**“What do those affected think about testing men who have sex with men for sexually transmitted infections less often?”**

**Findings from:** Understanding to acceptability and perceived benefits and harms of reducing screening frequency for STIs among gay, bisexual and other men who have sex with men (GBMSM).

### What was the study about?

Currently, testing for sexually transmitted infections (STIs) is recommended once every three months to men who have sex with men who are having condomless sex or new sexual partners, due to their increased risk of getting an STI. An advantage of this is that it detects STIs in people who do not have symptoms and might not know that they are infected. However, the current approach of testing and treating people does not appear to be reducing the number of new infections. There is also evidence that treating infections without symptoms can lead to antimicrobial resistance, where antibiotics become less effective at treating diseases. As a result of this many countries have reduced how often they test men who have sex with men for STIs, but we do not know how people who are involved with or affected by this change feel.

### Why is this important?

It is important to know what people think about reducing how often men who have sex with men are tested for STIs, so we can help people feel more comfortable with this.

### What did we do?

We held interviews with 22 men who have sex with men and 8 professionals whose work relates to the sexual health of men who have sex with men who would be involved with or affected by the changes. We used a framework to help us see what we can do to help people feel comfortable about this change.

### Key findings

- Overall, men who have sex with men thought that stopping testing is not a good idea, but opinions from professionals varied.

- Reducing the testing from every 3 months to every 6 months was generally easier for both groups to accept.

- Things that made people opposed to reduced testing included not knowing all the information, worries about what other people think, thinking there would be negative effects on their health or relationships and difficulty with changing how things are done currently.

- Things that made people in favour of reducing testing included providing information to people involved with or affected by the change and having discussions with men who have sex with men.

### What do these findings mean?

These findings will be used to provide ways to reduce any negative impact from reduced testing and to make people feel more comfortable about the changes. This will guide the national response to STI prevention, clinical practice and public health policy.

**Related publication not already linked to project:**
https://doi.org/10.1136/sextrans-2025-056556