



Disclaimer

When we put our mind to it, the Gay Men's Health Collective (GMHC) is intended for the purposes of information, education, satire, and amusement, namely in the health of gay men and men who have sex with men, including sexual health, health promotion and well-being, harm reduction and HIV/HCV prevention. Any resemblance to real persons, living or dead is purely coincidental, or not. Batteries not included. No other warranty expressed or implied. Do not use while operating a motor vehicle or heavy equipment. May be too intense for some viewers. For recreational use only. Please remain seated until the ride has come to a complete stop. Browsing constitutes acceptance of agreement of our terms. Men may be slippery when wet. Not responsible for direct, indirect, incidental or consequential damages resulting from any defect, error or failure to perform. Parental discretion is advised. Although robust enough for general use, adventures into the esoteric periphery may reveal unexpected quirks. Not available in stores. May cause abdominal cramping and loose stools. Not designed or intended for use in on-line control of aircraft, air traffic, aircraft navigation or aircraft communications; or in the design, construction, operation or maintenance of any nuclear facility. May contain traces of various seeds and nuts.



Acknowledgements

A folded leaflet 5 years ago, this 32 page safer chemsex booklet has grown, produced by PIP PAC volunteers—part of the Gay Men's Health Collective. We are not doctors or substance misuse professionals, rather a group of gorgeous informed gay men, passionate about sex and our health, with direct experience of drug use, addiction, withdrawal, and recovery.

We are not alone and this booklet has been updated, tweaked, and proofed by friends, shags, allies and organisations supporting the work we do, and who continue to give their time generously at every turn. Special thanks to Da, Ed, Fr, Ga, Ha, Ma, Ni, Pa, Be, Ki and To.

This 7th edition is dedicated to SM.

We would like to acknowledge Release, Exchange Supplies, Injecting Advice, Global Drug Survey and European Chemsex Forum. Rather than re-invent the wheel, content from “Slamming Dos and Don'ts” by Mainline (Netherlands), Injecting Advice, and Exchange Supplies have been adapted, with their kind permissions.

Stunning illustrations: Walter Walrus

What's inside me



Get the best out of this booklet
with a QR code reader app



Good to know

Mixing drugs | Know your chems
Eat | Take your (HIV) medication
Drinking water | Get rest
Freshen-up | Coming down

Connection and consent

Connection and consent

Sexual health check-ups

Pre-Exposure Prophylaxis (PrEP)

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Condoms and antibiotics

Post Exposure Prophylaxis (PEP)

Safer slamming

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Police turn up at your chemsex party

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Drugs and the law

Release | Legal Aide app | Y-Stop app

Finding the right support

Organisations, websites, and services

MENRUS.CO.UK | Drug Services | Sexual Health Services
HIV Drug Interaction Checker | Injecting Advice
Exchange Supplies | Drugs Meter | The Havens
NAM aidsmap | iBase | GALOP | GALOP | Survivors
SXT | European Chemsex Forum

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GHB/ GBL overdose guidance for ambulance
and emergency service (A&E) staff

Good to know

Mixing drugs

Mixing drugs is not a good idea as you may not know what you are getting and how the strength and/ or combination will affect you. Mixing increases the chances of interactions, overdose, passing out and/ or a trip to the accident and emergency department (A&E).

Know your chems

Whenever you can, test your drugs and/ or use an accurate scale to measure the proper dose. When using an unknown substance, build up your dose in small increments.

Eat

Make sure you eat enough. Even if you're not hungry, try to eat small amounts regularly. Soft food is easier to swallow. Fruit, smoothies, protein shakes, porridge, yoghurt and soups are nutritious and provide new energy.

Take your medication

Are you on medication such as HIV antiretroviral medication? Set an alarm on your mobile so that you take your meds on time. Carry a spare dose with you just in case.

Drink water

To prevent dehydration, it's important to drink water, herbal tea or sport drinks regularly. Coffee and alcohol are not good options.

Get rest

Recreational drugs often delay tiredness and exhaustion. Take regular breaks outside the sex setting and chill out. And if you can't sleep, find a quiet dark space to help you relax better.



Freshen-up

Take a shower at least once every 24 hours. It's relaxing and energizing. Wash your hands regularly. If you are going to brush your teeth do so gently or use a mouthwash instead. Sugar free chewing gum helps protect teeth and gums.

Coming down

You may be physically and mentally exhausted, feel empty, moody and grumpy. Watching movies and listening to music is a good way to chill. Good food speeds up recovery and consider taking multivitamins. If you feel up to it, engage in some light activity by going for a walk or playing some sports.

If things are bad make sure you can call a mate and know where to get help, should you need it.



Helpful organisations are listed at the back of this booklet. Scan the QR code to find out more or search for DRUGS SUPPORT at MENRUS.CO.UK

Connection and consent

Connection

Great sex should be about connection, intimacy, affirmation, and fun, as much as it is about being safer. However, some of the choices we make during sex and chemsex can have serious consequences, and can cause lasting harm.

Sexual consent is about having the ability and freedom to agree to sexual activity. This is something that must be clearly established between two people before any kind of sexual act or behaviour, and you can change your mind at any time.

Words we may not fully understand

Words like 'consent', 'sexual assault' and 'rape' may be new in that it has only been recently that they are being talked about more openly particularly in relation to gay men.

Holding a mirror up to our sex lives can be difficult for many reasons; and for many gay men, it's hard to believe that we may be a victim of sexual assault or rape.

Sex without consent

Sex without consent is a crime. Talking about this stuff is not easy, particularly when we're high and horny. If something has happened to you, you may not even have found the words yet. Whether it's a feeling ... sense ... or hazy memory: talk to a friend, go to a sexual health clinic, or phone a helpline.



Scan the QR code to find out more including support or search for CONSENT at MENRUS.CO.UK



Sexual health check-ups

Regular sexual health check-ups every 3-6 months are essential for a responsible and enjoyable sex life.

Sexual health clinics and services:

- › Screen, detect and treat sexually transmitted infections (STIs) including HIV—with results often within hours
- › Offer 'PEP'—a course of HIV medication if you have been at risk of HIV infection, effective for up to 72 hours after exposure
- › Provide information, support and advice on maintaining a healthy sex life
- › May be able to offer PrEP (see next page)
- › Provide a point of contact in the event of future problems



Scan the QR code to find out more or search for SEXUAL HEALTH CHECK-UPS at [MENRUS.CO.UK](https://menrus.co.uk)



Pre-exposure prophylaxis (PrEP)

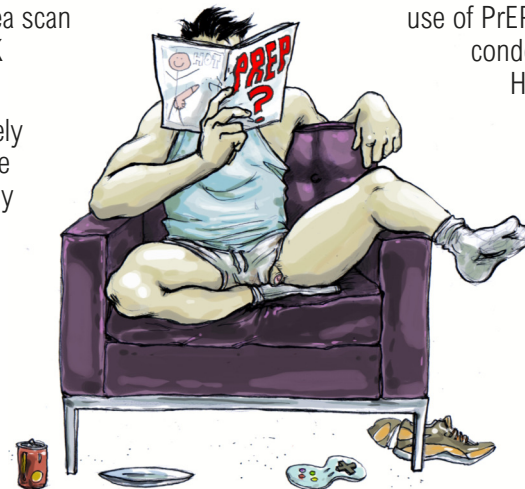
Pre-Exposure Prophylaxis (PrEP)

PrEP is the use of HIV medication, taken regularly, to keep HIV negative people from becoming infected. The evidence supporting this comes from the PROUD study which reported in February 2015 that PrEP reduced the risk of HIV infection by 86% for gay men and other men who have sex with men. This was one of the most robust studies ever taken into drug-based HIV prevention.

Where and how to get PrEP

Access to PrEP on the NHS differs around the UK. To find out what's available in your area scan the QR code or go to MENRUS.CO.UK search for PrEP.

Alternatively, you can buy PrEP privately or on-line for £20-40/ month (scan the QR code for more) but you are strongly advised to connect with your sexual health service for monitoring.



Condoms and antibiotics

There are concerns by some (including us) that the widespread use of PrEP will reduce the number of people using condoms. It is therefore important that you test for HIV, if you have not already done so.

PrEP is just one part of a combination of strategies that can reduce the risk of acquiring HIV though condoms are still the most effective method of preventing HIV transmission and other sexually transmitted infections (STI).

Even if PrEP is the game-changer many believe it is, it offers zero protection against other STIs which are on the rise at a time when antibiotics are starting to fail.

Post exposure prophylaxis (PEP)

Post Exposure Prophylaxis (PEP)

PEP is a course of medication after a potential exposure to HIV, designed to reduce the risk of HIV infection. It is the same meds that are used to treat HIV. The course lasts 28 days and may be able to prevent you becoming infected with HIV if you start

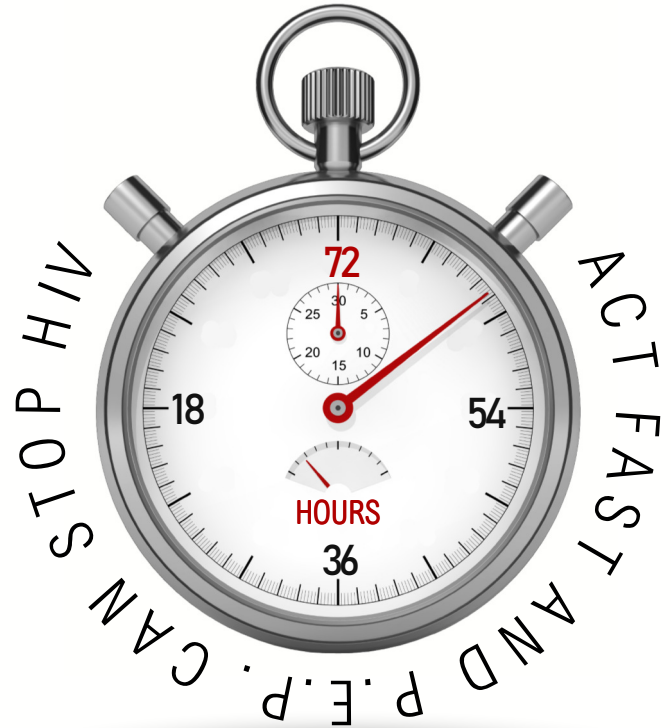
taking it within **72** hours from the time of exposure; eg: a condom break or bareback sex.

If you think you may need PEP don't spend the next 72 hours wondering, or searching the Internet for the right advice as the right advice is go to a sexual health clinic now. The sooner you start treatment the more likely its success.

You can also obtain PEP at accident and emergency departments (A&E) at some hospitals—especially important at weekends because most sexual health clinics are closed.



Scan the QR code to find out more or search for PEP at MENRUS.CO.UK



Safer slamming (injecting)

Avoid ever re-using or sharing equipment

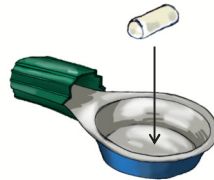
If this booklet is included in a PIP PAC safer chemsex pack, you should notice colour-coded syringes, spoons and straws to reduce the risks of sharing (yellow/ green or red/ blue). This is to reduce the risk of sharing and the transmission of blood-borne infections including HIV and Hepatitis C.

If you find yourself in a situation where you have to re-use, make sure you only use your own and no one else's. Get into the habit of marking your own syringes (scratch a letter/ number on the side) to ensure you know which is yours.

You should also flush it through with clean fresh water after use so that it doesn't clog with congealed blood.

Needles

To reduce possible damage to the veins use thin short needles. Short needles meant for injecting insulin are the most suitable.



Sterile cups, spoons and filters

Sterile packaged cups or spoons with filters are the best choice for dissolving chems in water, but avoid torn filters or exposed fibres as they can end up being injected and can cause problems.

Dissolving chems in a regular teaspoon is the best alternative but, before use, disinfect the spoon in boiling water or soak in 1 part thin bleach to 10 parts water remembering to rinse off thoroughly.

Sterile water

Sterile water, available in small ampoules, is best for dissolving and injecting. The best alternative is freshly boiled tap water, letting the water cool down before use. Use sufficient water to completely dissolve the drugs. If you are re-using syringes do not share water.

Whether you are using ampoules or boiled water, throw away leftovers after use as bacteria build up quickly.



Wash your hands and clean the site

Wash your hands before you inject and clean the injection site with an alcohol pad. Alternatively, clean the site with a cotton ball and alcohol, or by washing it with soap and water, drying with a clean paper towel or tissue.

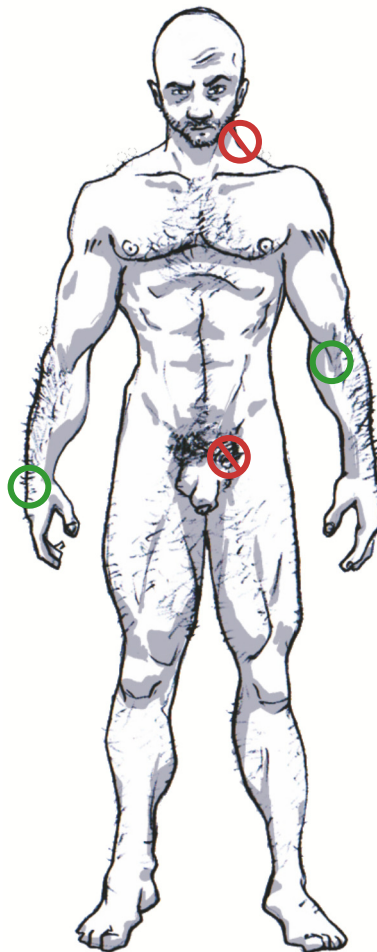
Choose a quiet place

Choose a quiet, safe and clutter-free place to slam, ensuring surfaces are clean.

Alcohol pads/ swabs

Alcohol pads are sterile-packed suitable for single use only. By wiping the slam site firmly once with a pad, you disinfect the needle's point of entry.

You can also disinfect the site by washing it thoroughly with soap and water or use a cotton ball and alcohol.



Where to inject

The inside of the elbow and lower arms. Try not to inject below a recent hit on the same vein: go above it (towards the heart) so the previous site is not irritated twice.

Aim to slam at least 1cm away from your last slam location and rest injecting sites to allow them to heal and reduce scarring. If possible, learn to swap arms.

Injecting elsewhere else (neck, cock or groin) is potentially very dangerous. If you have done this we advise to seek advice from a drugs service.

Safer slamming (injecting)

Tourniquet (pronounced turn-e-kay)

Used properly, tourniquets raise veins and can be helpful for some when injecting. However, a badly used tourniquet introduces many new risks and it would be safer not to use one at all rather than to use a tourniquet badly.

For example, some guys don't like a needle and syringe 'flapping around' while they release the tourniquet which is why they release it after injecting. This is not advisable as it puts pressure on the veins (which can burst) and can cause serious circulation problems if you pass out with the tourniquet tight around your arm.

The ideal tourniquet should be:

- › Non-absorbent
- › Wide enough to not cut into the skin
- › Long enough to tie in a way that you can loosen with your mouth
- › Have some give in it



Medical tourniquets

You need to be able to release the tourniquet without removing a hand from the needle once it's sited. Medical tourniquets are designed to be used by another person and not the person being injected.

Tourniquets and the law

Here we have a problem (at least in the UK) as Section 9a of the Misuse of Drugs Act specifically stops being able to legally supply tourniquets of any kind to injecting drug users. It should be noted, however, that in the history of the act there hasn't been a single prosecution of a drug service giving out ANY form of harm reduction equipment.

Cotton wool swabs/ kitchen roll/ tissue

Immediately after slamming, press on the injection site with a cotton wool swab/ folded kitchen roll/ tissue to help the site close quickly. This also helps reduce bruising and helps the veins heal faster. Don't use alcohol pads as it slows down the healing of the wound.



Needle (sharps) disposal

Use a sharps bin or sharps disposal unit whenever possible. These come in a variety of shapes and sizes and don't have to be bulky. Only recap a needle if it's your own.

Some guys improvise by sealing used equipment in plastic drinks bottles with screw caps then throw them away as domestic waste. Be aware this could present a risk to refuse collectors so it's important to dispose of equipment as safely as possible.

So, at the risk of repeating ourselves: use a sharps bin or disposal unit whenever possible and take it to a needle exchange for safe disposal.



Scan the QR code to find out more or search for INJECTING at [MENRUS.CO.UK](https://menrus.co.uk)



Injecting people and the law

There are possible serious outcomes for someone who injects another person with drugs.

There is a risk of prosecution for administering a drug to someone, if it can be proved that there was an intention to cause injury or endanger life.

Anyone prosecuted for one of these offences could argue that the intention didn't exist because they were giving the drug to help someone and increase safety, rather than harm them. But this probably won't protect them from at least being arrested initially and potentially having to go through a court case where that argument can be made. If someone dies after being injected by you, you could be charged with manslaughter. Intent does not need to

be proved instead the prosecution would have to show that you had been reckless or negligent. This would be on the grounds that someone injecting another person takes on a duty of care to that person, so where that duty is breached (either by doing something or failing to do something), and this causes or significantly contributes to the person's death, that is gross negligence and so a crime.

This is a very serious offence and can carry a long prison sentence.



Scan the QR code
to find out more
or search for
INJECTING at
MENRUS.CO.UK



Booty bumps and back-loading

Booty bumps (chems up the arse)

Booty bumps are chems taken up the arse using a syringe without the needle (mixed in the barrel and squirted up) or put up there using a finger. Chems are absorbed through the lining of the anal canal and rectum.

Some chems taken this way can act faster than if swallowed or snorted and feel much stronger but doing it like this can cause irritation, bleeding and/ or inflammation inside the arse. This can also increase the risk of infection, and cause lasting damage to the arsehole and rectum.

Remember to wash your hands and use a new syringe each time, and lube your arsehole and the syringe barrel ... before inserting gently.

Back-loading (barrel-mixing chems)

Some guys dissolve chems in warm water inside the syringe barrel, giving it a vigorous shake before slamming.

However, tiny particles that don't dissolve can cause problems as you don't want them in your blood stream.

Crystal meth dissolves easily in water, while mephedrone and other drugs can be more difficult to dissolve.

We strongly recommend you dissolve chems in sterile water, or freshly boiled water, in a sterile cup and draw the solution through a filter.

Bottom line: whatever you inject into your vein needs to be fully dissolved, as pure as possible, and not contain any unnecessary crap.

Hepatitis C, and cleaning douche kit

Hepatitis C

There has been a marked increase in Hepatitis C (HCV) among gay men, which raises additional issues if you are already living with HIV.

Fucking, fisting, and sharing douche kits, dildoes and snorting straws can all put you at risk of getting HCV, HIV and other STIs.

Reducing the risks

You can reduce risks by using:

- › Condoms for fucking or getting fucked
- › Sterile syringes and needles when slamming
- › Sterile syringes for booty bumps
- › Latex or non latex gloves when fisting or getting fisted
- › Your own supply of lube and not sharing
- › A new condom on a dildo every time it is used
- › Your own straw when snorting drugs

Douche kit and douche heads

Keeping douche heads and douche kit clean is an important part of reducing risks, especially at sex parties where they may be shared.

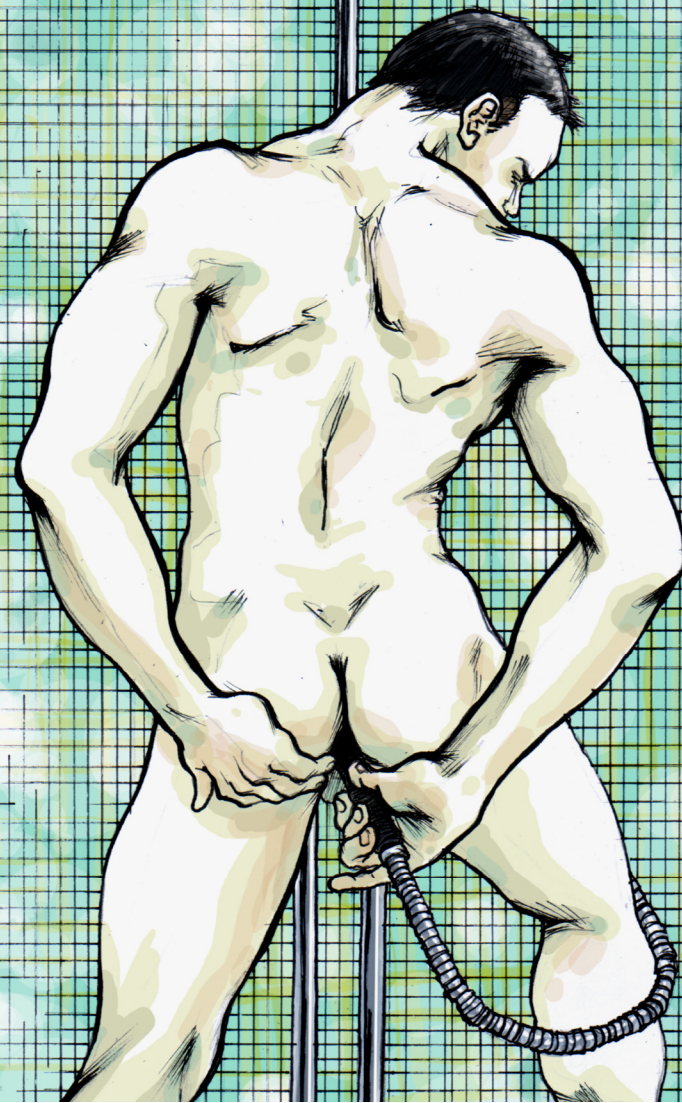
Use a commercially available sex toy cleaner, or you can make up your own solution of 1 part thin bleach to 10 parts water.

Make sure you clean and rinse the douche head thoroughly between each arse.



Scan the QR code to find out more or search for HEPATITIS C at MENRUS.CO.UK





The difference between GHB and GBL,

The difference between GHB and GBL

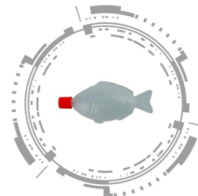
GHB and GBL are two closely related drugs often referred to simply as “G”.

GHB (gamma-hydroxybutyrate)

- › Produced as a white-ish salt powder and as a clear liquid with almost no smell and a soapy salty taste
- › For recreational use on the chemsex scene, it is most usually found in clear liquid form (the salt powder dissolved in water)
- › It can also be found as a paste or in capsules though this is less common

GBL (gamma-butyrolactone)

- › An industrial-strength solvent used as an alloy cleaner, paint stripper, and for removing graffiti
- › Produced as a clear liquid and has a sharp bitter chemical taste and smell
- › Turns into GHB once ingested (inside the body)
- › Can be 2-3 times stronger than GHB, the effects can come on quicker, and be more unpredictable



and why it matters



Scan the QR code to find out more or search for GHB or GBL at MENRUS.CO.UK



Why knowing the difference between GHB and GBL matters

GBL is more likely to be the same purity as it is manufactured and sold as an industrial-strength cleaner. In fact, some of the websites and bottle labels state the purity as a percentage (eg: 99.7%).

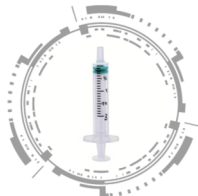
On the other hand, GHB is produced as a salt-powder and dissolved into water which is why dose strength is more likely to vary.

If you are taking 'G' you should know beforehand whether it is GHB or GBL. This is because GBL maybe two to three times stronger than GHB.

For example: if your 1ml dose of GHB is actually GBL, the strength may be the equivalent of taking 2-3ml.

This level is more likely to lead to over-dosing (unconsciousness and coma) particularly if you have not tried it before or have a lower tolerance.

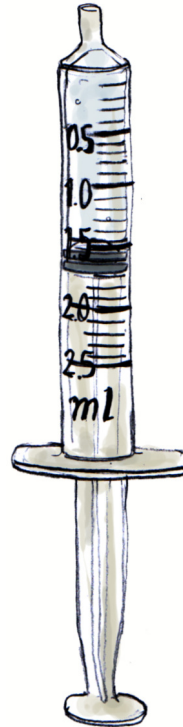
The reverse is also true: if your 1ml dose of GBL is actually GHB the actual strength maybe 2-3 times less.



Reducing 'G' risks

Reducing risks

- › Use a syringe to precisely measure doses; and make sure you can read the measurements as G removes the markings
- › If you use a pipette or soy sauce 'fish' bottle make sure you can measure accurately. They look similar but different bottles and different pipettes hold different amounts
- › Mixing G with alcohol or ketamine increases the risks of overdose. It can impact the effect of the G, making safer dosing more difficult. Stick to soft drinks to mix.
- › Safer use is about the right dose at the right time. Dosage intervals and results vary from person to person. Go slow, build up or STOP if you are uncertain
- › It's easy to make up a dose in a drink, but then forget whether you've put it in there. If in doubt: chuck it out and start again



- › Make a note of when you take your G using your phone's notepad, or use the stopwatch to keep time between doses. Keeping track of the time between doses can help reduce your risk of needing a wake-up call in an accident and emergency (A&E) department or intensive care
- › In the event of an overdose or emergency tear off the back page this booklet and give it to ambulance/ accident and emergency department (A&E) staff



Scan the QR code to find out more or search for GHB, GBL or SPIKING at MENRUS.CO.UK



Spiking: drinks and lubricant with 'G'

Spiking: drinks and lubricant

Drink spiking is when alcohol or drugs are added to drinks without an individual knowing - so without their consent. There are a small but increasing number of reported instances of drinks and lubricants being spiked with G with the intent of sexual assault, rape, and murder, including burglary and theft.

- › G is added to soft drinks
- › G is mixed with water-based lubricant before/ during sex
- › G is mixed with water-based lubricant in syringe lubricant applicators, or syringes (without needles) before the lubricant is inserted up the bum

Some guys fantasise about consensual rough sex and rape scenarios when taking any recreational drug increases the risk of harm and is potentially life-threatening.



Reducing risks

- › Measure, check and drink your own doses and don't leave drinks unattended
- › If you come back to a drink later throw it away, wait an hour before dosing again, starting slowly
- › Take a supply of your own lubricant if playing with a partner(s) for the first time
- › Ensure consent is given freely and safe words are agreed
- › Seek help if you think you've been a victim of spiking, sexual assault or robbery.

The law

The Sexual Offences Act 2003 states that it is an offence to administer a substance, like GHB and GBL, to a person with intent to overpower that person to enable sexual activity with them. This can mean up to 10 years' imprisonment.



'G' dependence and withdrawal

Dependence and withdrawal

For users physically dependent on G one of the biggest risks is rapid onset of 'withdrawal syndrome', which can be potentially fatal.

Within a few hours of their last dose they start to develop cravings for more G and can become anxious, sweaty, agitated, and confused.

In a matter of hours, withdrawal can rapidly escalate, progressing to hallucinations, delirium and life threatening seizures.

Users experiencing these symptoms are likely to require admission to an accident and emergency department (A&E).

Further guidance

Scan the QR code for more detailed harm reduction guidance at MENRUS.CO.UK including:



- › G effects
- › G and the law
- › Measuring/ timings / dose amounts
- › The difference between GHB and GBL
- › Drinking G with soft drinks
- › G with alcohol and other drugs
- › Spiking drinks and sex lubricant with G
- › HIV medication and drug interactions
- › Watching out for others, in overdose situations
- › Addiction (or dependence) and withdrawal
- › Storing and decanting G

Ambulance call-outs and the police

In July 2018, the Metropolitan police issued guidance on chemsex and what they do if they are called. You can read the guidance in full by scanning the QR code on this page.

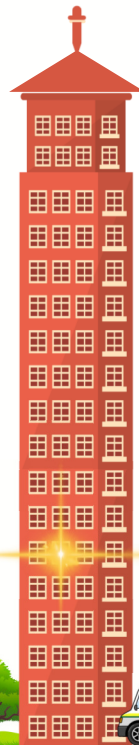
The guidance is based on the position of the Metropolitan Police Service (MPS), which covers the Greater London area. Whilst police forces in other parts of the country can look to the MPS for working practices, they might actually do things differently.

Whilst the guidance does not provide clear protection against investigation of a drug-related offence, it is absolutely right that drug use is not an offence in the UK. However, possession and/ or possession with intent to supply a control drug is, and if you are questioned about these specific activities you should say nothing until you have a solicitor to represent you, or have at least spoken to one. But, the possibility of being questioned by the police should not be a reason to not call an ambulance if there has been an overdose or some other incident that needs medical help.

Calling an ambulance in an overdose situation can save lives. Ensuring friends get the right medical help if they need it is the top priority. However, there have been occasions when an ambulance has not been called because guys are fearful the police will turn up as well, and that if there has been a fatality this could lead to arrest and investigation.

Unfortunately, we cannot advise you to air rooms, tidy up, shower and put on some clothes and send your house guests away because (if a crime has been committed under the law, and evidence is removed or destroyed as a result) we could be arrested and prosecuted for actively encouraging you to do this.

The best advice we can give you is to always call an ambulance if you think someone's life is at risk.



Metropolitan Police
guidance on Chemsex



Police turn up at your chemsex party

Whether on the street, in your home, or at a chemsex party, do you know your rights when questioned by the police, Do you know your rights on arrest? Scan this QR code for the information online.



Alternatively, scan this QR code for your FREE booklet. It's small and slim and promises to slip into a back pocket or shag bag. (You will need to supply a name and address).

Rather than re-invent the wheel, our booklet is based on the outstanding "Bust Card: Your Rights on Arrest" by Release which has been in continuous publication since the early 1970s. Text used with their kind permission.



Drugs and the law

Thousands of people are prosecuted for simple drug possession every year in the UK – with no legal aid available. Furthermore, it's our experience that gay men's understanding of drugs law, arrest, cautions and the criminal justice system is pretty poor. There's a wealth of anecdotal evidence to say that when things go wrong we don't know who to call or what to do.

Drugs and the law is a complicated subject and if you find yourself in trouble you should get legal advice at the earliest opportunity.

RELEASE release.org.uk

Release provides a free, confidential, non-judgemental national information and advice service in relation to drugs and drug laws.

020 7324 2989

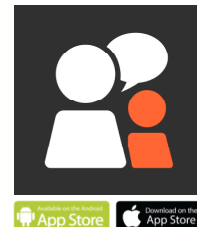
11am – 1pm and 2pm – 4pm, Mon – Fri

Message service is available 24 hours and they will return your call within one business day.



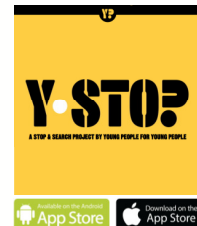
Legal Aide App

The Legal Aide app from Release aims to help people navigate the criminal justice system. The app has been launched to help people who have been arrested for the personal possession of controlled drugs.



Y-Stop App

The Y-Stop app from Release aims to give you the tools to interact with the police safely, equipping you with all the skills and knowledge you need to handle a stop and search.



Finding the right support

Gay men needing chemsex support require specialist help and advice. Unfortunately, these services are not universally available and things can be worse outside the big cities.

When guys ‘crash’ or are in crisis, they often require multiple services (eg: recovery, mental health, legal, housing, debt) and mainstream services are not always geared up to work together—though some are trying to improve.

Truth is, issues like this affect many LGBT+ people accessing health services at a time when there is less funding and more cuts than ever before.

Some sexual health services, drug and LGBT+ mental health, local authority services are working together to provide tailored and integrated support—but finding the right help can be complicated and frustrating.

Drug services are just waking up to the fact they’ve ‘neglected’ the LGBT+ community for decades and many only seem to have a passing understanding of gay men’s health and wider LGBT+ issues. However, some are starting to respond positively, becoming LGBT+ friendlier, developing expertise—something long overdue.

Some of us prefer gay or gay-friendly services which (as a rule) are much better understanding the issues affecting our lives, and the context. Others are happy to access mainstream services.

Most health services aim to be welcoming, respectful, knowledgeable, and understanding. The thing is to find a service that’s right for you and that “gets the job done.”

Ask questions

You or a friend can always phone a service first to check if the ‘vibe’ feels right. Some of these questions may seem a little direct (kind of the point) or you may have some of your own:

- › “Do you have a drug, alcohol and/ or chemsex service specifically for gay men?”
- › “Have your frontline staff had training on chemsex, gay men’s health, and wider LGBT+ issues?”
- › “How do existing clients respond to LGBT+ people?”
- › “Would you say your service is LGBT+ friendly?”
- › And why not check out the service’s website?
- › Are ‘chemsex’, ‘LGBT’ ‘gay’ or ‘men who have sex with men’ (MSM) included anywhere?

Your GP

It's understandable why you might feel your GP won't have the knowledge and expertise they need but they should be able to be supportive and/ or signpost you to someone who can. This might include a drugs or counselling service though these are unlikely to be gay specific. GPs are also the 'gateway' to local health services you so developing a relationship with your GP is potentially very helpful.

HIV and LGBT+ organisations

If you don't know where to start, contacting a local HIV or LGBT+ organisation can be a good place to start. While they may not be able to help you directly they usually know what's going on in the area and sign post accordingly.

Can you talk with a friend you trust?

Perhaps the first step in getting help may be talking to someone you trust, a friend, a sex bud ... even the ex. Some of the best support can still be found within our own community.



Organisations, websites and services



MEN R US: YOU MEN BODY SEX STI DRUGS menrus.co.uk

A gay men's health and wellbeing website with comprehensive sections on recreational drug use, chemsex, and sexual health:

About Chemsex menrus.co.uk

A comprehensive section on chemsex (on which this booklet is based) including further support and services in Greater London, and the UK

About Drugs menrus.co.uk

Including why we take drugs, reducing risks, explaining harm reduction and why it matters, drugs and the law, and an A-Z of drugs

Drug and Alcohol, and Chemsex Services menrus.co.uk

Mapped by London Borough; including links to databases for Wales, Scotland, Northern Ireland, and the Republic of Ireland

Sexual Health (Clinic) Services menrus.co.uk

Mapped by London Borough; including links to databases for Wales, Scotland, Northern Ireland, and the Republic of Ireland





HIV Drug Interaction Checker hiv-druginteractions.org

Comprehensive, user-friendly, drug interaction charts providing clinically useful, reliable, up-to-date, evidence-based information.

Injecting Advice injectingadvice.com

Offers support and advice to injecting drug users and people working in harm reduction services (especially needle programmes).

Exchange Supplies exchangesupplies.org.uk

Supplies products, information, and services to improve and prolong the lives of people who inject drugs.

Drugs Meter drugsmeter.com

Drugs Meter allows users to see how their drug use compares to others, offering objective, personalised feedback.

The Havens havens.org.uk

Will see anyone in London who has been raped/ sexually assaulted in the past 12 months. Offers treatment, advice and support 24/ 7. You can self-refer.





NAM aidsmap aidsmap.com

Shares information about HIV and AIDS with independent, clear and accurate information is vital in the fight against HIV and AIDS.

iBase i-base.info

Treatment activist group providing timely/ up to date information about HIV treatment to HIV positive people and to health care professionals.



GALOP galop.org.uk

Supports lesbian, gay, bi, trans and queer people who have had problems with the police or have questions about the criminal justice system.

Survivors survivorsuk.org

Help/ support for sexually abused men as well as their friends and family, no matter when the abuse happened.



SXT sxt.org.uk

Online service that helps find the right type of sexual health service near you in under a minute including screening.

European Chemsex Forum ihp.hiv

The International HIV Partnerships (IHP) hosts the European Chemsex Forum, shaping the chemsex response across Europe.



GHB/ GBL overdose guidance for ambulance/ emergency service staff

GHB (gamma hydroxybutyrate) and GBL (gamma butyrolactone) are party drugs mixed with soft drinks and taken for clubbing and/ or during sex. Closely related chemically, GHB and GBL are commonly known as 'G' and produce similar effects: euphoria, reduced inhibitions, and drowsiness. They are 'depressant' drugs, so slow the body down.

GBL turns into GHB inside the body, and so its effects can be stronger or more unpredictable than when taking GHB. GHB is a clear, salty, odourless liquid, and also comes as a powder that's added to drinks. GBL has a sharp, acidic taste and chemical odour. GBL is much stronger than GHB. Today GBL is much more common in its use than GHB.

Effects

Effects start from 10 minutes to 1 hour after taking and can last for several hours. It's wide-spread availability means it's often hard to know the quality and strength of an individual batch; even for experienced and/ or regular users.

Dependency

Although overdose (passing out/ being unconscious) is the most common risk associated with the use of G, people who use it every day can become dependent. Habitual users find it necessary to typically dose themselves 1-2mls every 1-2 hours. Some habitual users find themselves having to dose

continuously and wake regularly throughout the night to take their next dose. People who use the drug for more than 2 or 3 days continuously are at risk of developing withdrawal.

Withdrawal

For users physically dependent on G one of the biggest risks is rapid onset of 'withdrawal syndrome', which can be potentially fatal. Within a few hours of their last dose they start to develop cravings for more G and can become anxious, sweaty, agitated, and confused. In a matter of hours, withdrawal can rapidly escalate, progressing to hallucinations, delirium and life threatening seizures. Users experiencing these symptoms are likely to require admission to an Intensive Care Unit (ICU).

Treatment

The main treatment for GHB/ GBL withdrawal is with benzodiazepines (diazepam type drugs). Planning reductions in your use of G before you stop altogether can reduce withdrawal symptoms and make them less severe. If you are a regular G user you should always seek medical advice before you stop using, as sudden withdrawal can be life threatening.



Scan the QR code for more about chemsex and safer chemsex and [MENRUS.CO.UK](https://menrus.co.uk)



