

December 14, 2015

The Honourable Jane Philpott  
Minister of Health  
70 Colombine Driveway,  
Tunney's Pasture  
Postal Location: 0906C  
Ottawa, Ontario K1A 0K9

Honourable Minister,

I am writing to inform you of a recent policy position adopted by ten members of the Network of Rare Blood Disorder Organizations (NRBDO) in support of a change to Question 19 of the Canadian Blood Services Record of Donation and Question 17 of the Héma-Québec Dossier du don de sang such that the deferral for a man who has had sex with another man (MSM) be reduced to one year. One member, the Thalassemia Foundation of Canada, remains in support of the 5 year deferral. With regards to the MSM deferral, the NRBDO believes a deferral (e.g. one year) is absolutely critical given the high rates of transfusion-transmissible diseases in the MSM population.

The NRBDO continues to support rigorous surveillance of transmissible disease rates among donors. In addition, the NRBDO supports the researching, development and validation of alternatives to the MSM question that would maintain the current level of safety.

The full text of the policy is attached.

Sincerely,



Wendy Sauve  
Chairperson  
Network of Rare Blood Disorder Organizations (NRBDO)

Cc: Dr. Graham Sher, Chief Executive Officer, Canadian Blood Services  
M. Serge Maltais, Président et chef de la direction, Héma-Québec

**NETWORK OF RARE BLOOD DISORDER ORGANIZATIONS (NRBDO)  
2015 MSM DEFERRAL POLICY**

**Background**

Canadian Blood Services and Héma-Québec will be making submissions to Health Canada in the coming months to reduce the MSM (men who have had sex with other men) deferral from five years without MSM activities to one year. As in 2012-13, when the 5-year deferral was considered and ultimately approved, Health Canada and the blood establishments will want to know the perspectives of the patient organizations whose members bear the entire risk from transfusion-transmitted pathogens.

Australia, since 2000, the United Kingdom, since 2012, and New Zealand, since 2014, have adopted one-year deferrals for MSM. The United States will introduce a one-year deferral in 2016.

**Policy**

Given that rates of sexually transmitted diseases transmitted by blood and blood products (e.g. HIV, HCV, HBV, syphilis) are exponentially higher in the MSM population than in the general male population;

Given that window periods for these infections can be as long as two months;

Given that there is no research in the world at this time that demonstrates that a strictly behaviour-based questionnaire can replace a time deferral and maintain the current level of safety;

Given that Canadian Courts have ruled that time-based MSM deferral criteria are not discriminatory, are allowable based on health and safety considerations, but must be proportionate to comparable risks;

Be it moved that a time-based deferral should be maintained.

Given that a one-year deferral covers the window periods and includes an added margin of safety;

Given that no increase in HIV, HCV, HBV and syphilis rates were observed in Canadian donors between 2013 and 2015 after the lifetime deferral was reduced to five years;

Given that no increase in HIV, HCV, HBV and syphilis rates in donors were observed in Australia and the United Kingdom when the lifetime deferral was reduced to one year;

Given that new sexually-transmitted, blood-borne pathogens for which there are no tests are extremely likely to emerge first in a population of men who have had recent MSM activities before they emerge in a population of men who report no MSM activities in the last year and who show normal rates for HIV, HCV, HBV and syphilis;

Be it moved that the Network of Rare Blood Disorder Organizations (NRBDO) support the change to a one-year deferral for MSM.



Adopted by the undersigned, December 4, 2015

Answering TTP (Thrombotic Thrombocytopenic Purpura)  
Aplastic Anemia and Myelodysplasia Association of Canada (AAMAC)  
Canadian Association for Porphyria (CAP)  
Canadian Hemophilia Society (CHS)  
Canadian Immunodeficiencies Patient Organization (CIPO)  
Canadian Organization for Rare Disorders (CORD)  
Fanconi Canada  
HAE Canada (Hereditary Angioedema)  
HHT Canada THH  
Sickle Cell Disease Association of Canada (SCDAC)