viagra is also likely to interact with poppers (alkyl nitrites). Both drugs have a similar effect, opening blood vessels and allowing greater blood flow. At the same time, blood pressure falls. Together blood pressure may fall too far.

Reducing the chances of drug interactions

In the absence of hard facts it is better to err on the side of caution until more is known. To be safe, this means not using poppers and Viagra together at all. In terms of enzyme-inhibiting drugs and Viagra, it is safer not to use these at the same time unless under medical supervision. If, knowing the risks, you nevertheless want to use Viagra with any of the drugs listed above, it is probably safer to start off with 1/4 of the dose suggested on the packaging. The drug takes about an hour to work so you need to be patient when waiting for its effects. Don't be tempted to take more before you've given it a chance to work.

Drugs and other STDs

If you get a STD the chances are you will visit a public health clinic or your doctor. Once it's been diagnosed by the doctor you might be given a course of medication or receive treatment there and then. Tobacco and alcohol might impact on your ability to get rid of these infections so it's worth knowing about the following things:

Tobacco and genital warts

Studies into the effect of tobacco use on people with genital warts suggest that you're more likely to get them if you're a regular smoker and you might find it more difficult to get rid of warts once you have them. This could be because smoking depletes body levels of beta-carotene and vitamin C, both important to the maintenance of healthy skin. There seems to be some anecdotal support for this idea. Smokers unable to get rid of genital warts report being able to do so after stopping smoking.

The answer might be to lay off the cigarettes for a few weeks while you get your sexual health back on track. Ask a staff member at a public health clinic or your doctor for the latest information about this.

Alcohol and antibiotics

An antibiotic prescribed for some STDS, called metronidazole, will interact badly with alcohol, resulting in stomach pains, nausea, and vomiting. If you are prescribed metronidazole you should abstain from alcohol while taking the tablets and for 48 hours after you have finished it, to allow the drug levels in your body to fall.

It's OK to drink alcohol (in moderation, of course) with other antibiotics. Alcohol is not thought to reduce the effectiveness of other antibiotics, nor will it interact with them in the same way that it will with metronidazole.

Drugs and HIV

There isn't adequate space to deal with the many issues that gay men with HIV might face when taking recreational or 'illicit' drugs. A publication called **Positive About Drugs** covers this area in great detail (see [Section 5](#) for the website to access this booklet).

Table showing popular drugs and how they can relate to sexual health

Drug	Dehydrates	Makes skin more likely to tear	Numbs pain	Disorientating	Sedative	Decreases sexual desire	Increases sexual appetite	Increases sexual energy	Makes sex more comfortable	Impairs hard-on	Interacts with other drugs
Alcohol	●	●	●	●	●	●	●	●	●	●	●
Amphetamines/Crystal	●	●	●	●		●	●	●	●	●	●
Anti-depressants			●	●	●	●	●			●	●
Cannabis/Pot			●	●	●	●	●		●	●	
Cocaine/Crack			●	●		●	●	●	●	●	●
Ecstasy	●	●	●	●		●	●	●	●	●	●
GHB			●	●	●	●	●	●	●		●
Heroin			●	●	●	●	●		●	●	●
Ketamine			●	●	●	●	●	●	●	●	●
LSD			●	●		●	●			●	
Poppers			●	●		●	●	●			●
Tranquillizers			●	●	●	●	●		●	●	●

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3

Drugs and sexual behavior: common issues explored

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Over the past few months I've had unsafe sex on drugs. I'm scared that it's the ecstasy that makes me have unsafe sex.

Some people undoubtedly do find having safer sex more difficult when they're affected by drugs and alcohol. That's a long way, though, from saying that drugs cause unsafe sex. During a midweek come down the realization that you've had sex that may have put yourself or someone else

at risk can be daunting.

It's only human to look for reasons for our behavior and often it's easier to cope with if something else can be blamed. Being affected by drugs is an important factor. It's so much easier to throw caution to the wind when your mind's a little confused.

Ask yourself: are there any things I can do to help me to have safer sex next time I take drugs? It's important to break the predictability so that you don't convince yourself that you're incapable of having safer sex while on drugs. Many people are able and so are you.

[Section 4](#) might be a good starting point. Also, it might be worth exploring this with a trusted friend or a local educational or health services organization ([see Section 5](#)).

Even when I'm trashed on K (ketamine) I feel sure I'll use condoms. But when it comes to it, I've

forgotten.

Because ketamine often disorients its users, remembering your name can be tricky sometimes, let alone condoms and safer sex! Seriously, though, many people find this a problem and, alas, there's no easy solution.

The best way to get around it is by thinking of ways to obviously remind yourself to use condoms. For example, if you usually bring your man back to your place, put your condoms and lube out on the bedside table before you go out. Not subtle exactly, but some people find it to be the only way.

One other suggestion is a memory trick which is hard to describe because different tricks work for different people. As an example, a ketamine user helped himself to remember to use condoms at the crucial moment by focusing on the initial sound 'k', which is the same for condom as it is for ketamine. It worked for him. Perhaps what it demonstrates best is the need to look for a solution to drug-induced forgetfulness which works for you!

On ecstasy I feel so close to my boyfriend. And yet I want to be closer still. Letting him fuck me without condoms is the best feeling in the world.

The feelings of empathy and closeness that people have when they've taken ecstasy can be very powerful. Many people feel that unprotected fucking is also a demonstration of closeness: the feeling of 'skin-on-skin' or cumming inside someone. Feeling an increased desire to have unprotected sex while on drugs is quite normal, though there are some considerations you should make before fucking without condoms.

Unless you are sure of your own and his HIV status, fucking without condoms significantly increases the risk of getting or passing on HIV. While using condoms is the some people may wish to have sex without the time.

If this is you and your partner(s), there are ways of eliminating as many risks as possible. Talking to your doctor or local health services organization and reviewing a copy of *Thinking It Through* are both essential first steps if you're thinking of giving up condoms ([see Section 5 for the web site to access this booklet](#)).

I've been with my partner for 3 years. Since he's been taking steroids he's not interested in sex with me. He assures me that he's not having sex with anyone else but it's so frustrating. We haven't had sex for months.

When one person in a relationship loses his sexual interest it can be a tremendous strain. It's quite normal for the other partner to take it personally and feel spurned even if the truth is that your partner has lost his sexual urges.

Long term use of many drugs does tend to make sex drive erratic and this is particularly the case with anabolic steroids (those used for bodybuilding). Though in short courses they tend to make you horny, long term use, without a break, can leave your body with low levels of testosterone (the male hormone).

The link between testosterone levels and sex drive is not fully understood but many steroid users report this side effect: they lose their sexual interest and/or ability altogether. It's not necessarily about you and your partner, nor his desire for you.

The only way for the body to recover its natural testosterone levels is for the user to have a break from using them.

Some doctors prescribe a short course of a drug called HCG which, when steroid use has stopped, helps to 'kick start' your body's natural production of testosterone. It might be worth your partner talking to his doctor about this.

This is often a very difficult subject for couples to talk about. Steroid users sometimes feel reluctant to tell their partners in advance about their use and likely effects, feeling that it will create some kind of self-fulfilling prophecy or that their partner will put pressure on them to stop using steroids at the first hint of sexual disinterest. There's no single solution to this and it often requires compromises on both sides. Talking it through with a professional, paid to listen and be impartial, might help ([see Section 5](#)).

Finally *In Gear: A Guide To Safer Steroid Use*, is essential reading for people who use steroids or if you want to understand more about their effects ([see Section 5 for the web site to access this booklet](#)).

Drugs don't make me fuck without condoms, they allow me to. It's what I want, so where's the harm?

Some people feel that rather than being victim to drugs, they use them in a deliberate way, as part of a sex and drugs 'total experience'.

Everyone has freedom of choice and some people choose to take drugs and have unprotected sex. Unprotected only becomes unsafe when you aren't sure about your or the other guy's HIV status or if you're both HIV positive. Then you may be gambling with each others' health and that's the harm.

Sex with condoms is the safest way to protect against HIV. If you want to fuck without condoms you should talk it through with your doctor or local educational or health services organization and review a copy of *Thinking It Through* ([see Section 5 for the web site to access this booklet](#)).

Last weekend I was out clubbing, completely off my head on drugs and alcohol. I remember going home with this guy but after asking him to fuck me I can't remember a thing.

This is a more common scenario than you might imagine. We tend to think of illicit drugs as being the dangerous ones in terms



of black-outs, but alcohol is such a commonly used drug that many people get themselves into potentially risky situations when they're very drunk.

Alcohol slows the central nervous system and, in excess, can make you sleepy, slowing your heart and breathing causing you to lose consciousness. Taken with other drugs which slow you down, like ketamine, Valium, Rohypnol, and temazepam, its sedative effect becomes even greater. Alcohol and GHB have been fatal, taken together. Avoid mixing them if you can.

Excessive drinking and mixing alcohol with other drugs might make it harder to negotiate getting the sex that you want. It's difficult to say "No!", insist on safer sex, or check that the guy who's fucking you is using a condom when you're drifting in and out of consciousness or are totally out for the count.

As a matter of personal safety, if you're planning to go home with someone and are the worse for wear on drugs and/or alcohol, you need to try to think the unthinkable: if things get rough, will I be together enough or able to defend myself and/or get away?" If you are unsure, is the risk really worth it?

The other key question to ask yourself is "If I do pass out, do I want to leave it up to him to be safe, use condoms, and to try to do something to me that I would be unable to object to?"

Alcohol and drugs are part of the social and sexual scene for a lot of gay men. Used sensibly they make an important social and sexual lubricant. But in excess things can go wrong. So it's important to remember: 'all things in moderation'.

Sex on drugs is the best! Just a bump of crystal and I feel so liberated, so energetic. It's like I can have sex with everyone in the room and still want more.

Crystal is a powerful stimulant drug which many users say gives them an unrivalled sense of sexual power, liberation, and energy. Its ability to disinhibit is great. This, coupled with the fact that compared to cocaine its effects are long lasting, has meant that crystal has become the 'binge' drug of choice for gay men in some US cities.

A recent study in Los Angeles suggested that two-thirds of men who reported fucking without condoms did so while high on crystal. Any drug which so readily enhances self-concept has the potential to make you feel invincible and this might mean that you take sexual risks, feeling 'unable' to catch anything. It is, of course, all in the mind. No drug prevents you from catching or passing on HIV.

Crystal is described as giving the ultimate high, but as we know, what goes up always has to come down. The highs are followed by the lowest lows with this drug. Something to bear in mind if you've got important plans for a day or two after.

Many people taking it for the first time say that they felt unpre-pared for the strength of the experience and that they were swept along in the rush. The key to having more control over your behavior while on drugs is often about being prepared for how you might feel and what you might do when you're high. Having condoms and lube on hand, wherever you're having sex, is a good idea.

One widely reported side effect of too much crystal, and other stimulants too, is that you may be unable to get hard, or only partly hard. Trying to keep a condom on a semi-hard cock is quite a skill. Some guys think it's easier than just to fuck without condoms. Don't be fooled for one minute that it's safe to go bareback. Just because you're semi-hard doesn't mean you won't suddenly cum inside him, or be able to

transmit HIV.

My new partner says he can only have sex when he's coked up.

There is a danger that if you use drugs for sex all the time you may find it more difficult to have sex without them. Sometimes people begin to believe that they won't be able to get a hard-on, have good sex, or cum without using a drug to help. In part this is because drugs like coke alter your perception of reality. While you're high things seem better than they are and, when you've come down, you begin to fear sex without the drug high and so crave the high the next time. It's all rather self-sustaining. The best way to avoid this scenario in the first place is to try not to use drugs every time you have sex, thus avoiding the potential for dependency.

If this scenario sounds familiar to you already and you feel that your drug use is governing your sex life, it would be a good idea to talk to a professional counselor or therapist who can help you to look at the issues and begin to address them.

Somehow you need to break the cycle of behavior which basically means having sex without drugs. Easier said than done for some, and you may well need to take some smaller steps before reaching the end goal. For example, if full anal sex seems like a tall order without a line of coke or a snort of poppers, are there other things you can do in bed with your man which you think are sexy but which you feel more comfortable about doing without drugs?

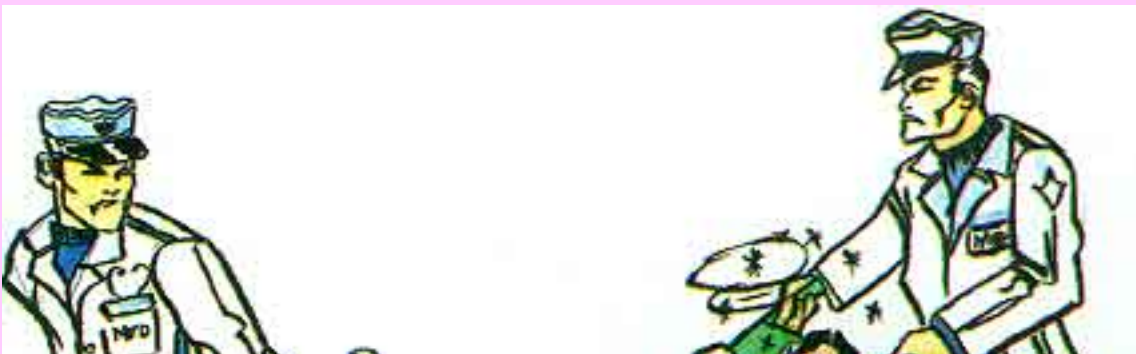
I've heard that sex on G (GHB) is fantastic. I want to try it, but what's the catch?

Some people take GHB solely to have sex in the belief that it enhances their sexual prowess. There are all manner of elaborate tales of great sex floating around the networks: 'G' orgies, 10 hour sex sessions, hard-ons that just won't go down, and so on ...

The first important thing to keep in mind is that such 'urban myths' are more than likely to be overblown. The second is that people have different experiences at different times and places, even when taking the same drug. This is because it matters not only what you're taking, but also how much, with whom you take it, where, why, when, how you're feeling, and so on. A drug experience is more than what's in the bottle, pill, or powder.

With GHB this seems particularly important. There are widely varying reports of its effects: anything from an ecstasy-like high to an alcohol-like stupor. This either suggests that what's sold as GHB is not always the same thing, or that as a drug its effects are to a large extent controlled by the factors listed above.

There's no guarantee of great sex on GHB for all people, all of the time. GHB is a drug that seems quite difficult to use safely.



There's a fine line between an optimum dose and an overdose. Use too much and you'll end up in a deep sleep or in a coma. Mix it with other drugs which slow the central nervous



system like alcohol, tranquilizers such as Valium, temazepam, and Rohypnol, and even some antihistamines, and the chances of coma, or even death, are increased

substantially.

It seems that, as with other drugs, moderation is a good way to reduce the risks. Don't assume that a bottle = a dose. Take a teaspoon or small capful to begin with and wait half an hour or so to gauge the strength and whether you like its effects. Being drowsy or drifting in and out of consciousness is not the strongest position from which to insist that he wears a condom. Nor is the object of your affections going to be impressed if you pass out on top of him.

After clubbing, even when I'm with the horniest guy in the world, I can't get hard. Viagra helps, doesn't it?

Boys do as boys will! Perhaps not surprisingly the frenzy which followed the release of the new anti-impotence drug Viagra (sildenafil) led many gay men, eager to reverse the wilting effects of hours of clubbing and drugging, to see Viagra as the cure all. What better than a night on E, coke, or whatever and then still having the ability to get it up?!

The difficulty in answering this question is that the evidence isn't always consistent and 'hard science' is difficult to establish with a new drug. It seems that almost each week we're given a new story on the possible side effects of Viagra.

The balance of scientific evidence suggests that Viagra will have no effect for people who do not have a clinical need (impotence) nor will it improve the quality of orgasm.

It is further suggested that people using it 'recreationally', without a clinical need, risk damaging the tissue which stiffens in their cock. This could lead to a permanent inability to get a hard-on at all in the future.

In contradiction to this, many men do use Viagra recreationally and widely report its ability to give them a hard-on. This might in part be because they believe that it will and so it does!

With opinion so divided, debating whether it does or doesn't enhance sex for people without a clinical problem seems like a side issue to the importance of being aware of the potential risks of using Viagra.

Taking Viagra alone carries inherent risks for people with heart problems. Even if you haven't got heart problems you may experience flushing, dizziness, visual disturbance, and headaches.

Mixing Viagra with other drugs raises the risks. Club drugs, the strenuous activity of dancing all night in a hot club, and not getting sleep all place a stress on your heart and will affect your blood pressure. Taking another drug which affects blood pressure might be a stress too far.

Both Viagra and poppers work in a similar way on the body, opening blood vessels and decreasing blood pressure. If they are used together there is a real danger of the vessels opening too far. One implication of this might be something called priapism: a prolonged and painful hard on, of at least 4 hours, that won't

go away and which might require surgery to correct. It is also believed that Viagra and poppers might lead to unconsciousness, coma, heart attacks, or a stroke in extreme cases.

If having taken Viagra, you get a hard-on that just won't go away there are some steps you can take which might help. First, try to cum again. If this fails, have a cold bath (no, really) and if that doesn't work, go for a brisk walk. All of these methods have proved helpful in getting rid of unwanted erections. If none of these work, a visit to the emergency room is the next stop.

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4

Keeping it safe: 10 points to consider

1

Condoms and lube are the safest way to ensure you don't pick up or give out more than you bargained for. Keep them somewhere easy to reach or visible, for the moments when you need them most.

2

Drugs like ketamine, cocaine, crystal, and ecstasy can alter your perception of reality considerably. How well do you negotiate getting the sex you want when you're on these drugs?

3

If you can't or won't use condoms, minimize the risks as far as you can. To do that you'll have to know about each person's HIV status. Ask. Can you be sure? Don't assume anything. If you're making assumptions, do you mind taking the risk?

4

How are you going to feel about sex when you're high or when you've come down? Chances are if you go into a drug experience thinking you'll have unsafe sex then you will.

5

Who are you going home with tonight? Think about how you are going to look after your personal, as well as sexual, safety if you're trashed?

6

Hot clubs and drugs dehydrate you. They make the need for water-based lube extra important. Sex will be more comfortable and, when used with condoms, will help prevent getting or passing on HIV and other STDS.

7

Viagra can be a fatal 'recreational drug'. In particular, avoid mixing it



with poppers and strong stimulants like ecstasy,



crystal, and cocaine.

8

All things in moderation. Taking most drugs, including alcohol, on a regular basis can have a profound impact on sexual function, making it very difficult to get and maintain an erection, or reach orgasm, whether you've recently taken the drug or not.

9

Many club drugs have a pain killing effect. This might mean that when you're fucking, you're doing damage that you're unaware of, or are being more sexually aggressive than usual.

10

Less is more. Drugs which enhance sensory experience like ecstasy, GHB, and ketamine tend to give more pleasurable effects at relatively low doses. Alcohol might loosen you up to get chatting, but too much will leave the spirit willing and the flesh weak.

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5 Further information and support

How you interpret the last four sections of information and whether you act on any of it is going to depend very much on how you assess the risks associated with your drug use and how drug use impacts on your sex life. You may decide, having read this booklet and discussed it with friends or your partner(s), that you have all the information and advice you need.

Alternatively, you may wish to talk to one of the agencies listed below. All these services are free and confidential. They're there to provide you with non-judgmental, practical advice, and support in order to help you make the best choices about your drug use: a personal strategy for safer drug use.

And that's really the key. Use the information to help you make decisions you feel comfortable about and with which you can live. There is little point in setting unrealistic goals; if you fail to meet them you'll only get down on yourself. So be honest with yourself.

Locally, in Florida

South Beach AIDS Project 306 Lincoln Road
Miami Beach, Florida (305) 532-1033 www.sobeaid.org

Florida HIV/AIDS Hotline

English: (800) 352-2437 Spanish: (800) 352-7432 Creole: (800) 243-7101

Agencies throughout the United States

AID Atlanta
(404) 872-0600 www.aidatlanta.org

AIDS Project Los Angeles (323) 993-1500 www.apia.org
Gay City, Seattle (206) 860-6969 www.gaycity.org

Gay Life, San Francisco AIDS Foundation
(415) 788-LIFE www.gaylife.org

Gay Men's Health Crisis New York City
(212) 367-1000 www.gmhc.org

National AIDS Hotline

English: **(800) 342-2437** Spanish: **(800) 344-7432**

National Institute on Drug Abuse

www.clubdrugs.com

Stop AIDS Project, San Francisco

(415) 575-0150 www.stopaids.org

International Agencies

Australia

Australian Federation of AIDS Organizations (2) 221 2955

Eire (AIDS Helpline, Dublin) (1) 872 4277

France (AIDS Ftdtration Nationale)

(1) 53 26 26 26

Germany (Deutsche AIDS-HILFE) (30) 69 00 87-42

Netherlands

Dutch HIV Association **(20) 685 0055**

Sad-Schorer

(20) 662 4206

United Kingdom

Terence Higgins Trust Helpline **0171 242 1010** www.tht.org.uk

National Drugs Helpline **0800 77 66 00**

National AIDS Helpline **0800 567 123**

National AIDS Helpline (Northern Ireland) **0800 137 437**

London Lesbian & Gay Switchboard **0171 837 7324**

Release (24hr drug information and legal helpline) **0171 603 8654**

other resources for gay men mentioned in this book:

Positive About Drugs

A comprehensive guide to safer drug use for gay men with HIV, including

information on the immune system and potential interactions between social drugs and HIV medications.

In Gear

All the information needed for gay men who use steroids for weight-training.

Clued Up

An essential reference guide on the ins and outs of popular drugs, including service listings.

Getting It On

Addresses the difficulties of using condoms successfully.

Thinking It Through

A new approach to sex, relationships and HIV for gay men.

All of the above booklets can be accessed at www.candihps.com/pinkpages.

other useful web sites

www.cluedup.demon.co.uk

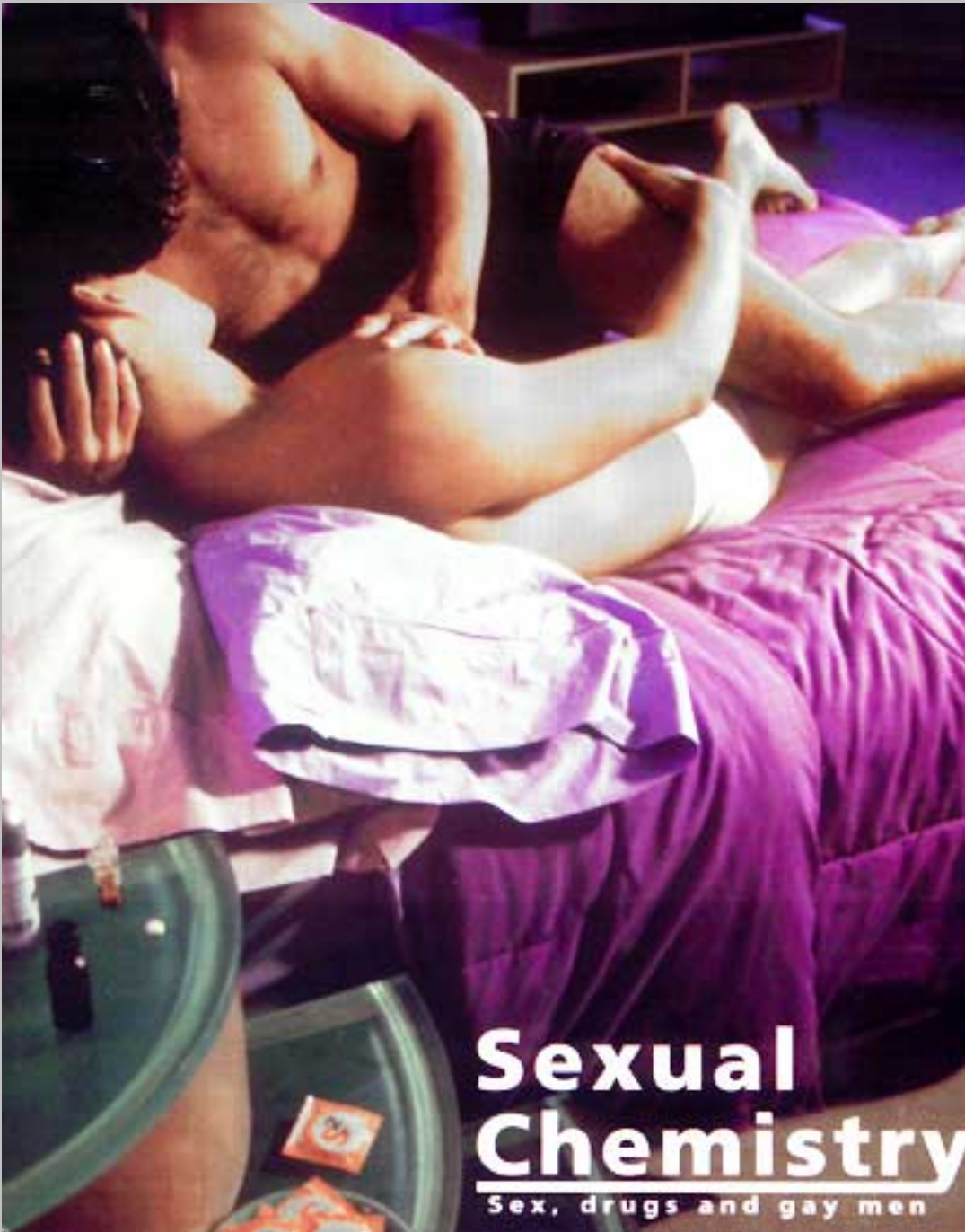
www.isdd.co.uk

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This version of *Sexual Chemistry* is dedicated to Ivan Bernstein,
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