A safe, reliable source of blood and blood products to meet the needs of patients in Scotland is the first and most important priority of the Scottish National Blood Transfusion Service (SNBTS). This includes a clear public duty to minimise the risk of a blood transfusion transmitting any infection to patients.

It is important that the policies which are in place to help protect the safety of the blood supply are based on the best available scientific evidence, reviewed on a regular basis and explained clearly to the public.

The criteria across all of the UK Blood Services for accepting blood donors on the basis of virus risk are regularly reviewed by the Advisory Committee on the Safety of Blood, Tissue and Organs (SaBTO). SaBTO has carried out a review of the blood donor selection criteria related to sexual behaviour:


The review examined the latest scientific research findings, including:

- The frequency of infections detected by blood donation tests and information gathered during screening on the likely causes of infections.
- The effectiveness of current testing platforms and technological improvements in testing and the ability to detect early infection.
- The risk of HIV transmission through blood and blood product transfusion, and whether different donor selection criteria would alter the risk, based on data collected by the UK Services and the Health Protection Agency (HPA).
- Identification of potential donors who are most likely to have had sexually transmitted infections that might harm blood recipients.
• Research into the current level of compliance with the permanent exclusion and the impact of any change to the selection criteria.

As a result, the Health Ministers of Scotland, England and Wales have taken the advice of SaBTO and agreed that the blood donor selection criteria for men who have sex with men in the UK should change.

The main change is that men whose last sexual contact with another man was more than 12 months ago will be able to donate, subject to meeting the other donor selection criteria.

However, blood safety starts with the selection of donors before they give blood. Men who have had anal or oral sex with another man in the past 12 months with or without a condom, will be asked not to donate blood. While safer sex, through the use of condoms, does reduce the transmission of infections, it cannot eliminate the risk altogether.

The new criteria take into account the fact that effective screening procedures and accurate tests have ensured that there has been no documented transmission of a blood-borne virus in the UK since 2005, with no HIV transmission since 2002. The purpose of the blood donor selection criteria, alongside other safety measures, is to ensure that this safety level is maintained, to minimise any potential harm to recipients of blood donations. All groups that are excluded or deferred from blood donation have been assessed as being at a statistically increased risk of carrying blood-borne viruses.

The decision to reduce the deferral should not be interpreted to mean that MSM are no longer at higher risk of blood borne infections than the general population. Currently in Scotland for those who have been tested for HIV, the prevalence of HIV in the heterosexual non intravenous drug using population is 0.1% while the prevalence in MSM is between 3 to 4%. This underlines the need for full compliance with the revised one year deferral. It is essential therefore, that even when a donor does not think that they are at ‘risk’ that they tell us and comply with the new rule.

The change in the blood selection criteria brings the criteria for men who have sex with men in line with those for the majority of other groups that are deferred from blood donation for 12 months due to the risks of infection associated with sexual behaviours. We appreciate that it can be disappointing for anyone who wishes to donate blood but is not able to meet the donor section criteria. The criteria are based on complex assessments of risk and must by their nature, be based on evidence and statistics that are recorded at a population level.

Although some would prefer a system that assesses every individual’s behaviour and level of risk rather than applying deferrals to groups, SaBTO’s review concluded that there is insufficient evidence available to be able to determine the impact on blood safety of such a system. It is also not certain that all people could objectively assess their own level of risk. Based on published data, the review also concluded that the introduction of extensive donor questions regarding sexual behaviour could lead to a loss of existing donors who may find the process intrusive. The Blood Services are therefore required to follow deferral rules that estimate the statistical risk of certain groups based on behaviour. We are sorry for any inadvertent offence this may cause.
All groups that are excluded or deferred from blood donation have been assessed as being at a statistically increased risk of carrying blood-borne viruses. For more information on all blood donor selection criteria and other blood safety measures click

http://www.scotblood.co.uk/media/29549/uk_blood_services_joint_statement_blood_safety_august_2011_2.pdf

Blood donation works on the principles of kindness and mutual trust and we ask all potential and existing donors to adhere to the blood donor selection criteria by providing completely honest answers to all the questions asked, both for the protection of their own health and that of others. Donor selection criteria that are proportionate and based purely on evidence are necessary to help ensure that donors comply with the health check process.

Compliance with all donor selection criteria is crucial in order to ensure the continued safety of the blood supply. Anyone may require a blood transfusion in the future and it is in the best interests of us all to ensure that we continue to maintain the current very high levels of blood safety.

The Scottish National Blood Transfusion Service will implement the change at blood donation sessions across Scotland on 7th November 2011. The English and Welsh Blood Services will also implement the change on this date. Until 7th November, 2011, the existing permanent exclusion will continue to apply across the UK.

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