Condoms

Key Points

- Condoms are a highly effective strategy to reduce the risk of the sexual transmission of HIV.
- Condoms work by reducing a person’s risk of being exposed to bodily fluids that may contain HIV.
- Condoms are the only highly effective HIV prevention strategy that also reduces the risk of other sexually transmitted infections (STIs).

The consistent and correct use of condoms is a highly effective strategy to reduce the risk of the sexual transmission of HIV. When condoms are used consistently and correctly, the risk for HIV transmission is very low.

Condoms provide a barrier that can prevent the vagina, penis, rectum and mouth from being exposed to bodily fluids (such as semen, vaginal fluid and rectal fluid) that can contain HIV. Condoms also help to protect against other STIs and pregnancy.

There are two types of condoms available: internal (sometimes referred to as female) or external (sometimes referred to as male). External condoms are usually made of latex, polyurethane or polyisoprene, and they are put over the penis before vaginal, anal or oral sex. Some external condoms are made of lambskin (sheep’s intestines), but this type of condom does not provide protection from HIV or other STIs. Internal condoms are made of polyurethane or nitrile, and they are inserted into the vagina or rectum before sex.

Condoms can fail to prevent an exposure to HIV if they break, slip or leak during use. A break, slip or leak during condom use is known as condom failure. Condom failure can reduce the ability of condoms to prevent HIV transmission. However, research has found that rates of condom failure are relatively low. External condoms were found to break, slip or leak between 0.4% and 6.5% of the time. Internal condoms were found to break or slip between 0.1% and 5.6% of the time.

Research shows that rates of condom failure decrease with more frequent condom use, suggesting that over time people learn to use condoms correctly and this reduces failure rates. However, condom failure can happen even when condoms are used correctly.

Correct use of condoms means they are used with sufficient (and appropriate) lubricant, as this can decrease friction that can cause condom failure. Water- and silicone-based lubricants are safe to use with all condoms. Oil-based lubricants such as Vaseline or baby oil should not be used as they can degrade condoms and increase the risk of condom breakage.

Observational studies of external condoms have been conducted among serodiscordant couples (in which one partner is HIV positive and the other is HIV negative). These studies looked at the rates of HIV transmission among heterosexual and gay male couples who reported always using condoms compared to couples who said they never use condoms. From these studies, it is estimated that the effectiveness of consistent condom use at preventing HIV transmission ranges between 69% and 94%. However, in these studies it was not possible to verify whether condoms were always used properly. It is likely that the effectiveness of condoms is higher than these estimates when used consistently and correctly.

Condoms are a highly effective strategy for reducing the risk of the sexual transmission of HIV when used consistently and correctly. However, observational studies suggest that a high level of effectiveness may be difficult to achieve for some people.

Resources
CATIE statement on the use of condoms as a highly effective strategy to prevent the sexual transmission of HIV

Condoms for the prevention of HIV – CATIE fact sheet

Condoms and Other Physical Barriers

Sources


Disclaimer

Decisions about particular medical treatments should always be made in consultation with a qualified medical practitioner knowledgeable about HIV- and hepatitis C-related illness and the treatments in question.

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