

Change Notification for the UK Blood Transfusion Services

Date of Issue: 04 July 2023

Implementation: to be determined by each Service

No. 28 – 2023

Blood Safety Entry

Revised entry

Changes are indicated using the key below. This formatting will not appear in the final entry.

original text

«inserted text»

~~deleted text~~

PLEASE NOTE: **Blood Safety Leaflet Information** has been removed from the [JPAC Document Library](#)

The following changes apply to:

BM-DSG Bone Marrow & Peripheral Blood Stem Cell	CB-DSG Cord Blood	GDRI Geographical Disease Risk Index	TD-DSG Tissue – Deceased Donors	TL-DSG Tissue – Live Donors	WB-DSG Whole Blood & Components
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<i>Additional Information</i>	<p>The FAIR (For the Assessment of Individualised Risk) study considered changes to the donor selection policy to allow a more individualised risk-based approach to donor selection policy. In their 2020 report, the FAIR group specifically looked at the guidelines which applied to men who have sex with men (MSM) and recommended an approach based on assessment of a donor’s recent sexual behaviour and experience. This approach has been agreed by SaBTO and has now been implemented by the UK Transfusion Services.</p> <p>Changes to donor selection criteria mean that donors who were previously excluded because of their sexuality and/or gender can now be accepted, if they meet the individual risk criteria outlined in FAIR (see section 5, above). These rules must be applied equally to all donors.</p> <p>FAIR identified several factors associated with a higher risk of blood borne infections. These include the recent diagnosis of a bacterial sexually transmitted disease and the following sexual behaviours:</p> <ul style="list-style-type: none"> • new or multiple sexual partners • anal sex • participation in chemsex activity <p>Drugs used for chemsex include methamphetamine, mephedrone and GHB/GBL, but other drugs may be used (e.g. ketamine, poppers, cocaine). Chemsex is a high risk activity because it usually involves multiple sexual partners, sometimes</p>
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	<p>for extended periods of time. The drugs involved also reduce inhibition leading to riskier sexual activity.</p> <p>Infection with some sexually transmitted diseases, particularly gonorrhoea or syphilis, is associated with a higher risk of acquiring blood borne infections. Donors who have had gonorrhoea can give three months after completing treatment. Donors who have had syphilis are permanently deferred as their blood will still react in screening tests, even if they have been successfully treated</p> <p>Some partner risk criteria still apply to donors who have a partner in a population group at higher risk of infection. For affected donors, these risk criteria should be applied even if the donor is eligible under individual risk criteria. These risks are being reviewed and will be updated as further evidence is available.</p> <p>The drugs used in both Pre- and Post-Exposure Prophylaxis for HIV (PrEP and PEP) may interfere with the routine HIV screening tests carried out on all blood donations. For this reason, donors who have taken PrEP or PEP should not donate for three months, even if they are otherwise eligible under individual risk criteria.</p> <p><i>'Blood Safety Leaflet Information' is available in the 'Document Library' of www.transfusionguidelines.org</i></p>
<p><i>Reason for Change</i></p>	<p>«Removal of reference to the Blood Safety Leaflet Information.»</p> <p><i>The deferral for donors whose sexual partners have been sexually active in Sub-Saharan Africa has been removed for all blood and component donors.</i></p>



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