

Why the FDA should lift the blood donation ban on sexually active gay men

June 14 2016, by Jason Silverstein



Matt Buck, University of Nottingham's LGBT Society demonstrates against the National Blood Service, February 25, 2010. CC BY-SA 2.0

On June 12, following the mass shooting at Pulse, a gay dance club in Orlando, Florida, sexually active gay men were denied the chance to donate blood to members of their community, because of the FDA's arbitrary and unnecessary ban on blood donation by any man who has had sexual contact with another man in the previous year.

Between 1983 and December 2015, the FDA recommended a lifetime ban on [blood](#) donations by gay men. (To be more precise, they banned any man who had [sexual contact](#) with another man since 1977, which stemmed from concern over HIV infection.) In December 2015, a little over a year after the Advisory Committee on Blood and Tissue Safety of

Department of Health and Human Services voted to modify the ban, the FDA opened the door with a catch: gay men may donate blood, if they haven't been sexually active in the previous twelve months.

You might wonder where they came up with 12 months. After all, HIV and Hepatitis B can be [detected](#) much sooner. In this case, as they report in their [guidelines](#), the FDA was following the lead of seven other countries—Argentina, Australia, Brazil, Hungary, Japan, Sweden, and United Kingdom. But the main epidemiological data came from Australia. They, too, had a lifetime ban, which was switched to a one-year deferral.

Did the switch from a lifetime ban to a one-year deferral threaten the [blood supply](#)? No. In a 2010 study, researchers "found no evidence that the implementation of the 12-month deferral for male-to-male sex resulted in an increased recipient risk for HIV in Australia." But switching to the one-year deferral did seem to have an effect on Australia's blood supply: the number of donations increased by 939,057.

But why should we have a sweeping ban on sexually active gay men at all? Does it really make scientific sense to prevent a man in a monogamous relationship with another man from donating blood? Try this. Fill in the blank: "A married (straight/gay) person has only had sex with their spouse in the last twelve months. They (can/can not) donate blood." Can anyone really justify why there should be a difference?

A better alternative is individual risk assessment followed by routine testing. (A 2014 JAMA [essay](#) called this model "assess and test.") In 2001, Italy changed their [blood donation](#) policy from a lifetime ban to an individual risk assessment of sexual behavior. Here is the basic design: when a person wants to donate blood, they fill out a questionnaire and have an interview with a physician about their risk exposures. Then, the person is categorized as not at risk, at risk, or high risk. If the potential

blood donor is considered at risk (say, if they had sex with someone new whose sexual history was unknown), they are deferred for 4 months, when they are eligible to be screened again.

Did Italy's new policy contaminate the blood supply? No. In a 2013 [study](#), Barbara Suligoj of Italy's National Institute of Health AIDS Unit and her colleagues compared the period before and after implementation. They found that "the implementation of the IRA [individual [risk assessment](#)] policy in 2001 did not significantly affect either the incidence or prevalence of HIV infection among blood donors."

It is, by definition, homophobic to assume that every gay man is a danger. There is no scientific evidence to justify the blanket ban on sexually active gay men or to require twelve months of abstinence in order to donate a pint of blood. On the other hand, Ayako Miyashita and Gary Gates at UCLA [estimate](#) that "lifting the ban could increase the total annual blood supply by 2%-4%, adding from 345,400 to 615,300 pints of blood each year" and more than 350,000 men would be likely to donate.

The FDA's ban on sexually active [gay men](#) is fundamentally flawed, because it assumes that sexual orientation itself is unsafe. It isn't. What is unsafe is turning away hundreds of thousands of otherwise eligible blood donors.

This story is republished courtesy of PLOS Blogs: blogs.plos.org.

Provided by Public Library of Science

Citation: Why the FDA should lift the blood donation ban on sexually active gay men (2016, June 14) retrieved 27 June 2024 from <https://medicalxpress.com/news/2016-06-fda-blood-donation-sexually-gay.html>

This document is subject to copyright. Apart from any fair dealing for the purpose of private study or research, no part may be reproduced without the written permission. The content is provided for information purposes only.