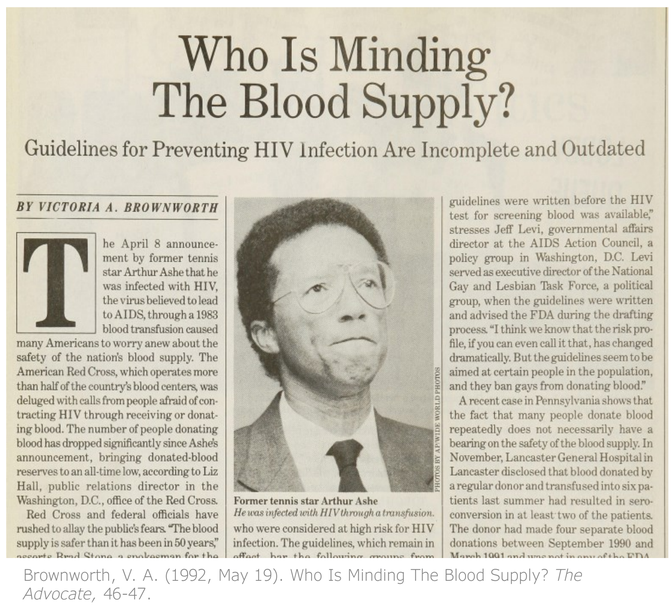
AIDS & Medicine

Blood Supply

In the early 1980s, public health and blood industry officials became more certain that AIDS was a blood-borne disease, as the number of reported cases of AIDS among hemophiliacs and transfused patients increased. HIV-tainted blood transmitted a fatal illness to approximately half of the 16,000 hemophiliacs in the United States and to over 12,000 blood transfusion recipients (CDC, MMWR, July 1993). Evidence that the AIDS agent was blood-borne was the result of two findings. First, AIDS was occurring in transfusion recipients and hemophiliacs who did not belong to any known high-risk group. Second, the spread of AIDS was similar to that of hepatitis B, another blood-borne disease. In April 1984, the U. S. National Institutes of Health developed and patented a screening test for HIV antibodies. The first tests used an enzyme-linked immunosorbent assay (ELISA), which detected 96–98 percent of HIV-infected blood samples. Today, in addition to rigorous donor screening, all donated blood receives antibody and nucleic acid testing (NAT), and any HIV positive blood is removed from the blood supply.



Who Is Minding The Blood Supply?

Guidelines for Preventing HIV Infection Are Incomplete and Outdated

BY VICTORIA A. BROWNWORTH

The April 8 announcement by former tennis star Arthur Ashe that he was infected with HIV, the virus believed to lead to AIDS, through a 1983 blood transfusion caused many Americans to worry anew about the safety of the nation's blood supply. The American Red Cross, which operates more than half of the country's blood centers, was deluged with calls from people afraid of contracting HIV through receiving or donating blood. The number of people donating blood has dropped significantly since Ashe's announcement, bringing donated-blood reserves to an all-time low, according to Liz Hall, public relations director in the Washington, D.C., office of the Red Cross.

Red Cross and federal officials have rushed to allay the public's fears. "The blood supply is safer than it has been in 50 years," asserts Brad Stone, a spokesman for the

Former tennis star Arthur Ashe
He was infected with HIV through a transfusion.

PHOTO BY APWIDE WORLD PHOTOS

who were considered at high risk for HIV infection. The guidelines, which remain in

guidelines were written before the HIV test for screening blood was available," stresses Jeff Levi, governmental affairs director at the AIDS Action Council, a policy group in Washington, D.C. Levi served as executive director of the National Gay and Lesbian Task Force, a political group, when the guidelines were written and advised the FDA during the drafting process. "I think we know that the risk profile, if you can even call it that, has changed dramatically. But the guidelines seem to be aimed at certain people in the population, and they ban gays from donating blood."

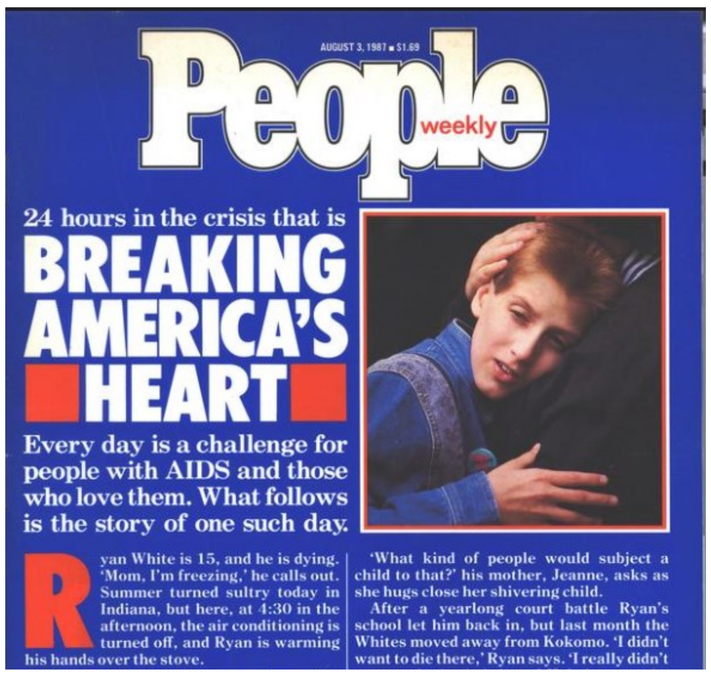
A recent case in Pennsylvania shows that the fact that many people donate blood repeatedly does not necessarily have a bearing on the safety of the blood supply. In November, Lancaster General Hospital in Lancaster disclosed that blood donated by a regular donor and transfused into six patients last summer had resulted in seroconversion in at least two of the patients. The donor had made four separate blood donations between September 1990 and

Brownworth, V. A. (1992, May 19). Who Is Minding The Blood Supply? *The Advocate,* 46-47.

> *"[W]e doctors were unknowingly infecting our hemophiliac patients with the human immunodeficiency virus. Virtually every hemophiliac I treated in the mid-1980s has since died from AIDS. This was the way Ryan White became infected with HIV sometime in the late 1970s or early 1980s."*
>
> *Dr. Howard Markel, Remembering Ryan White, PBS News Hour*

Ryan White was 13 in 1984 when he was diagnosed with AIDS, following a blood transfusion. Doctors gave him six months to live. When Ryan tried to return to school, he faced AIDS-related discrimination in his Indiana community. He gained national attention when, along with his mother Jeanne White Ginder, he rallied for his right to attend school. Ryan served as an eloquent spokesman about AIDS to his classmates, the media, and the public at large.

Ryan lived five years longer than his doctors expected. He died in April, 1990, a month before his high school graduation. Congress passed the Ryan White Comprehensive AIDS Resources Emergency (CARE) Act in August, 1990.



> *"The biggest contribution I think that Ryan made is—and I didn't know it at that time—that his legacy would be that people are getting their drugs and their treatment and that people are living with AIDS."*
>
> *Jeanne White Ginder, mother of Ryan White,*
> *Ryan White HIV/AIDS Program, ryanwhite.hrsa.gov/*

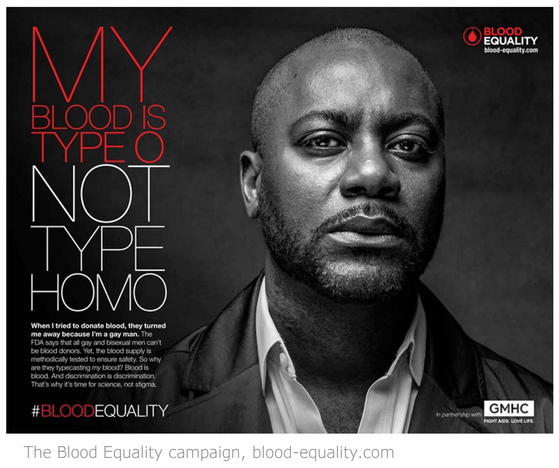


American Red Cross LGBTQ+ Team Member Resource Group, redcrossblood.org



Thrasher, S. W. (2009, Nov 01). BLOOD, SEX, and the FDA. *The Advocate*, 50-53.

> *"[L]ifting the ban [on men who have sex with men] could increase the total annual blood supply by 2%-4%, adding from 345,400 to 615,300 pints of blood each year."*
>
> *The Williams Institute, September 2014,*
> *williamsinstitute.law.ucla.edu*



The Blood Equality campaign, blood-equality.com

In 2015, the Food and Drug Administration (FDA) moved from a controversial lifetime ban on gay and bisexual men donating blood to a deferral of one year for any man who had sex with men (MSM) during the past 12 months. In 2020, the FDA announced that it was updating its blood donation policy regarding MSM, reducing the deferral period from 12 months to 3 months. In 2023, the FDA issued final guidance regarding an individual donor assessment for all blood donors, regardless of gender or sexual orientation. This change eliminated previous FDA eligibility criteria based on sexual orientation. Sexual activity questions in the pre-donation health screening are now based on specific behaviors, not on sexual orientation.