Since 2002 sexually transmitted hepatitis C virus (HCV) reinfection has been increasingly described in men who have sex with men (MSM) who are coinfected with the human immunodeficiency virus (HIV). This retrospective analysis included patients who were diagnosed at four major German HIV and hepatitis care centers. HCV reinfection was defined by one or more of the following conditions: genotype switch, cladeswitch, detectable viral load after sustained virological response at each episode (SVR1, SVR2) or at least 6 months of undetectability after spontaneous clearance (SC1, SC2). Results: In total, 45 HIV positive MSM were identified with sexually acquired HCV reinfection, among them seven with a third episode and one patient with four episodes. At the first episode, 40 and 5 patients had a SVR1 or SC1, respectively. The second episode was observed after a median time of 34 months and was accompanied by a genotype switch in 26 (58%) patients. At the second episode, 18 and 7 patients had a SVR2 or SC2, respectively. A further 12 patients chronified while data were pending in 8. SC2 rates were higher for patients with SC1 compared to patients without SC1 (60% versus 10%, p=0.02). Two patients with SC1 were reinfected with the same genotype. Peak levels of HCV RNA and liver enzymes showed a non-statistical trend towards lower levels at the second episode. Conclusions: The high number of sexually acquired HCV reinfections in the setting of HIV coinfection underlines the need for enhanced risk behavior counseling. Despite a high rate of genotype switches, our data does not support the concept of immune protection in HCV reinfections.