Anal sex: An 'extraordinary taboo'

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ABSTRACT

In their study of 306 men and women with anal cancer, 88 percent of patients tested positive for the human papillomavirus (HPV), leading [Janet R. Daling, PhD] and her co-authors to conclude that the virus was a "necessary cause of anal cancer, similar to that of cervical cancer." The researchers also noted that "increases in the prevalence of exposures, such as cigarette smoking, anal intercourse, HPV infection, and the number of lifetime sexual partners, may account for the increasing incidence of anal cancer."

The study, published in the Journal of Pediatric Adolescent Gynecology in 2007, focused on the sexual health histories of 350 "sexually experienced" females between the ages of 12-18. The frequency of anal sex among these girls was 16 percent for teens with "main partners" and 12 percent for those with only "casual partners."

"What this does is take away all the assumptions," [Smith] said. "If you're doing sexual health testing, you need to know what [patients] are doing. I don't care if they are gay, straight or bi. If you're receiving anal sex, you're at risk for anal HPV."

FULL TEXT

Before becoming a certified HIV nurse practitioner, Teresa Schultz of Rochester, N.Y., believed her patients would be gay men. After all, they were the ones having anal sex and in need of the skills she had developed in performing anal pap smears and removing anal lesions, which sometimes develop into cancer.

But they weren't the only ones who sought her out.

"I have a lot more straight women [as patients] than I ever expected," said Schultz, RN, MS, NP.

That's because data suggests anal intercourse is becoming more popular among women.

In 1994, the landmark University of Chicago study "The Social Organization of Sexuality Practices in the United States" reported that only about 1 in 10
heterosexual couples had engaged in anal intercourse.

Ten years later, the National Survey of Family Growth (NSFG), a study sponsored by the Centers for Disease Control and Prevention, found that about 1 in 3 heterosexual couples had anal sex.

A more recent analysis of NSFG data found the rate of anal sex to be 22 percent for 18-26-year-old heterosexual couples in a "sexual relationship of at least three months duration." ("What's Love Got to Do With It? Sexual Behaviors of Opposite-Sex Couple Through Emerging Adulthood," by Christing Kaestle and Carolyn Halpern in Perspectives on Sexual & Reproductive Health, Sept. 2007)

"It's clearly happening," said Ann Laros, MD, a gynecologist at University of Iowa Student Health in Iowa City.

One of Laros' patients said she practiced anal sex with her male partner because she wanted to remain a virgin until marriage. Another University of Iowa student simply enjoyed it, saying she reached orgasm quickly that way.

"This idea that heterosexual sex is strictly vaginal-penile is just false," said Jim Pickett, director of advocacy at the AIDS Foundation of Chicago. "People of all sexualities engage in anal sex. It's more common that we want to acknowledge."

But acknowledging anal isn't easy. The idea of fingering or licking a partner's anus, let alone engaging in anal intercourse, makes many people queasy. Despite the millions of Americans who have tried it or do it regularly, anal sex carries the stigma of the forbidden.

"If I am a woman and I like sex I am seen as bad," said Jo Robinson, an HIV specialist at the Terrance Higgins Trust in London. "If I am a woman who likes lots of sex, I am seen as a whore. If I am a woman who likes anal sex then I am seen as bad, dirty and a whore."

Robinson made her comment on the website of the International Rectal Microbicide Working Group (IRMWG). The 500-member organization is pushing scientists to develop a gel, cream or other substance that would allow anal sex lovers to rely on something other than condoms to shield them from infectious diseases.

"Many men and women around the world practice anal intercourse. Much of that is unprotected," states the group's site, irmwg.org. "Don't we all deserve more than one way to protect ourselves from HIV and STDs during anal sex, beyond latex?"

Tackling such a topic is tough.

"It's an extraordinary taboo," said Pickett, who also chairs the IRMWG. "Even gay men are often loath to talk about it. Most of the medical establishment doesn't ask about these things. It's swept under the rug."

Anal cancer

That hush-hush attitude towards anal sex may be affecting rates of anal cancer and HIV/AIDS.
Although anal cancer remains a rare disease, affecting just 2 of every 100,000 Americans, the disease isn't as uncommon as it once was. According to "Human Papillomavirus, Smoking, and Sexual Practices in the Etiology of Anal Cancer," a 2004 study published in Cancer, a peer-reviewed medical journal, anal cancer rates increased 160 percent for men and 78 percent for women between 1973 and 2000.

"Among men who were not exclusively heterosexual and women, receptive anal intercourse was related strongly to the risk of anal cancer," wrote Janet R. Daling, PhD, an epidemiologist at the Fred Hutchinson Cancer Research Center in Seattle, and several co-authors.

The American Cancer Society reports that in the past seven years, the incidence of anal cancer has continued to increase. The group's website lists 4,660 new anal cancer cases in 2006, an increase of 14 percent from the previous year. Women represent the majority of those new anal cancer cases: 2,750 in 2006 compared to 1,910 in 2006 for men.

In their study of 306 men and women with anal cancer, 88 percent of patients tested positive for the human papillomavirus (HPV), leading Daling and her co-authors to conclude that the virus was a "necessary cause of anal cancer, similar to that of cervical cancer." The researchers also noted that "increases in the prevalence of exposures, such as cigarette smoking, anal intercourse, HPV infection, and the number of lifetime sexual partners, may account for the increasing incidence of anal cancer."

Abnormal anal lesions are tiny precancerous or cancerous cells that are difficult to detect. With the help of anal pap smears and a tool called an anoscope, specially trained medical professionals such as Schultz, the New York-based nurse practitioner, can help those at risk for anal cancer from getting the disease.

"People who come to me are pretty scared," Schultz said.

Many of her patients suffer from pain, bleeding and warts. And some believe their current partner is to blame for infecting them with HPV that may lead to cancer. In fact, HPV can lay dormant for years, or even decades, before becoming problematic.

That's why P. Davis Smith, MD, medical director at Davison Health Center at Wesleyan University recommends patients who have unprotected anal sex get an anal pap smear "at some appropriate interval beginning three years after the first event."

But finding a qualified medical professional to perform, analyze and treat problems related to unprotected anal sex isn't easy. Not many doctors or nurse practitioners have been trained.

"Some people say we need data to do anal pap smears to save lives," said Schultz. "But those kind of studies weren't done before docs started performing cervical pap smears."

Mistaken beliefs about HPV/AIDS risk

Anal cancer isn't the only risk associated with anal sex. Like men, women can contract HIV by engaging in receptive anal intercourse. Yet, one study suggests
that many female teens don't understand this risk.

In "More Than Just Vaginal Intercourse: Anal Intercourse and Condom Use Patterns in the Context of 'Main' and 'Casual' Sexual Relationships among Urban Minority Adolescent Females," Avril Melissa Houston, MD, MPH, and co-authors found that while 96 percent of teen girls believed they get HIV/AIDS from vaginal intercourse, 1 in 5 girls didn't think they could get HIV/AIDS when engaging in anal intercourse.

"This belief is reflected in the fact that condom use during heterosexual anal intercourse is lower than condom use during anal sex among men who have sex with men," wrote Houston, a professor at the University of Maryland School of Medicine.

The study, published in the Journal of Pediatric Adolescent Gynecology in 2007, focused on the sexual health histories of 350 "sexually experienced" females between the ages of 12-18. The frequency of anal sex among these girls was 16 percent for teens with "main partners" and 12 percent for those with only "casual partners."

Next steps

Sexual health histories are an important part of Smith's practice. Most of his Wesleyan University patients are men and in recent years, the physician has changed the way he asks questions regarding sexuality.

Instead of asking patients about the gender of their partners or their sexual orientation, Smith asks about the number of partners they've had since their last visit (or in their lifetime) and how many of these encounters were oral, vaginal or anal. He also asks whether the patient was the performer or recipient and whether the act was protected or unprotected.

"What this does is take away all the assumptions," Smith said. "If you're doing sexual health testing, you need to know what [patients] are doing. I don't care if they are gay, straight or bi. If you're receiving anal sex, you're at risk for anal HPV."

In the fight for a healthier anal sex life, the advocates at IRMWG are issuing reports ("Rectal Microbicides: Investments & Advocacy," April 2006), hosting public discussions ("The Future of Anal Sex: What Every Booty Should Know," October 2006 at the Boston Public Library) and doing what they can to raise awareness and push for more research.

Which, they say, is lacking.

In that 2006 report, Osmond D'Cruz, a researcher at Parker Hughes Institute, is quoted as saying, "At present, this area is just a side project of vaginal microbicides."

To say that the field of medical anal health is emerging is an understatement. At present, there are no guidelines for physicians to insist that patients with a history of unprotected anal sex get tested for HPV, so most don't ask.

"I generally don't prompt that question," said Laros, the Iowa gynecologist. "One of the reasons I don't is there's not a lot of data or literature out there
to say it's safe or unsafe."

That's a problem, said Doreen Hardy, a doctoral student at Widener University. Hardy, MEd presented a workshop on the topic of women's anal sexual health at the 2007 AASECT conference.

"There is an unrecognized stalemate when it comes to female anal sexuality," Hardy said. "Doctors do not ask, patients do not tell and educators gloss over. This stalemate has contributed to the dearth of information on female anal sexuality and could contribute to increased risk for undetected anal sexually transmitted infections and anal cancer."

Hardy also believes society needs to change the way it views anal sex. At the moment, she said, "the anus is a abject, not even worthy of objectifying."

Added Hardy, "The anus eludes study because it is banished to a 'black hole' of irrational denial. With the exception of language by or about the gay male population, the culture does not speak about the anus openly; we either joke or become hushed."

- Todd Melby

SIDEBAR

Anal cancer rates are up, talk about anal sex isn't

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SIDEBAR

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