

Oral Sex and HIV*

Fact Sheet

Oral Sex is Not Considered Safe Sex

Like all sexual activity, oral sex carries some risk, particularly when one partner or the other is known to be infected with HIV, when either partner's HIV status is not known, and/or when the other partner is not monogamous or injects drugs. **Numerous studies have shown that oral sex can result in the transmission of HIV and other sexually transmitted diseases (STDs).** Abstaining from oral, anal, and vaginal sex altogether or having sex only with a mutually monogamous, uninfected partner are the only ways that individuals can be completely protected from the sexual transmission of HIV.

Oral Sex is a Common Practice

Oral sex involves giving or receiving oral (mouth) stimulation (i.e. sucking or licking) to the penis, the vagina, and/or the anus. Fellatio is the technical term used to describe oral contact with the penis. Cunnilingus is the technical term that describes oral-vaginal sex. Anilingus (sometimes called "rimming") refers to oral-anal contact. Studies indicate that oral sex is commonly practiced by sexually active male-female and same-gender couples of various ages, including adolescents. Although there are only limited national data about how often adolescents engage in oral sex, some data suggest that many adolescents who engage in oral sex do not consider it to be sex; therefore they may use oral sex as an option to experience sex while still, in their minds, remaining abstinent. Moreover, many consider oral sex to be a safe or no risk sexual practice. A national survey of teens conducted in 2000 for The Kaiser Family Foundation found 26% of sexually active 15 to 17 year olds surveyed responded that one "cannot become infected with HIV by having unprotected oral sex," and an additional 15% didn't know whether one could become infected in that manner.

Oral Sex and the Risk of HIV Transmission

The risk of HIV transmission from an infected partner through oral sex is much smaller than the risk of HIV transmission through anal or vaginal sex. Because of this, measuring the exact risk of HIV transmission as a result of oral sex is very difficult. In addition, since most sexually active people practice oral sex in addition to other forms of sex, such as vaginal and/or anal sex, when transmission occurs, it is difficult to determine whether or not it occurred as a result of oral sex or other more risky sexual activities. Finally, several co-factors can increase the risk of HIV transmission through oral sex, including: oral ulcers, bleeding gums, genital sores, and the presence of other STDs.

When scientists describe the risk of transmitting an infectious disease like HIV, the term "theoretical risk" is often used. Very simply, "theoretical risk" means that passing an infection from one person to another is *possible*, even though there may not yet be any actual documented cases. "Theoretical risk" is not the same as *likelihood*. In other words, stating that HIV infection is "theoretically possible" does not necessarily mean it is likely to happen – only that it might. Documented risk, on the other hand, is used to describe transmission that has actually occurred, been investigated, and documented in the scientific literature.

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*Adapted from the Centers for Disease Control and Prevention HIV/AIDS Update, "Preventing the Sexual Transmission of HIV, the Virus that Causes AIDS: What You Should Know About Oral Sex" December 2000.

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Continued from other side

Theoretical and Documented Risk of HIV Transmission During Oral-Penile Contact	Theoretical and Documented Risk of HIV Transmission During Oral-Vaginal Contact	Theoretical and Documented Risk of HIV Transmission During Oral-Anal Contact
<p>Theoretical: In fellatio, there is a theoretical risk of transmission for the receptive partner (the person who is sucking) because infected pre-ejaculate (“pre-cum”) fluid or semen can get into the mouth. For the insertive partner (the person who is being sucked), there is a theoretical risk of infection because infected blood from a partner’s bleeding gums or an open sore could come in contact with a scratch, cut, or sore on the penis.</p> <p>Documented: Although the risk is many times smaller than anal or vaginal sex, HIV has been transmitted to receptive partners through fellatio, even in cases where the insertive partners didn’t ejaculate (“cum”).</p>	<p>Theoretical: Cunnilingus carries a theoretical risk of HIV transmission for the insertive partner (the person who is licking or sucking the vaginal area) because infected vaginal fluids and blood can get into the mouth. This includes, but is not limited to, menstrual blood. Likewise, there is a theoretical risk of HIV transmission during cunnilingus for the receptive partner (the person who is having her vagina licked or sucked) if infected blood from oral sores or bleeding gums comes in contact with vaginal cuts and sores.</p> <p>Documented: The risk of HIV transmission during cunnilingus is extremely low compared to vaginal and anal sex. However, there have been a few cases of HIV transmission most likely resulting from oral-vaginal sex.</p>	<p>Theoretical: Anilingus carries a theoretical risk of transmission for the insertive partner (the person who is licking or sucking the anus) if there is exposure to infected blood, either through bloody fecal matter (bodily waste) or cuts/sores in the anal area. Anilingus carries a theoretical risk to the receptive partner (the person who is being licked/sucked) if infected blood or saliva comes in contact with anal/rectal lining.</p> <p>Documented: There has been one published case of HIV transmission associated with oral-anal sexual contact.</p>

Other STDs Can Also Be Transmitted from Oral Sex

Scientists have documented a number of other sexually transmitted diseases that have also been transmitted through oral sex. Herpes, syphilis, gonorrhea, genital warts (HPV), intestinal parasites (ambiasis), and hepatitis A are examples of STDs which can be transmitted during oral sex with an infected partner.

Reducing the Risk of HIV Transmission from Oral Sex

The consequences of HIV infection are life-long, life-threatening, and extremely serious. You can lower any already low risk of getting HIV from oral sex by using latex condoms each and every time. For cunnilingus or anilingus, plastic food wrap, a condom cut open, or a dental dam can serve as a physical barrier to prevent transmission of HIV and many other STDs. Because anal and vaginal sex are much riskier and because most individuals who engage in unprotected (i.e. without a condom) oral sex also engage in unprotected vaginal or anal sex, the exact proportion of HIV infections attributable to oral sex is unknown, but is likely to be very small. This has led some people to believe that oral sex is completely safe. **It is not.**

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