

**1587. Prescription erectile dysfunction medication, sexual risk behaviors, and sexually transmitted infections among HIV positive men**

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**Background.** Use of erectile dysfunction (ED) medication, particularly recreational use, has been associated with sexual risk behaviors and sexually transmitted infections (STIs). Data on prescription ED medication use, sexual risk behaviors and STI screening among HIV+ men are lacking.

**Methods.** A cross-sectional study at a university-based HIV clinic evaluated prevalence and correlates of ED medication prescription among established male HIV+ patients in 2011-12. Patients were included if  $\geq 19$  years old, in care for  $>1$  year, with at least 2 visits  $\geq 90$  days apart within the last year. Multivariable (MV) log-binomial regression models were used to evaluate associations (prevalence ratio, PR with 95% confidence interval, CI) of patient characteristics with ED medication prescription.

**Results.** Of 1,170 HIV+ men, 269 (23%) were prescribed ED medication (mean age 50, 27% heterosexual and 73% MSM, 41% African American). Similar prevalence of ED medication prescription was observed for MSM (22%) and heterosexual men (26%). Among men on ED medications who took a survey regarding current sexual risk behavior, 181/234 (77%) reported multiple partners, 57/144 (40%) sex without condom use and 73/230 (32%) sex after alcohol/drug use. In MV analysis, age  $\geq 50$  years (PR = 1.5; 95% CI 1.2-1.8), multiple sexual partners (1.9; 1.4-2.5), sex after alcohol/drugs (1.3; 1.0-1.7), and prior history of STI (1.4; 1.1-1.7) were significantly associated with ED medication prescription, while sexual orientation, race, insurance, substance use, and viral load were not. Annual protocol-driven syphilis testing was done in 253/269 (94%) of men on ED medication, with 9 (4%) positive for new infection. In contrast providers performed less annual testing for *Neisseria gonorrhoeae* (GC) and *Chlamydia trachomatis* (CT): 83/269 (31%), of whom 3 were GC positive and 1 CT positive. Among MSM on ED medication (n = 196), GC/CT testing was done in 55 (28%), of whom 54 received urogenital testing and 14 rectal testing.

**Conclusion.** In this cross-sectional study, ED medication prescription was significantly associated with sexual risk behavior in HIV+ men. Incidence of syphilis among men on ED medications was high. Screening for GC and CT needs to be increased, particularly rectal screening among MSM.

**Disclosures.** All authors: No reported disclosures.