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EDITORIALS

Blood donation in men who have sex with men

The UK's new policy of one year deferral needs a clear communication strategy

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In the linked study (doi:10.1136/bmj.d5604), Grenfell and colleagues present the views and experiences of men who have sex with men (MSM) regarding the blood donation ban and proposed alternatives. The United Kingdom is changing the lifetime ban on men who have oral or anal penetrative sex with other men to a deferral period of one year from the last episode of penetrative sex. This change will take effect on 7 November 2011, which makes the implications of the study findings especially timely.

The first case of transfusion associated AIDS was reported in 1982. MSM had relatively high rates of infection, but blood collectors and regulators were slow to implement deferrals for fear of stigmatising gay men. This dilatory response has been characterised as a lamentable error of judgment.² In 1985 the UK and the United States both implemented a lifetime blood donation ban on men who have penetrative sex with men. With current deferrals and laboratory testing, HIV transmitted by transfusion is extremely rare. Because many believe that laboratory testing is infallible, ¹ blood centres have been accused of being discriminatory in maintaining the ban.

Grenfell and colleagues found that MSM dislike the ban and that the compliance rate is 89%, which is lower than the 95-99% compliance rates reported elsewhere. 1 3 4 Reasons for non-compliance include infallibility of testing, confidence in HIV negativity, confusion about deferral criteria, and resentment over the discriminatory ban. Lack of understanding of deferral criteria was a major cause of non-compliance. Only 25% of men were aware that having penetrative sex with another man barred donation, and 33% believed that only penetrative sex without condoms excluded donation. Another study showed that 23% of donors believe that deep kissing is sex and 45% believe that touching another man's genitals constitutes sex. 5 In the present study, men who had sexual contact with a man but not penetrative sex erroneously believed that they were ineligible to donate, when, in fact, non-penetrative activities such as genital touching and mutual masturbation do not disqualify donors. ¹The five year deferral was viewed as "tokenistic," but the one year deferral was thought to be acceptable and "a step in the right direction."1

So what are the next steps? Most MSM are sexually active and will continue to be barred from donating. Indeed, the number

of newly eligible donors will be small.⁶⁷ The next step preferred by many MSM would be to institute detailed, non-biased, gender neutral questions that focus on activities such as condom use and number of sexual partners.¹⁴ A weakness of this approach is that it ignores the epidemiological importance of the much greater prevalence of HIV in MSM. Such questions would need development and validation, and they may be impractical and cost prohibitive. In addition, many MSM who dislike the ban also find probing questions unacceptable.⁸

The UK authorities should heed the study's findings in communicating the change in the lifetime ban to a 12 month deferral. Those who have complied with the previous ban indicate that their behaviour will not change but are reluctant to speculate on the compliance of other MSM. The authors caution that they cannot accurately predict how donation behaviour may change under revised criteria. Creative messages must emphasise that men who engage in penetrative sex with other men are still deferred for a year but that others are free to donate. Study participants advocated broad advertising strategies with targeted messages to MSM. Poorly crafted notifications could leave some with the misconception that the deferral has been completely lifted and all MSM may now donate.

The UK will monitor any new cases of HIV in the blood supply attributable to this change and must be ready to quickly revise the deferral. In 2010, the US government convened a two day conference examining the scientific and societal implications of changing the ban and came to a different conclusion, voting to continue the lifetime deferral. Countries maintaining the ban should carefully examine data from the UK and use them to frame future policies.

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