

COVID-19, fear and sexual behaviour: a survey in a tertiary STI clinic in Lisbon

COVID-19 lockdowns impose constraints on sexual health services and related medical activities. Our STI clinic favoured telemedicine as advised by specialist societies,¹ illustrating the feasibility of maintaining STI care provision during a state of emergency. Recommendations regarding changes to sexual behaviour were also provided.² At least theoretically, lockdown could lead to behavioural changes and a reduction in the risk of STIs. To date, published reports indicate that during the lockdown of Spring 2020, STI incidence was either comparable³ or reduced^{4,5} relative to previous years. Whether the apparent reduction indicates a true epidemiological change or rather an underestimation due to lack of presentation for diagnosis remains to be determined.

We therefore aimed to explore the effect of the exceptional challenges imposed by lockdowns on human behaviour and sexual health. The cross-sectional study was conducted in a drop-in STI clinic of the Dermatology Department of Hospital Santo António dos Capuchos, a tertiary hospital in Lisbon. A written questionnaire (online supplemental file 2) was offered to all 343 patients who attended an inperson STI consultation between 5 May and 30 June 2020, that is, starting the month after the strictest national phase of lockdown was lifted. Overall 129 of 343 (37.6%) patients returned a valid and complete questionnaire. The majority (112, 86.8%) of the consenting respondents were male and were thus considered our study sample, although we had initially intended to evaluate all genders. Demographic data, sexual orientation and behaviour, reported fear of STI and COVID-19, and substance use were collected to reflect the previous lockdown period (between 18 March and 30 April). STI diagnosis corresponding to the data collection period was also collected.

Among the 112 male respondents, the mean age was 32 years (range 18–58). Sexual behaviour was self-reported as men who had sex with men (MSM) by 79 (70.5%), heterosexual by 21 (18.8%) and bisexual by 12 (10.7%). Twenty-nine (25.9%) patients were HIV-positive. Most respondents—62 (78.5%) MSM, 8 (38.1%) heterosexuals and 9 (75.0%) bisexuals—described a change in sexual behaviour during the lockdown, namely ‘reducing’ the number of sex partners (table 1 and online supplemental file

Table 1 Behavioural changes during the lockdown period


		Self-reported sexual orientation		
		MSM	Heterosexual	Bisexual
Total, n (%)	112 (100)	79 (70.5)	21 (18.8)	12 (10.7)
Change in sexual behaviour, n (%)	Yes	62 (78.5)	8 (38.1)	9 (75.0)
	No	17 (21.5)	13 (62.0)	3 (25.0)
	Abstinence	19 (30.6)	1 (12.5)	2 (22.2)
	Fewer sexual partners	43 (69.4)	7 (87.5)	7 (77.8)
Increased use of psychoactive agents, n (%)	Yes	21 (26.6)	5 (24.0)	2 (16.7)
	No	58 (73.4)	16 (76.2)	10 (83.3)

MSM, men who had sex with men.

1). Psychoactive substance use was described as increased in 28 (25.0%) respondents, consisting mostly of alcohol, but also drugs and anxiolytics (table 1).

Considering the reported fear of STIs, this was described as high for HIV (n=83, 28.9% of the HIV-negative population), *Chlamydia trachomatis* (CT)/*Neisseria gonorrhoeae* (NG) (n=48, 42.9%) and syphilis (n=43, 38.4%). Overall, 38 (33.9%) described a high fear of COVID-19. During the data collection period, STIs were diagnosed in 37 (33.0%) respondents overall, including 26 (32.9%) MSM, 4 (19.0%) heterosexuals and 7 (58.3%) bisexuals, and comprising 17 cases of NG, 11 cases of CT, 11 cases of syphilis and 3 cases of HIV.

Our preliminary data suggest that the COVID-19 pandemic is influencing sexual behaviour among the predominantly MSM study population. Perhaps different results could have been expected due to prejudice against this population of patients. STI diagnoses nevertheless occurred. Our results emphasise that pandemic interventions should not overlook the significance of sexuality in overall health.

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