



# MSM Factsheet (men who have sex with men)

### Blood Donor Centre position as of June 2016

#### MSM

The indefinite deferral period policy of MSM (men who have sex with men) for blood donation at the Blood Donor Centre has been changed to a deferral period of one year after the last sexual contact.

This took effect on 28 June 2016 and moves Bermuda into alignment with other countries that have reviewed this policy.

#### Women who have had sex with MSM

The deferral period for women who have had sexual contact with men who have sex with men is 12 months.

#### Commercial sex workers and IV drug users

Recent data indicate that commercial sex work (CSW) and injection drug use (IDU) are behaviours that continue to place individuals both at a relatively high risk of HIV infection and at a relatively high risk of window period transmission of HIV. Together, these findings continue to support an indefinite deferral of individuals currently or previously involved in CSW and IDU behaviours pending the availability of additional scientific evidence regarding the safety of alternative strategies for evaluating the risk of these individuals.

**The Blood Donor Centre has not revised the deferral policies for CSW or IDU.**



#### The way forward

The use of donor educational material, specific deferral questions, and advances in HIV donor testing (e.g. HIV antibody assays, p24 antigen assays and nucleic acid tests (NAT)) have greatly reduced the risk of HIV transmission from blood transfusion.

A time-based deferral since last sexual encounter is a scientifically validated way of identifying individuals at highest risk of transmitting HIV, and is one deferral policy that has been demonstrated to be effective in the United States and around the world.

Organisations around the world have reviewed this and expressed strong support for the change to a one-year deferral, which brings MSM donor deferral criteria into alignment with deferral periods for activities posing a similar risk of transfusion-transmissible infections.



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### History of MSM blood donation policy

Acquired immune deficiency syndrome (AIDS) was initially identified in MSM and associated with male-to-male sexual contact in the early 1980s. Beginning in 1983, the FDA issued recommendations for providing donors with educational material on risk factors for AIDS and for deferring donors with such risk factors in an effort to prevent transmission of the agent responsible for AIDS.

In September 1985, the FDA recommended that blood establishments indefinitely defer MSM donors due to the strong clustering of AIDS illness and the subsequent discovery of high rates of HIV infection in the MSM population.

In Bermuda, this indefinite deferral policy was instituted a few months after the FDA made this recommendation.

On 23 April 1992, the FDA issued the 1992 blood memo, which contained recommendations regarding the deferral for MSM as well as for others with behaviours associated with high rates of HIV exposure, namely commercial sex workers, those who inject illicit drugs, and certain individuals with other risk factors.

### MSM facts

As a group, in the United States, MSM have the highest HIV risk. According to the Centers for Disease Control and Prevention (CDC) in Atlanta, Georgia, two-thirds of new HIV infections occur in the approximately 2% of the population made up of MSM.

The risk of HIV among MSM is more than 20-fold higher than that of men who have sex with multiple female partners and women who have sex with multiple male partners.

Sex with an HIV-positive partner was associated with a 132-fold increase in risk (multivariable adjusted odds ratio) for being HIV-positive, and a history of male-to-male sexual contact was associated with a 62-fold increase in risk. By comparison, the increase in risk for a history of multiple sexual partners of the opposite sex in the last year was 2.3 fold.

United States data suggest an increase in the proportion of blood donors reporting MSM behaviour from 0.6% in 1993 and 1.2% in 1998.

The qualitative responses by both donating and non-donating groups of MSM in the United States revealed that these individuals view the current policy as discriminatory and stigmatising.



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