The emerging impact of the COVID-19 outbreak on sexual health in Lebanon

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Running title: COVID-19 and sexual health in Lebanon

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No conflict of interest declared.
No financial disclosure.
Acknowledgment: none.

Keywords: sexual health; HIV; sexually transmitted infections; COVID-19; Lebanon.

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Dear Editor,

Lebanon registered its first coronavirus-2019 (COVID-19) case on 21 February 2020, which was followed by a nationwide lockdown (15 March to 8 June), resulting in strict curfews, the prohibition of public gatherings and the closure of the international airport in Beirut [1]. The pandemic has had compounding effects on the political and economic crisis with severe economic and health consequences [2].

Throughout the lockdown, one of the largest sexually transmitted infections (STIs) and HIV clinics in Beirut with linkages to major civil organizations in direct contact with sexual health beneficiaries has remained open for emergencies such as post-exposure prophylaxis (PEP) for HIV, STI testing in people exposed to risk. Access to remote consultations has also been available. The clinic has noted a major reduction in STI testing rates. Only 26 screenings were recorded in the lockdown period which contrasts with the 97 screenings conducted during the same period of 2019 (73% drop in 2020). All the screenings were among men who have sex with men (MSM). There were 4 diagnoses of STIs (1 urethral *Neisseria gonorrhea* and 3 urethral *Chlamydia trachomatis*, no cases of syphilis or HIV) which significantly contrasts with the previous numbers of STIs (44 in 2018 and 53 in 2019) in the same timeframe among MSM [3].

On the other hand, PEP was prescribed 36 times in the period January-June 2020 compared to 27 times during the same period of time in 2019 (34% increase). All cases of PEP prescriptions were for MSM. A range of risky behaviors and a 12% prevalence of HIV have been documented in MSM in Lebanon [3].

The lockdown measures and fear of infection with COVID-19 may have directly affected the willingness of patients to access screening services. However, the increase in PEP prescription for MSM indicates that sexual risk-taking has persisted despite potential fear of contracting COVID-19. Our results contrast with findings from Australia and Rome where COVID-19 restrictions have resulted in effective social distancing and consequently a reduction of casual sexual encounters in MSM [4,5]. Three factors could explain the difference between Lebanon and these countries. First, the already existent political and economic instability along with the new pandemic may act as psychological stressors, which in turn may lead to self-medicating behaviours, including sexual risk-taking, in the general population. In MSM, in particular, it has been shown that social psychological stressors may threaten identity and wellbeing, leading individuals to resort to sexual risk behaviours when decreased social support is available [2]. Second, while there was a reduction in sexual encounters in MSM in Italy and Australia, sexual risk-taking continued in Lebanese MSM although individuals may have prioritized HIV prevention over other STIs during the lockdown. Third, data on epidemiology of STIs in COVID-19 time are inconsistent due to the lack of stratification by incubation period, acute versus chronic type, duration of symptoms and sexual orientation. Future studies should ascertain the impact of COVID-19 on both mental and sexual health especially in stigmatized communities such as MSM.

Contributorship statement: IM drafted the paper; MA reviewed data and RJ reviewed the overall paper. The three authors have approved this final version.

References

[1] Sly L. Lebanon is in a big mess. But on coronavirus, it's doing something right. *World,* 2020; *2*:182-115.

[2] Jaspal R, Assi M, Maatouk, I. The potential impact of the COVID-19 pandemic on mental health outcomes in societies with economic and political instability: the case of Lebanon. *Mental Health Review Journal* 2020 *(in press)* DOI: **10.1108/MHRJ-05-2020-0027**

[3] Maatouk I, Assi M, Jaspal R. How can we enhance sexual health outcomes in men who have sex with men in Lebanon? BMJ Sex Reprod Health 2020 *(in press)* DOI: 10.1136/bmjsrh-2019-200415
[4] Hammoud MA, Maher L, Holt M, Degenhardt L, Jin J, Murphy D, Bavinton B, Grulich A, Lea T, Haire B, Bourne A. Physical distancing due to COVID-19 disrupts sexual behaviours among gay and bisexual men in Australia: Implications for trends in HIV and other sexually transmissible infections. JAIDS Journal of Acquired Immune Deficiency Syndromes. 2020 *(in press)* DOI: 10.1097/QAI.0000000000002462
[5] Latini A, Magri F, Donà MG, Giuliani M, Cristaudo A, Zaccarelli M. Is COVID-19 affecting the epidemiology of STIs? The experience of syphilis in Rome. Sexually Transmitted Infections. 2020 *(in press)* DOI: 10.1136/sextrans-2020-054543