

Researchers develop new tool to predict who will use microbicides

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Using a new tool designed to measure a woman's willingness to use a microbicide (topical gels designed to prevent the sexual transmission of HIV), researchers at The Miriam Hospital and Brown University found that women who have used protective methods in the past, and those with casual sexual partners were more willing to use a microbicide compared to their peers.

Although a safe and effective microbicide has not been identified yet, several candidates are now undergoing clinical efficacy trials. The complete study is published in the November 2007 issue of *Healthy Psychology*.

"The results may seem to be an obvious finding, but they are important because science has very little direct evidence of what characteristics and situations in women's lives would make them more likely to want to use a microbicide to prevent HIV infection," says lead author Kathleen M. Morrow, Ph.D., a psychologist at The Miriam Hospital's Centers for Behavioral and Preventive Medicine and an assistant professor at The Warren Alpert Medical School at Brown University.

"An effective microbicide would have little impact on the rate of HIV transmission if it was unacceptable to women, i.e. – if it makes their sexual experiences less pleasurable, or gets in the way, women won't use it, no matter how effective it is" says Morrow.

In an attempt to understand the circumstances that compel women to



decide to protect themselves or not, Morrow and her team designed the "Willingness to Use Microbicides" scale. The scale consists of a series of questions about particular situations, e.g. – would you have wanted to use a microbicide the last time you had sex with your partner, as well as product-related questions, e.g. – if a microbicide costs about as much as a male condom, would you have used it?

The questionnaire was given to 531 women in Connecticut, Massachusetts, New York, and Rhode Island. Eligibility criteria required that the women be 18-55 years old, HIV-negative or of unknown HIV status, not pregnant, and having had sex with at least one male partner in the last year.

The researchers evaluated each participant's answers to the questions in relation to a number of variables including the participant's race/ethnicity, household income, number of partners, partner type, if the participant had lived with the partner in the past year, participant's perception of her partner's behaviors that put him at risk for HIV, frequency of condom use, and history of spermicide use.

The results suggested that women with a greater frequency of condom use, a history of spermicide use, and those with casual sexual partners (as opposed to main partners), had the highest predicted scores on the "willingness to use" scale.

"Our findings indicate that not only how much experience a woman has with prevention products can have predictive implications, but additionally – how a woman defines or labels her sexual partnership appears to have an impact on her decision-making process with regard to protecting herself from HIV and other sexually transmitted diseases (STDs)," says Morrow.

The authors note that there is often a perceived need for less protection



in an established relationship and a greater need for protection in more casual relationships. This is particularly important because, globally, the majority of women with HIV get it from their sole male sexual partner, typically their husband.

Morrow adds, "If a woman does not perceive the risk, she won't protect herself. Our results underlie the importance of educating all women, even those in committed relationships, about preventive measures they can take."

"Given the rise in the number of women becoming infected with HIV annually around the world and the limited ability of many women to insist upon condom use with their male sexual partners, the need for woman-initiated HIV prevention options is profound," says Kenneth Mayer, M.D., an infectious disease specialist at The Miriam Hospital and a professor at The Warren Alpert Medical School of Brown University who has led several clinical microbicide studies.

"The Willingness to Use Microbicides Scale serves as an important step toward understanding and measuring a woman's decision-making process for protection against STDs and HIV," Mayer adds.

The researchers explain that future research should allow for the further refinement of the scale including the exploration of additional variables and situations that could impact a woman's "willingness to use" score.

"In addition, the scale needs to be applied to a more diverse population of women, both within the United States and in other countries to determine if sociogeographic factors have an impact on a woman's willingness to use," adds Morrow.

The researchers are continuing to study women's opinions about vaginal products like microbicides, and are currently conducting a related study,



Project LINK. The study aims to investigate women's perceptions of how vaginal products feel in their bodies and what product developers can do to make HIV prevention products feel good so women would find them acceptable to use. If you are a woman, 18-45 years old, and would like additional information about Project LINK, call 1-888-355-LINK(5465).

Source: Lifespan

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