

# Cutting meth availability does not reduce sexually transmitted infections, says study

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Health officials often cite the ability to control illegal methamphetamine sales as a tool to reduce HIV and other sexually transmitted infections (STIs), but limiting the drug actually may increase such diseases among certain populations, says a new study from Ball State University.

"Crystal Clear? The Relationship between Methamphetamine Use and Sexually Transmitted Diseases" examined the casual relationship between [methamphetamine](#) use, [risky sexual behavior](#) and sexual transmitted infections.

Ball States Erik Nesson, an economics professor, and Huga Mialon, an economics professor at the University of Emory, found evidence that when methamphetamine was in short supply in California during the 1990s, there was no evidence of a drop in syphilis diagnoses. Also conducting research was Michael Samuel of the California Department of Public Health - STD Control Branch.

In additional analysis, they used state-level quarterly data on syphilis, gonorrhea and chlamydia diagnoses to find no evidence that the reduction in meth reduced diagnoses of STIs.

"Interestingly, we find some evidence—albeit evidence that is not strongly robust—that the reduction in meth in 1995 was initially associated with an increase in syphilis among women in California and that the 1997 cutback was initially associated with increases in gonorrhea and chlamydia in women across states," Nesson said. "One possible

explanation is that the higher methamphetamine prices following the shocks led some women to trade sex for drugs. Medical and epidemiologic research has long associated drug use, especially crack cocaine, with prostitution."

Methamphetamine, which is also called meth, crystal, chalk, and ice, is an extremely addictive stimulant drug that is chemically similar to amphetamine. It takes the form of a white, odorless, bitter-tasting crystalline powder.

Researchers focused on the state of California since data on amphetamine-related hospital admissions and syphilis diagnoses are available at the monthly level for California and the methamphetamine epidemic was concentrated in the western United States and particularly in California.

The study points out that previous medical research estimates that heterosexual women who use methamphetamine are 6.7 times more likely to have received money or drugs for sex than heterosexual women who do not use methamphetamine.

A 2011 report found that 31 percent of females enrolled in a sexual risk reduction intervention in San Diego traded sex for methamphetamine in the past two months, while a 2009 report that 34 percent of female methamphetamine users in San Diego have ever traded methamphetamine for sex. Other studies find that between 15 and 22 percent of women methamphetamine users recently exchanged sex for money.

The results of the study suggest that policies to reduce methamphetamine use may not reduce the prevalence of STIs, the researchers said.

"This is troubling, as methamphetamine use is increasingly targeted as a means of decreasing STIs among gay and bisexual men and other high-risk populations," Nesson said. "Efforts to reduce STIs may be better centered around other policies, such as those that increase access to health care, increase screening of at-risk populations, help to find and treat partners of infected persons, and provide information on sexual health."

**More information:** "Crystal Clear? The Relationship between Methamphetamine Use and Sexually Transmitted Infections."  
[papers.ssrn.com/sol3/papers.cfm?abstract\\_id=2097888](https://papers.ssrn.com/sol3/papers.cfm?abstract_id=2097888)

Provided by Ball State University

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