



# Acknowledgements

A folded leaflet 7 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.

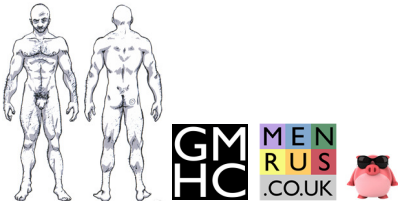
We are not alone and this booklet has been updated, tweaked, and proofed by friends, shags, allies and organisations supporting the work we do, and who continue to give their time generously at every turn. Special thanks to Da, Ed, Fr, Ga, Ha, Ma, Ni, Sw, Nw, Bh, Pa, Be, Ki and To.

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 permissions.

Stunning illustrations: Walter Walrus  @wwoflgbt

## Disclaimer of sorts

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.



SAFER CHEMSEX BOOKLET | 8TH EDITION | JULY 2021 | GAY MEN'S HEALTH COLLECTIVE  
GMHC.CO.UK | 61 MANSELL STREET, LONDON E1 8AN

# What's inside me

Good to know

Connection and consent

Sexual health check-ups and self-test kits

Pre-Exposure Prophylaxis (PrEP)

Post Exposure Prophylaxis (PEP)

Safer slamming (injecting)

Slamming (injecting) others and the law

Booty bumps

Back loading

Hepatitis C and cleaning douche kit

GHB and GBL

Reducing 'G' risks

'G' dependence and withdrawal

Spiking: drinks and lubricant with 'G'

Ambulance call-outs, and the police

Your rights on arrest

Drugs and the law

Hook-up safer

Finding the right support

Organisations, websites, and services



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



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



# Good to know

## **Know your chems and 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).

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 and stay hydrated**

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

## **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.

## **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](http://MENRUS.CO.UK)



# Connection and consent

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.



Scan the QR code to find out more about CONSENT including support or search [MENRUS.CO.UK](https://menrus.co.uk)



## 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.

# Sexual health check-ups and self-test kits

## Sexual health services

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

Sexual health services screen, detect and treat sexually transmitted infections (STIs) with some results in minutes, including HIV. They may also offer PrEP; and/ or PEP.

They are a useful contact point in the event of future problems and many provide information and advice on maintaining a healthy sex life.



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



## STI self-test kits (London)

Sexual Health London (SHL) is London's sexual health e-service\* that provides free sexual health testing via the internet and local venues. Simply register for SHL and complete an online consultation to order your free STI test kit.

The service provides testing for a range of sexually transmitted infections including chlamydia, gonorrhoea, HIV, syphilis, hepatitis B and hepatitis C via samples you can collect at home. The service is designed for individuals who have no symptoms. If you have symptoms please attend your local sexual health clinic.

\* Currently, Hillingdon, Croydon and Greenwich do not participate.



Scan the QR code to find out more about **SELF TEST STI KITS** or search [MENRUS.CO.UK](https://menrus.co.uk)



# Pre-exposure prophylaxis (PrEP)

PrEP is the use of HIV medication, taken regularly, to keep HIV negative people from becoming infected.

PrEP is now FREE from most NHS sexual health services across the UK. Alternatively, you can buy PrEP privately and/ or on-line but you are strongly advised to connect with your sexual health service for monitoring.

## Condoms and antibiotics

PrEP is one of a combination of strategies that can reduce the risk of getting HIV, though condoms are still the most effective method of preventing HIV 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 some antibiotics are failing.



Scan the QR code to find it more or go to [MENRUS.CO.UK](https://MENRUS.CO.UK) search for PrEP.





# Post exposure prophylaxis (PEP)

PEP is a course of medication after a potential exposure to HIV to reduce the risk of HIV infection. It's the same medication 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 unprotected/ bareback sex.

If you think you may need PEP don't spend **72** hours 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 some accident and emergency departments (A&E), 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](http://MENRUS.CO.UK)



# Safer slamming (injecting)

## Avoid re-using or sharing equipment

If this booklet is included in a PIP PAC safer chemsex pack, you will notice colour-coded syringes, spoons and straws to reduce the risks of sharing—and 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. Throw away any leftover water after use as bacteria build up quickly.



## Wash your hands and clean the site

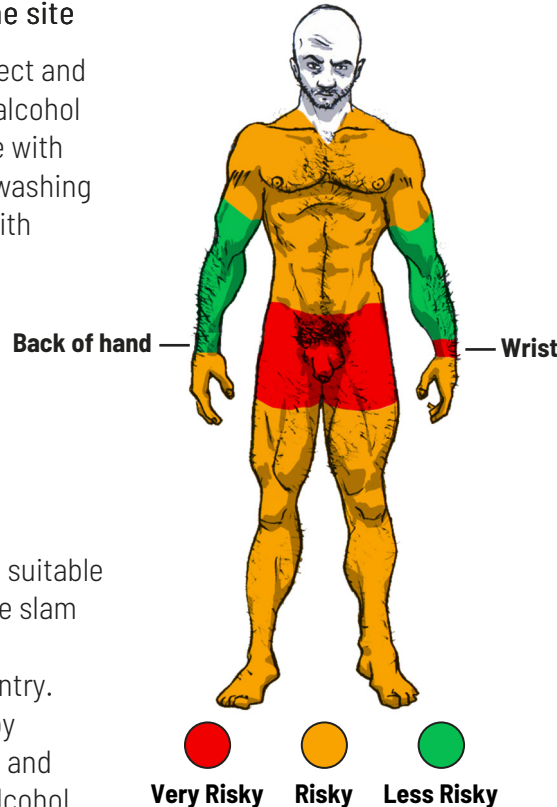
Wash your hands before you inject and clean the injection site with an alcohol pad. Alternatively, clean the site with a cotton ball and alcohol, or by washing it with soap and water, drying with a clean paper towel or tissue.

## 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

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)

## **Tourniquets** (*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 (in the UK) as Section 9a of the Misuse of Drugs Act specifically stops being able to legally supply tourniquets 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.



Scan the QR code to find out more about SLAMMING (injecting) or search [MENRUS.CO.UK](http://MENRUS.CO.UK)



## 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.

You would think it, but there is no coordinated (UK) needle exchange/ disposal scheme. Instead, services are commissioned locally with local providers including chemists and drug services.



# Slamming (injecting) others 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 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](http://MENRUS.CO.UK)



# Booty bumps

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.
- › Puts you at greater risk of HIV and STI transmission.
- › 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

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.

If you choose to back-load, 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.

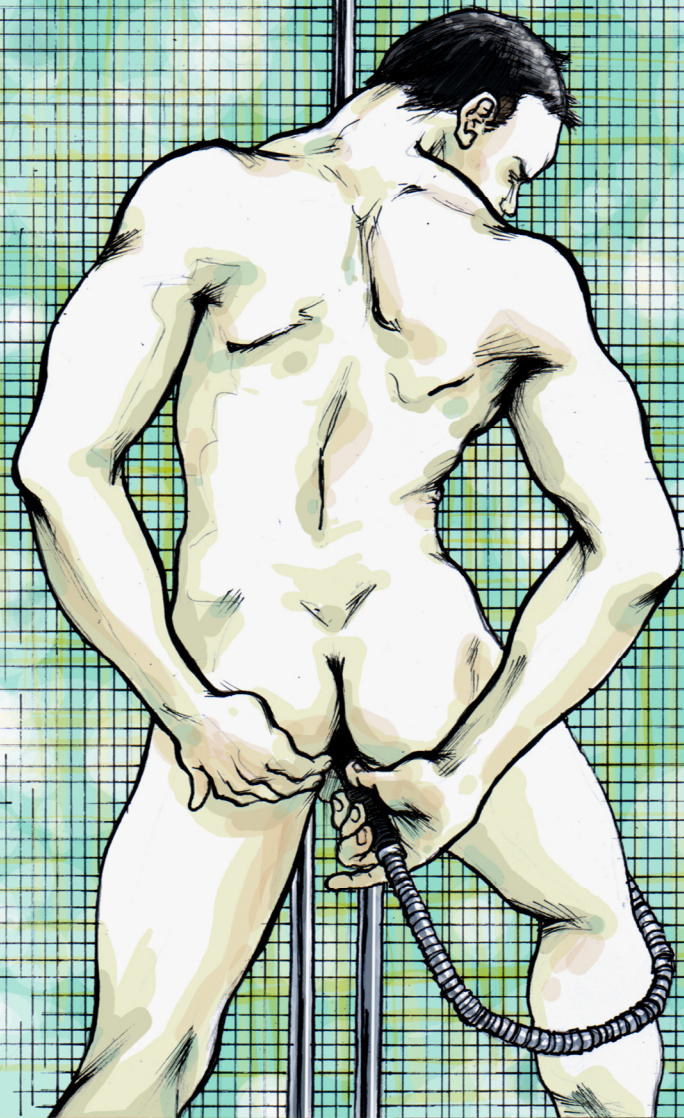
Make sure you clean and rinse the douche head thoroughly between each arse.



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







# GHB and GBL

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

**GHB** (*gamma-hydroxybutyrate*)

- › 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.

**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%).

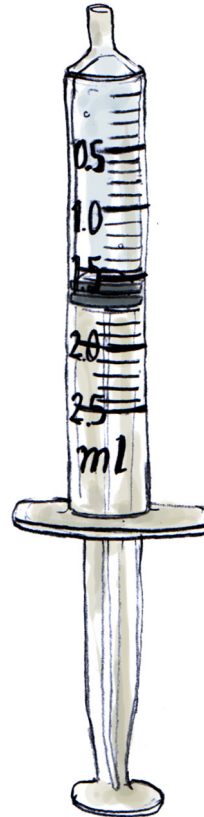
On the other hand, GHB is produced as a salt-powder and dissolved into water which is why dose strength is more likely to vary.

If you are taking 'G' you should know beforehand whether it is GHB or GBL. This is because GBL may be 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 may be 2-3 times less.

# Reducing 'G' 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 or GBL at [MENRUS.CO.UK](http://MENRUS.CO.UK)



# 'G' dependence and withdrawal

- › Regular use of G builds tolerance, meaning users need to take more to feel the same effects.
- › G has the potential of being highly addictive and daily/ regular use can lead to severe, physical withdrawal symptoms which require medical help. If you have been taking G regularly for long periods, you can become dependent.
- › Don't use for more than two days in a row to reduce the likelihood of developing a physical dependency to G and the risk of dangerous withdrawal.
- › For users physically dependent on G, one of the biggest risks is the 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).
- › It can be very dangerous to suddenly stop so seek support talk from a drug service, GP or A&E before attempting to stop.





# Spiking: drinks and lubricant with 'G'

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. This includes lube in syringe lubricant applicators, or syringes (without needles) before it 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.



Scan the QR code for more, or search for GHB, GBL, DEPENDENCE AND WITHDRAWAL or SPIKING at [MENRUS.CO.UK](http://MENRUS.CO.UK)



## 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.



# Ambulance call-outs, and the police

In July 2018, the Metropolitan police issued guidance on chemsex and what they do if they are called. It 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.

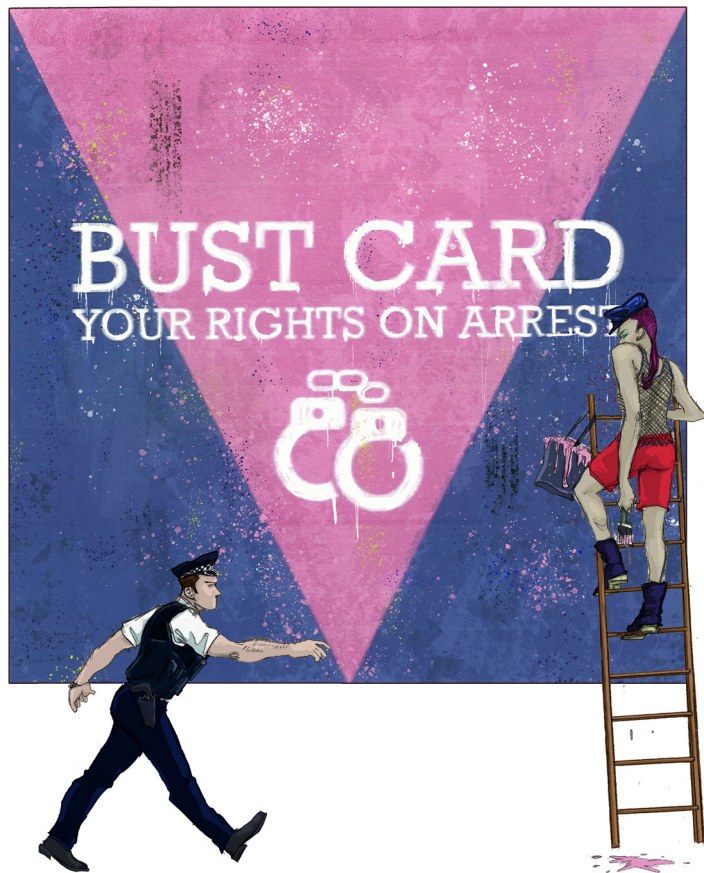
The best advice we can give you is to always call an ambulance if you think someone's life is at risk.



Scan the QR code for more on calling 999: ambulance call-outs, and the police



# Your rights on arrest



## Your rights on arrest online

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.



## Your own booklet (FREE)



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 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](https://release.org.uk)

## 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.



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

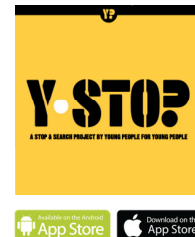
# 020 7324 2989

11am – 1pm and 2pm – 4pm, Mon – Fri

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

## 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.





# Hook-up safer



Whether you're new to hooking-up – or been around the block a few times – here are 12 tips for reducing risks.

1. If you're sexually active: your sexual health matters. This includes condoms and lube, PrEP, U=U, check-ups, and STI self-test kits.
2. If a hook-up doesn't feel right: don't think with your cock! Think twice before agreeing to meet up.
3. Let someone know where you're going. Keep your phone charged, and keep the location GPS on.
4. Have an exit plan home, keeping money/ cards in a safe place.
5. Sex should be consensual. That's both of you, not just one of you, and you can change your mind anytime.
6. If you use drugs: know what and how much you're taking. Pace yourself, and take breaks.
7. Some drugs are odourless and tasteless, and have been used to spike drinks and lube.
8. When calling the emergency services for an ambulance, be aware the police may also attend.
9. Know where to get professional help and support should you need it. If in doubt, phone a helpline or ask a friend.
10. Know your rights and where to get legal help in the event you are questioned and/ or arrested by the police.
11. All hate crime matters so report it to the police or through a third party.
12. When hook-ups don't go to plan, we often don't talk about them when they go wrong. Chatting it through with a friend can help.

Hooking-up should be about connection, intimacy, affirmation, and fun. For most of us, it is but – when things go wrong – it's only afterwards we think about making better choices. We should learn from these experiences – and learn from each other – because some hook-ups have resulted in tragic consequences.

# 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 even more challenging outside larger cities.

When guys 'crash' or are in crisis, they often require multiple services (eg: recovery, mental health, legal, housing, debt) and 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.

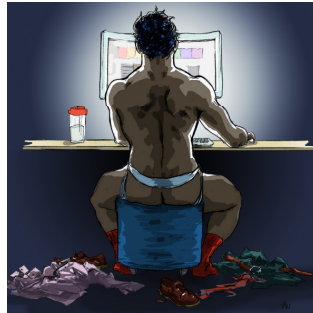
Some gay men prefer gay or gay-friendly services which (as a rule) have a better understanding the issues affecting our lives, and the context. Other gay men are OK accessing mainstream services. Of course health services aim to be welcoming, respectful, knowledgeable, and understanding; the thing is to find a service that's right for your needs.

## Your GP

It's understandable why some gay men feel their GP won't have the expertise they need, but GPs should be able to be supportive and/ or signpost you to someone who can. Most importantly, GPs are the 'gateway' to local health services (primary care) so developing a relationship is potentially very important.

## 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.

## 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?"

## On websites

- › Check out the service's website.
- › Are 'chemsex', 'LGBT' 'gay' or 'men who have sex with men' (MSM) included anywhere?

# Organisations, websites and services



**MEN R US:** [YOU MEN BODY SEX STI DRUGS menrus.co.uk](https://menrus.co.uk)

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

**Drug and Alcohol, and Chemsex Services** [menrus.co.uk](https://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](https://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](https://hiv-druginteractions.org)

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



**Exchange Supplies** [exchangesupplies.org.uk](https://exchangesupplies.org.uk)

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



**Drugs Meter** [drugsmeter.com](https://drugsmeter.com)

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

**The Havens** [havens.org.uk](https://havens.org.uk)

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



**Survivors** [survivorsuk.org](https://survivorsuk.org)

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

**GALOP** [galop.org.uk](https://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.



**NAM aidsmap** [aidsmap.com](https://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](http://i-base.info)

Treatment activist group providing HIV treatment information to HIV positive people and to health care professionals.

**SXT** [sxt.org.uk](http://sxt.org.uk)

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



**Mental Health** [menrus.co.uk](http://menrus.co.uk)

Including helplines, support, groups and networks with content on loneliness, depression, and stress and anxiety.

**LGBT+ Organisations** [menrus.co.uk](http://menrus.co.uk)

Helplines, forums, groups and networks; and organisations for the trans; and Black, Asian and Minority Ethnic communities.



**LGBT+ Hate Crime** [menrus.co.uk](http://menrus.co.uk)

Reporting hate crime, hate crime support and hate incidents and hate crime statistics



# 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 to find out more about chemsex and safer chemsex and [MENRUS.CO.UK](https://menrus.co.uk)



