TOP U.S. RESEARCHERS AND AIDS EDUCATORS
GATHER FOR FORUM ON ORAL SEX AND HIV

Doctors, community members discuss data and dynamics of
oral sex and HIV transmission among gay men and lesbians

Just how risky is oral sex in the age of AIDS? That was only one of the
questions addressed when more than a hundred researchers, physicians, AIDS
educators and concerned lesbians and gay men gathered on Sunday, February 6, for
Oral Sex and Possible HIV Transmission: A Community Discussion. The forum,
held at Columbia University's Miller Theater and co-sponsored by Gay Men's
Health Crisis (GMHC) and the Columbia Gay Health Advocacy Project, presented
the latest data on oral sex and HIV transmission, as well as a discussion of the
dynamics that underlie the decisions to engage in fellatio or cunnilingus. "We're
presenting people with state-of-the art research, but we're also moving the
discussion beyond 'To lick and suck or not to lick and suck,' said Columbia's Laura
Pinsky, one of the forum's organizers. "For many of us, a more useful question to
ask is "If I have oral sex tonight, how worried will I feel in the morning?"

The forum included presentations by physicians and researchers who
analyzed the latest and best available data on HIV transmission and oral sex.
Cornell University's Dr. Jeffrey Laurence, for example, discussed studies showing
that it is extremely difficult, though not impossible, to infect animals with HIV by
rubbing virus into their gums. New Mexico Department of Health epidemiologist
Dr. Michael Samuel, using data from a number of San Francisco studies to discuss
what he called "infectivity," estimated the odds of HIV infection from receptive oral
sex to be as high as 1 in 100 for gay and bisexual men with a single sex partner.
"Working with a large cohort, our model shows rates of infection through receptive
oral sex to be significantly higher than those published in other epidemiological
literature," said Dr. Samuel.
Doctors and researchers were followed by a panel of AIDS educators and community members who put the data in personal and practical perspective. "HIV education has never gotten past the notion of high-risk sex, and has let down everyone trying to figure out what to do when a condom is irrelevant or literally distasteful," said Sally Cooper, Executive Director of the People with AIDS Health Group. "We make low-risk choices all the time, like running across the street against the light, and our education programs need to start helping people cope with those ambiguous situations." Others, like Richard Elovich from Gay Men's Health Crisis, suggested that ten years of AIDS education have created safer sex 'norms,' but may also have embarrassed people into silence. "It's easy to talk about latex, but difficult to talk about the sex we're really having," he says. "Effective education in the second decade will have to create a safe space for people to talk about the magical thinking that makes me say 'this person is so hot he must be safe,' or 'if I don't go down on this man, he'll lose interest in me.'"

Gay Men's Health Crisis is the nation's oldest and largest AIDS service, education and advocacy organization. GMHC provides direct services to more than 4,800 men, women and children with AIDS annually, educates tens of thousands about HIV prevention and treatment, and fights for fair effective policy on city, state and federal levels.

Columbia Gay Health Advocacy Project is a volunteer AIDS service organization that provides the Columbia University community with AIDS education programs, HIV and safer sex counseling, anonymous HIV antibody testing, medical treatment and support services through the HIV Clinic of the University Health Service, and help against harassment and discrimination.

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