



HIV & SYPHILIS GUIDANCE FOR TRANS MASC AND NON-BINARY PEOPLE



Welcome to this resource for all the information you need about HIV and syphilis transmission.

This resource has been made for trans men, trans masc or non-binary people to help protect ourselves and end HIV in our generation. **We will explore together what HIV and syphilis are exactly, the specific risks present to trans men and non-binary people and preventative measures that can be taken.**

Trans men/trans masc refers to people who are men or identify with masculinity, but were assigned female at birth (AFAB). This terminology is not representative of all identities.

Non-binary refers to people whose gender identity is not, or not exclusively, male or female. Some people may define themselves as genderfluid or genderqueer instead.

We would like to express our gratitude to the trans and non-binary communities for the support we have received to create this resource.

We remain committed to promoting equality and inclusivity in sexual health care and services, and we look forward to continuing our work to improve the lives of those we serve.

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FINDING YOUR COMFORT ZONE

Safer sex is an important part of maintaining sexual health for people of all genders and sexual orientations.

For trans and non-binary individuals, practising safer sex can be a way to empower yourself and help affirm your gender identity. The language used in this resource is just to illustrate information, but using your own preferred language around your body, gender identity and sexuality can create a more comfortable environment to have safer sex.



Setting boundaries that reflect your gender identity and what feels pleasurable is really important to having sex that makes you feel good.

Using condoms, dental dams, and latex gloves can also reduce the risk of sexually transmitted infections (STIs) while taking pre-exposure prophylaxis (PrEP) can prevent the transmission of HIV, *but we will talk more about what all of this means later!*

It's important to test regularly for STIs and HIV to stay informed about your sexual health status.

It's also important to note that pregnancy can sometimes occur, even when taking **hormone replacement therapy (HRT)** if sperm and a uterus are present.

In these cases, **condoms, copper IUDs, oestrogen-free mini pills, and emergency contraception** can all be **effective** forms of protection.



By taking these steps to protect yourself when having sexual contact, you can enjoy a fulfilling and healthy sex life that is affirming to your gender identity and expression.

THE HIV FACTS

Human Immunodeficiency Virus, or HIV, damages and weakens the immune system.

This means common infections and illnesses can be more severe for people living with HIV. There is no cure for HIV, but it is best to know if you have HIV so that you can get on treatment quickly and live a healthy life. **It's really important to test regularly as this is the only way to know your HIV status.**



If you do contract HIV and don't get tested and treated this may lead to more serious health problems later on, developing 'advanced' or 'late-stage' HIV infection (**sometimes called AIDS or Acquired Immune Deficiency Syndrome**).

This stage of infection can be fatal. In the UK, not many people are living with late-stage HIV infections as the virus can be suppressed through effective and consistent treatment.

The First Step to Prevention: WHY DOES HIV TESTING MATTER?

Well, it's simple. If you regularly test for HIV you can be given peace of mind with a negative result or, with a positive result, you can start effectively managing and treating your HIV, and live a long and healthy life.

Those who are newly diagnosed are quickly put on anti-retroviral therapy (ART) which are medications used to treat HIV.

ART stops the virus from replicating in your body, which keeps your immune system strong and able to fight off illness. If you are on effective treatment, and have an undetectable viral load, you cannot pass on HIV.

You might hear this fact called 'Undetectable = Untransmittable' or 'U=U'.

Chlamydia	2 Weeks
Gonorrhoea	2 Weeks
HIV (Lab Test)	45 Days
HIV (Instant Test)	12 Weeks
Syphilis	12 Weeks
Hepatitis B	12 Weeks
Hepatitis C	12 Weeks

Generally, most HIV tests have a 'window period' of 4-12 weeks (depending on test type).

A window period is how long after being exposed to HIV it could take to show on a test. **We recommend regular testing at least once a year or up to every 3 to 6 months** if you have unprotected sex or multiple sexual partners.

Most HIV tests are done by **taking a sample of blood** and can be done in a **sexual health clinic, community testing site** or by **self-sampling at home**.

If you need to talk to anyone about your individual risk factors as a member of the LGBTQ+ community, you can contact the Sexual Health Team at LGBT Foundation to discuss a testing plan that works for you.

THE HIV SYMPTOMS

The symptoms of HIV are generally the same for transgender and non-binary individuals as they are for cisgender people. **A lot of people do not have any symptoms when they first contract HIV.**

Other people may develop symptoms roughly 2-6 weeks after contracting HIV. These include:

- Flu-like illness, like fever, aches and chills
- Aching muscles/joints
- Rashes
- Night sweats
- Swollen glands
- Sore throat



As you can see, these symptoms are fairly common and could easily be mistaken for other illnesses. Many people will not experience any HIV symptoms for a very long time, years in some cases. **This means the only way to actually know if you have got HIV is to take a test.**

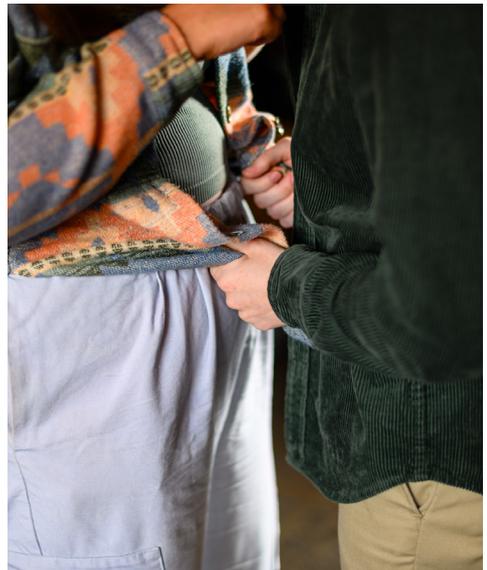
Blood, Sweat and Tears (and Other Bodily Fluids)

Over the years there has been misinformation about HIV, so it's always good to remind yourself of what is fact and what is fiction!

HIV transmission can only be achieved through contact with the following bodily fluids from an individual who is living with HIV and has a detectable viral load:

- Anal mucus
- Blood
- Semen
- Precum
- Vaginal fluid

Things like spit, sweat and wee do not cause transmission of HIV as they do not contain enough of the virus. Also, HIV can't survive for more than a few minutes outside of the body. As a result, HIV cannot be transmitted through physical contact like shaking hands, hugging or using the same toilet.



HIV can be transmitted by:



Sharing needles



Unprotected sex



At birth



Blood transfusion

HIV can't be transmitted by:



Hugging/touching



Kissing



Food/drink



Insect bites

HIV needs 'prolonged' exposure and contact with someone living with HIV for transmission to occur. Here is how HIV can enter the body:

- Directly entering the bloodstream which can be done through damaged skin, infected injecting equipment etc.
- Being absorbed via mucous membranes found in the head and foreskin of the penis, the arse and the throat.
- Through front hole/vaginal and/or anal sex with someone who is infected with HIV. If you have unprotected sex, this also increases the risk of HIV and STI transmission.
- From a parent living with HIV.

Remember, condoms are the most effective way of preventing the transmission of HIV. However, advancements in protective HIV medications (PEP and PrEP) are having a significant impact on lowering new transmissions of HIV.

Risky Business: Contributing Factors of HIV Transmission

Other factors can contribute to higher risks of HIV transmission that do not directly relate to sex.

Having STIs can increase your susceptibility to HIV infections including:

- Causing ulcers or spots that can provide an easier entry point for HIV into the system.
- Causing inflammations, which increases the presence of HIV in these areas for people living with HIV.
- Weaken the immune system, meaning that a HIV infection could be more likely.
- Having an STI whilst also living with HIV can also increase the overall viral load.
- The first three months after getting HIV, people will have a higher viral load than at any other time



Behavioural (lifestyle) factors can contribute to the risks of getting HIV. The factors discussed below are not sweeping generalisations of any LGB+ people or trans and non-binary communities.

Behaviours that can increase the likelihood of HIV transmission include:

- Using recreational drugs, alcohol, or psychoactive substances means that people can take risks when it comes to their sexual health.
- Rougher sex sessions can increase the likelihood of HIV entering the bloodstream.
- People who engage in chemsex (using drugs to facilitate sex) can get a transmission through unprotected sex or sharing needles with multiple partners.
- Sexual activities like fisting can lead to cuts and tears within the lining of the arse. Use gloves and water-based lube for protection.
- If someone who is living with HIV uses a needle for injecting purposes it's best to avoid sharing needles and syringes to avoid transmission.
- Sharing sex toys that haven't been used with a condom or cleaned thoroughly in-between usage.
- Condomless / unprotected sex increases the risk of HIV transmission

THE 'TRANS'

in Transmission Risks

So, what are the trans masc-specific risks and concerns around contracting HIV?

What we know from research on trans MSM (men who have sex with men), there can be an increased risk of HIV exposure due to inconsistent condom use and low rates of HIV testing.

Individual factors, such as receptive anal sex (bottoming) do play a larger role in a person's HIV transmission risks than just being a member of trans communities. Unfortunately, most research focuses on trans women, so there is limited data on the full scope of trans masc experiences with HIV transmission, treatment, and risks. From what we know so far from research into the relationship between HIV and trans masc and non-binary people who decide to transition medically, certain factors can increase susceptibility to HIV.

Current findings suggest that HIV risks are increased by taking testosterone (T), as it can cause thinning, dryness and inflammation of the vagina/front hole. T can increase sex drives, which may mean you are sleeping with more partners than previously, which generally increases the risk of HIV.

This means it's really important to consider using condoms or medication like PrEP (more on that later) to help prevent HIV transmissions and use PEP if you think you may have been exposed to HIV.

Sharing needles for hormones or soft tissue fillers can increase the risk of acquiring HIV if you are sharing with someone who is living with HIV and is infectious.

Initial research into the different surgical techniques for bottom surgery may also increase HIV acquisition. It's important to discuss these individual risk factors and concerns if you are medically transitioning with a healthcare professional if possible.

However, due to transphobia accessing healthcare may not always be possible. You can always get support from organisations like LGBT Foundation which can provide a range of services and resources for people who face challenges related to gender identity and sexual health.



Beyond the Clinic: Social HIV Risk Factors

Historically, trans and non-binary people are more likely than their cis peers to engage in sex work, which may expose community members to increased risks.

This includes things like **issues with using condoms** and a **significant increase in contracting STIs**.

Condomless sex added to a **weakened immune system** caused by STIs can make you **more at risk** of getting HIV. Whilst we advocate for your own rules for your body, we advise working in a safe way to protect yourself.

You can get more information by talking to a member of staff at LGBT Foundation or other organisations like MASH and Men's Room.

Unfortunately due to social stigma, oppression, and violence, trans and non-binary people are more likely to experience **depression, anxiety, suicidal thoughts and substance misuse**.

These psychological issues can affect your relationships with others, meaning you **may take more risks in sex and relationships** for affirmation and validation. Social stigma around HIV in general also contributes to some people avoiding testing, for fear of being associated with HIV or believing it can't affect them, a stigma that is compounded for trans and non-binary communities.

As trans and non-binary people, these problems become magnified due to a lack of gender affirmation for trans men, trans masc and non-binary people.

Trans and non-binary people are less likely to engage in services, including HIV treatment and prevention, if the healthcare service does not recognise their gender identity in a meaningful way.

Essentially, a lack of knowledge of the experiences of trans men, trans masc and non-binary communities from healthcare professionals leads to a barrier to seeking HIV care.

Trans and non-binary people with intersecting identities relating to disability, race, religion, immigration status, etc, may further be minoritised, and prevent them from accessing high-quality information about safer sex.

Trans people who have intersecting marginalised identities may find it harder to access support and information on HIV prevention and treatment.



INTERCEPTING INFECTIONS



Any person who tests positive for HIV can still live a healthy life and have fulfilling sex. However, there are several ways you can protect yourself from HIV infection.

Transgender people, particularly transgender women, are at a higher risk of acquiring HIV than the general population due to various factors such as stigma, discrimination, and lack of access to healthcare.

PrEP and PEP are two effective methods for reducing the risk of HIV transmission.

PEP in your Step

PEP stands for Post-Exposure Prophylaxis and is medication you can access if you think you have been exposed to HIV in the last 72 hours.

You can get PEP from A&E or by contacting your local sexual health clinic. PEP is not accessible from a GP or local community STI testing centres. Remember, PEP is more effective the sooner you take it so if, in doubt, it is better to be safer than sorry.

I want to access Post-Exposure Prophylaxis (PEP) because I may have been exposed to HIV. My exposure happened on _____ (date) at _____ (time). PEP is emergency medication and it is important that I am assessed today. PEP must be started within 72 hours of exposure and it will be more effective the sooner I take it.

The PaSH  Partnership

If you are nervous about accessing PEP, you can show a doctor or nurse at a healthcare centre this handy card on how to request PEP clearly.

Be PrEPared

You can also access PrEP (Pre-Exposure Prophylaxis), which you can take if you are not living with HIV. If you take PrEP, it will create a barrier in your immune system that is up to 99% effective in fighting off HIV.

There are two main ways you can take PrEP to build protection against HIV; daily or event-based.

Daily dosing is very simple. You take one pill a day and after seven days you will be better protected against HIV. You will continue to take one pill every 24 hours to remain protected.

Event-based, or on-demand dosing, requires you to pay a bit more attention to what times you take your medication and won't be effective for people having vaginal sex. Previous research has recommended that trans and non-binary people should stick to daily dosing if they are using hormone replacement therapy so that PrEP is the most effective.

If you do have a penis and engage in anal sex with other people with penises and you are not using hormone replacement therapy you can use on-demand PrEP dosing.

This works by:

1. Taking two pills 2 to 24 hours before you have sexual contact
2. 24 hours after taking the first two pills, you take one pill
3. 24 hours after that, you take another one pill
4. If you have sex again in between doses, you take one pill every 24 hours until you finish sex
5. You should be taking one pill 24 hours after you last had sex and another one 24 hours after that)

Whilst PrEP is an extremely effective and revolutionary tool to protect yourself from HIV, there are some side effects that you may experience. It is important to note that not everyone will experience side effects and most of them tend to go away after a few weeks or can be treated with over-the-counter medication.

Currently, PrEP is available at sexual health (GUM) clinics, but if you have any concerns or want to know more, you can contact our sexual health team at LGBT Foundation for more information.

Wrapping's not just for Christmas

We recommend using PrEP in combination with condoms to cover all your bases for HIV and STI transmission risks. Condoms are one of the most effective ways to protect you from infections.

You can always order condoms of different sizes and materials for free from LGBT Foundation lgbt.foundation/condoms/order

And remember; condoms aren't just for penises!

You can use condoms on sex toys as well, but make sure to always change condoms when using a new hole or with a new partner.



If you engage in fingering or fisting, you can use a glove to help reduce the chances of HIV and other STIs transmission.

The risk of HIV transmission through these acts is generally considered to be low, but it is not zero.

The presence of cuts, sores, or other breaks in the skin can provide an entry point for the virus to enter the bloodstream. It is also important to **communicate with sexual partners about HIV status and to get regular HIV and STI testing.**

UNDETECTABLE = UNTRANSMITTABLE

The testing, treatment and ways to live with HIV have changed radically over the past few years as developments in HIV medication have meant that people who are living with HIV can now reach 'undetectable' status.

'Undetectable = Untransmittable' (or U=U) is a campaign slogan used to promote the knowledge around HIV and that if someone's HIV viral load is undetectable, they cannot pass the virus on.

It is sometimes known as '**Treatment as Prevention**' or **TasP**, but this only prevents HIV infections and not STIs, so it is important to keep using condoms and test regularly for STIs.

The majority of people living with HIV will be able to achieve this status 6 months after they are diagnosed with HIV. Although being undetectable doesn't mean someone is cured of HIV, it does mean infections can't be passed onto people who aren't living with HIV even during condomless sex.



Gender-Affirming Safer Sex

Trans and non-binary individuals who decide to take PEP or PrEP for HIV prevention are generally at no greater risk of experiencing negative effects than cisgender people.

However, it's important to note that **some medications used for gender affirmation**, such as certain hormone blockers, can **affect your bone density**, and PrEP can also have an **impact** on bone density. Therefore, it's important to discuss these risks with a healthcare provider and have regular bone density monitoring.

Some trans and non-binary people may be taking hormone therapy (e.g., **testosterone or oestrogen**) or may undergo genital-affirming surgery, both of which can **affect the effectiveness of PrEP and PEP.**

Both PrEP and HRT can affect kidney function.

You should consult with a healthcare provider to determine if PrEP or PEP is appropriate and if any adjustments need to be made to hormone therapy.

Overall, the benefits of PrEP and PEP in preventing HIV infection outweigh the risks for most people.

If you are considering taking PrEP or PEP, it's **important to talk** about any concerns you may have and to work together with **healthcare providers to develop a plan that meets your unique needs.**

THE SYPHILIS FACTS

Trans and non-binary people are at an increased risk for syphilis, a sexually transmitted infection that can cause serious health complications if left untreated.

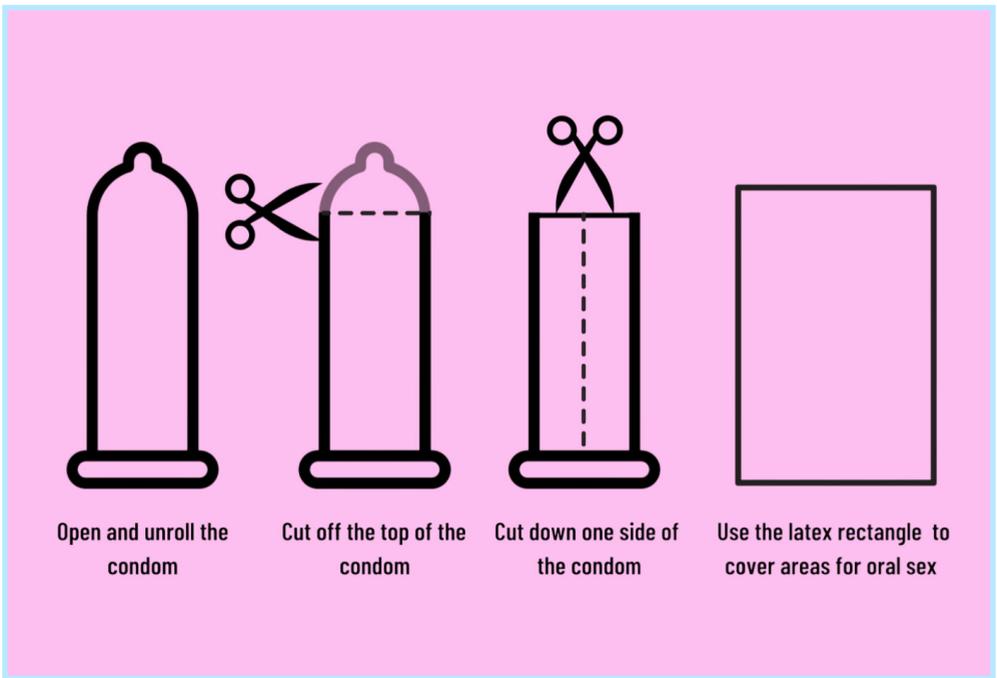
For trans and non-binary people who use hormone replacement therapy, there may be an effect on the immune system which increases the risk of both syphilis and HIV infections.

Trans and non-binary communities need to have access to culturally competent healthcare providers who can provide gender-affirming care and sexually transmitted infection testing and treatment services to reduce their risk of syphilis and other health complications.



Syphilis can be transmitted by direct skin-to-skin contact with a syphilitic sore, also known as a chancre, so it is possible to get syphilis through vaginal, anal or oral sex.

Condoms, dental dams and gloves can reduce risk, but if the chancre is not covered, then it is still possible for syphilis to be passed on.



THE SYPHILIS SYMPTOMS

The early symptoms, also known as 'primary syphilis', start to happen two to three weeks after infection.

The main symptom is a small, painless chancre which commonly appears:

- On the penis or vagina
- On or around the anus and buttocks
- In or around the mouth and lips
- On fingers

People typically only get one **chancre**, which can sometimes be hard to spot. These will **naturally heal in time**, but this does not mean that the infection has gone. Some people will also get **swollen glands**, which you can **feel in your neck, armpit and/or groin (crotch)**.

These symptoms can last about **two to eight weeks**, and if it is not treated, it can **progress to 'secondary syphilis'**.

The symptoms associated with secondary syphilis can go away over time and develop into 'latent syphilis'. **Latent syphilis can last for years but ultimately will lead to 'tertiary syphilis' if untreated.** This can have serious complications and can cause lasting damage.

Luckily, **syphilis is treatable at every stage**, so it is better to **test regularly and get treatment** if you do get a positive result.

Testing: A Ticket to a Peace of Mind

It is possible to get tested for syphilis at a sexual health (GUM) clinic or if you identify as part of the LGBTQ+ community, you can get tested at LGBT Foundation.

Syphilis can take 3 to 6 weeks from infection to show in tests, so if you think you have had a risk incident more recently than three weeks, it will not show up on the test results. If you do get a positive result, syphilis is really easy to treat and cure. In its earlier stage, it will involve an injection of penicillin in the bum or a 14-day course of antibiotics if you are allergic to penicillin.

For more information on when and where to get tested, visit [lgbt.foundation/testing](https://www.lgbt.foundation/testing)



Dangerous Duos: Syphilis and HIV

When a person has syphilis, the sores can provide an entry point for HIV to get into the body. This means that **if a person is exposed to HIV while they have syphilis, they are more likely to become infected with HIV.**

In addition, **if a person has both syphilis and HIV, their immune system may be weakened,** which can make it harder to fight off both infections. This can make syphilis more difficult to treat, and **increase the risk of serious complications** which can affect the brain and nervous system.

In some cases, the symptoms of syphilis may also be less obvious **in people who have HIV,** which can make it harder to diagnose and treat the infection. This means that **people living with HIV may need more frequent testing for syphilis and other sexually transmitted infections.**

It's important for people who are **at risk of HIV and syphilis to get tested regularly and to take steps to reduce their risk of infection.** This may include practising **safer sex** by using condoms, dental dams or fisting gloves, getting tested regularly, and seeking treatment if you test positive.



FINAL MESSAGE

HIV and syphilis are significant but manageable health concerns, and it is important to be knowledgeable about prevention, testing, and treatment.

While certain behaviours and risk factors may increase the likelihood of transmission, some steps can be taken to reduce the risk of infection, such as using condoms, getting regular testing, and taking PrEP.

The only way to know for sure whether you are living with HIV is to get tested.

By staying informed, taking preventative measures, and getting tested regularly, we can work towards a future where HIV is no longer a threat to the health and well-being of our communities.

Remember, testing is confidential and readily available at your local sexual health clinic, as well as free in-person or at-home testing available at LGBT Foundation.

USEFUL LINKS

Below you can find some helpful links to further information as well as LGBT Foundations Sexual Health Page to book a sexual health screening or speak to a member of the team:

LGBT Foundation is a national charity with LGBTQ+ health and wellbeing at the heart of everything we do. We celebrate and empower our diverse communities to realise their full potential, every day. We provide services and activities that give a lifeline for those in need, offering hope and support on their journey towards achieving their aspirations. Our vision is a world where queer liberation enables meaningful and lasting change and plays a vital part in a more equal and just society. Email: sexualhealth@lgbt.foundation
lgbt.foundation/sexualhealth

George House Trust is dedicated to offering HIV support, advice, and advocacy services. They have a skilled team of staff and volunteers, aiming to help people with HIV lead healthy, confident lives. Referrals can be made by clinic staff, professionals, or individuals themselves, either online or via phone or email. Their mission is to inspire those living with HIV to thrive without limitations in a world where HIV is no longer a barrier. Email: talk@ght.org.uk
ght.org.uk/

BHA For Equality (BHA) is a charity dedicated to addressing health and social care inequalities and improving the well-being of individuals, families, and communities. They provide various services related to HIV, sexual health, cancer, mental health, and more, working closely with communities to identify needs and barriers. BHA also assists statutory services and regulators in reaching marginalised communities and amplifying their voices in health and social care decisions.

Email: info@thebha.org.uk
thebha.org.uk/

NHS postcode checker for sexual health testing clinics: The NHS postcode checker can be used to find the closest sexual health service near you for support, advice and services.

www.nhs.uk/service-search/sexual-health

Terrence Higgins Trust is a charity that focuses on sexual health and HIV awareness, prevention, and support. They have dedicated content to transgender and non-binary sexual health information: www.tht.org.uk/hiv-and-sexual-health/sexual-health/trans-people

WE'RE HERE TO EMPOWER, ENCOURAGE AND CELEBRATE OUR WONDERFUL LGBTQ+ COMMUNITIES

DOWNLOAD A DIGITAL VERSION HERE:



BHA FOR EQUALITY

0330 128 1186

Free & confidential
health services for BAME
communities

GEORGE HOUSE TRUST

0161 274 4499

Free & confidential support,
advice services for people
living with HIV

LGBT FOUNDATION

0345 3 30 30 30

Providing advice and
support for LGBTQ+ people
around sexual wellbeing

The PaSH Partnership

Passionate about Sexual Health across Greater Manchester

