Why can't men who have sex with men (MSM) donate blood? [1]

Dear Alice,

This week, my school hosted a blood drive. Gay men were not allowed to donate. I was so repulsed by this that I, a female friend, refused to donate just on principle. Is there some reason why gay men are still excluded from blood drives? Are they still so much more likely to be HIV positive than heterosexuals? Is this a policy from a time before blood screening was required? Someone said it was some sort of economic benefit. It seems to me that the amount of blood they would get from including such a huge percentage of the population would make up for the maybe one percent (this is what I'm unsure of) that they had to take, screen, and eliminate. There's such a shortage of blood donated in the U.S. Why are we refusing so much healthy blood?

Thanks,

? Frustrated First-Year

Answer

Dear Frustrated First-Year,

The policy that you encountered at the blood drive has existed nationally since 1983 when men who have sex with men (MSM) were among the populations most affected by HIV/AIDS and a HIV blood-screening test had yet to be developed. At this time, research indicates that MSM in the U.S. are still a higher-risk population for HIV transmission. But, times have changed in the last 30 years - most notably, in December 2015, the U.S. Food and Drug Administration (FDA) [2] released updated donor recommendations informed by scientific research. Now, MSM will no longer be banned indefinitely from donating blood. Instead, there will be a twelve-month deferral (mandatory wait period) following the last sexual contact with another man. Though the FDA has taken the first steps in modifying the previous policy, the new guidance doesn’t specify how quickly these changes will take effect nationwide.

The catalyst behind the updated recommendations came from comprehensive studies, epidemiological data, evidence from other countries, and public feedback. The former policy, which indefinitely banned MSM from donating blood, was becoming less effective over time and, as you voiced, it was also found by some to be discriminatory. Before issuing updated recommendations, the FDA considered numerous possible policies for MSM including
keeping the existing policy, deferrals ranging from five to less than one year. Pretesting potential donors and deferral based on an individual risk assessment were also considered. The final decision to institute a twelve-month deferral was based on evidence from several countries including the United Kingdom, Australia, and Japan, as each of these countries already had twelve-month deferral policies in place. Research from Australia was particularly informative when the MSM blood donation policy in Australia was updated from an indefinite ban to twelve-month deferral, studies on over eight million units of blood demonstrated no change in HIV risk to the blood supply. The updated MSM deferral period in the U.S. also aligns more closely to the recommended deferral length for other higher-risk infection groups, such as people who recently had a blood transfusion or those who have been accidentally exposed to another person’s blood.

Frustrated First-Year, you may be wondering why there’s a need to implement a deferral period at all. It’s true that all blood donated in the U.S. is screened for HIV and HIV blood detection tests can now report results in much less time. The reason behind the deferral has to do with the higher rate of HIV transmission among MSM as compared to other populations. Although MSM comprise a small percentage of the U.S. male population, they account for a larger percentage of adults with existing and newly diagnosed HIV infections. In 2010, the Centers for Disease Control and Prevention (CDC) reported that most new HIV infections were attributed to MSM contact, which suggests that MSM sexual contact may be associated with higher risk of HIV exposure.

You’re far from the first to express frustration towards the past MSM donation policy, but it’s good to keep in mind that progress, especially at the policy-level, can be slow. Even with the updated FDA guidelines, it may take a few months for the change to be implemented at licensed organizations such as the American Red Cross. If you’d like to learn more about blood donation eligibility and keep up with any new developments, check out the American Association of Blood Banks.

Alice!

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