Raising Awareness
FDA’s Policy on Blood Donation by Men who have Sex with Men

Frequently Asked Questions

What is FDA's policy on blood donations from men who have sex with other men (MSM)?

FDA policy on blood donations from MSM originates from the beginning of the AIDS epidemic in 1977. At that time, the FDA concluded that MSM are, as a group, at increased risk for HIV, hepatitis B and certain other infections that can be transmitted by transfusion. Over the past years, the FDA gathered evidence to support the change from indefinite deferral to a 12-month blood donor deferral to the current 3-month deferral policy for MSM.

Why does the FDA have a 3-month deferral policy for men who have had sex with men to donate blood?

A history of male-to-male sex is associated with an increased risk for the presence and transmission of certain infectious diseases, including HIV, the virus that causes AIDS. FDA's policy is intended to protect all people who receive blood transfusions from an increased risk of exposure to potentially infected blood and blood products.

We are hopeful the FDA will continue to update policies as additional evidence emerges. Please visit The Revised Recommendations for Reducing the Risk of Human Immunodeficiency Virus Transmission by Blood and Blood Products for additional information from the FDA.

Is the Federal Ban on MSM blood donation discriminatory?

According to The Human Rights Campaign (HRC), the current policy does not treat persons with like risks in a similar way. HRC believes that donors are deferred based on their membership in a group — in this case, all men who have sex with men — rather than engagement in high-risk behaviors, such as unprotected sex. For example, a man who has had protected oral sex with another man in the past 3 months and has not engaged in sex since that time is deferred from donating blood. Yet a woman who has had unprotected sex with multiple partners over the past 3 months with no knowledge of their personal histories remains in the donor pool.

HRC believes that the integrity and safety of the blood supply in this country must be preserved, strengthened and maintained, and that any change or alteration in the regulations governing donor suitability must be based on sound science. HRC proposes that the federal government invest in new research to study high-risk behavior, and then based on the findings, consider revising the donor eligibility requirements to focus on more refined and specific behavioral criteria which affect the prevalence of blood-borne diseases.

http://www.hrc.org

This is NOT a UCLA or UC policy nor is it a policy of the UCLA Blood & Platelet Center. This is a FEDERAL policy. To make your voice heard about blood donation policy, contact:
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