

## RESOLUTION 2021 H

SUBJECT: Equitable Blood Donation Policies in the US

SUBMITTED TO: Michigan Osteopathic Association House of Delegates

SUBMITTED BY: Oakland County Osteopathic Medical Association, Macomb  
County Osteopathic Medical Association

REFERRED TO: Public Affairs  
*Recommendation from Committee:* Disapprove

ACTION AT MOA HOD: **REFERRED BACK TO ORIGINATOR**

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1 **Whereas**, in 1983, the Food and Drug Administration (FDA), an agency under the  
2 Department of Health and Human Services (HHS), prohibited the donation of blood by  
3 any man who has had sex with another man (MSM) at any time since 1977;

4 **Whereas**, in December 2015, based on recommendations from the HHS Advisory  
5 Committee on Blood and Tissue Safety and Availability, the FDA promulgated revised  
6 regulations to allow an MSM to donate blood only if he has not been sexually active for  
7 the past 12 months;

8 **Whereas**, despite these steps, a double standard remained as the revised policy continued  
9 to treat gay and bisexual men differently from others;

10 **Whereas**, on April 2, 2020, the FDA issued guidance for immediate implementation to  
11 address the urgent and immediate need for blood and blood components;

12 **Whereas**, the FDA has changed the recommended deferral period for MSM donors from  
13 12 months to 3 months;

14 **Whereas**, a 3-month deferral policy for gay and bisexual men to donate blood remains  
15 overly stringent given the scientific evidence, advanced testing methods, and the safety  
16 and quality control measures in place within the different FDA-qualified blood donating  
17 centers;

18 **Whereas**, the Williams Institute of the University of California at Los Angeles School of  
19 Law estimates that, based on the population of eligible and likely donors among the  
20 MSM community, lifting the Federal lifetime deferral policy on blood donation by an  
21 MSM could result in as many as 4,200,000 newly eligible male donors, of which 360,600  
22 would likely donate and generate 615,300 additional pints of blood;

23 **Whereas**, the increased uptake of pre-exposure prophylaxis (PrEP), which reduces the  
24 likelihood that an HIV-negative individual will acquire HIV, has allowed many more gay  
25 and bisexual men to be aware of their HIV-negative status and take steps to effectively  
26 eliminate their personal risk of HIV transmission;

27 **Whereas**, more than 4,000 blood drives across the United States have been canceled due  
28 to the COVID-19 pandemic, resulting in approximately 130,000 fewer donations;

29 **Whereas**, maintaining an adequate blood supply is vital to public health;

30 **Whereas**, the American Red Cross estimates that every 2 seconds, someone in the United  
31 States needs blood;

32 **Whereas**, the American Medical Association has stated that the ethical ideal for public  
33 policy in this area should be to transition away from policy that defers categories of  
34 persons based on attributing to all members risks associated with a population and toward  
35 policy that defers individual donors on grounds of evidence-based risk assessment;

36 **Whereas**, Congress directed the Secretary of HHS to carry out an initiative to improve  
37 awareness of the importance and safety of blood donation and the continued need for  
38 blood donations during the COVID-19 public health emergency, through passage of the  
39 CARES Act;

40 **Whereas**, the FDA is in the process of again reevaluating and considering updating its  
41 blood donor deferral policies as new scientific information becomes available, including  
42 the feasibility of moving from the existing identity-based deferrals related to group risk  
43 behaviors to alternate deferral options, such as the use of individual risk assessments:  
44 therefore, be it

45 **Resolved**, That the Michigan Osteopathic Association (MOA) advocate that policies  
46 governing blood and blood product donation in the United States should:

- 47 (1) be grounded in science;
- 48 (2) minimize deferral periods;
- 49 (3) be based on individual risk factors;
- 50 (4) not unfairly single out any group of individuals; and
- 51 (5) allow donations by all those who can safely do so;
- 52 and, be it further,

53 **Resolved**, the MOA forward this resolution to the American Osteopathic Association for  
54 national consideration and adoption.