

Change policy that bans blood donations from men who have sex with men

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It is time to change the policy that bans blood donations in Canada from all men who have sex with men, states an article in *CMAJ* (*Canadian Medical Association Journal*).

Since 1983, blood agencies in Canada, the United States and other industrialized countries have disallowed blood donations from men who have sex with men because of the possibility of infection with [HIV](#) /AIDS. The exclusion barred men who had sex with men from 1977 onwards as it was determined this date preceded the start of the AIDS epidemic.

Prospective [blood donors](#) are required by Canadian Blood Services and Hema-Quebec (and blood agencies in other countries) to complete a questionnaire about medical history and potentially harmful behaviour. Intravenous drug users, people with possible exposure to Creutzfeld-Jakob disease, people who have exchanged money for sex or drugs and men who have sex with men are all permanently deferred from giving blood.

However, while some industrialized countries such as France, Germany, the US and Canada have lifetime deferrals, others have shorter deferral periods: one year in Argentina, Australia, Japan, Hungary and Sweden, five years in South Africa and 10 years in New Zealand.

In 2005, an estimated 5.4% of homosexuals and bisexuals in Canada were HIV- positive, 67-fold greater than the general population.

However, more than 95% of homosexuals and bisexuals in Canada are not HIV-positive.

The risk of a false negative, one reason for the ban, has been almost eliminated.

"With the development of more sensitive HIV detection tests, the potential occurrence of a false-negative result is now remote, since the system no longer relies exclusively on either the enzyme-linked immunosorption assay (ELISA) introduced in 1985 or the more accurate confirmatory Western blot test, also introduced in 1985," writes Dr. Mark Wainberg, McGill University AIDS Centre, Jewish General Hospital with coauthors.

A significant benefit to reducing the deferral period for men who have sex with men would be the enlargement of the blood donor pool. A one-year deferral would result in a risk of one HIV positive unit of blood being undetected in every 11 million units of blood. Another option would be a five-year deferral which in the US would result in 71,400 more donors.

"Current policy is counterproductive in regard to loss of donors, good will, student protests, potential boycotts, lawsuits etc.," conclude the authors. "It should be noted that policy, has, in fact, changed to now permit donations from persons of Haitian origin. It's time to change policy again."

More information: www.cmaj.ca/cgi/doi/10.1503/cmaj.091476

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