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BBC RADIO FOUR
WORLD THIS WEEKEND
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## PRESENTER:

In the Australia the Government and medical authorities have been meeting to decide what action to take following the deaths of a number of patients, among them three babies, who'd received transfusions of blood donated by a male homosexual suspected of suffering from the deadly virus AIDS. The meeting agreed that new machinery should be brought to screen

potential donors, a new declaration form should be drawn up, and an immediate campaign should begin to persuade more women to become blood donors.

asked him whether he felt following events in Australia that the risk was such that homosexuals in this country should be banned from becoming blood donors.

No, not a ban so much as a self-inflicted ban, perhaps, rather than a state-controlled ban. One would hope that the transfusion centres would educate their donor panel sufficiently to make it very apparent, and easily

apparent to the donors why they should not give, and how socially irresponsible it would be of them to continue giving if they were male homosexuals.

So, you're saying, then, that no pratising male homosexuals in this country should now give blood?

Yes, and this has been Department of Health policy in this country for a number of months now.

Do you suspect, though, that they are still giving blood?

Yes, I know without doubt that male homosexuals continue to give blood. It is particularly important when you have a blood team going

to a place of work, like for example a factory, and you have half a dozen men coming up to give blood, and they all read the AIDS leaflet, and if somebody then turns round and walks out from the public area, all his mates will say, oh, didn't know about Fred being gay. Now, this is a, this is a very real problem, and the way the American clinics have got round this is by having nurse attendants, or physician attendants, who interview on a one-to-one basis the donor, and they can ask them in private. And indeed, in New York, where infected donors are probably of the greatest prevalence anywhere in the world, they have enabled the system to work whereby the donor comes up, gives his blood, and then at the same time as giving the blood, says whether it is to be used for research purposes, or whether it can be used for human therapeutic purposes. This allows the homosexual to have his blood taken to make some contribution, if you like, towards research, but marks

the serum and the blood product as not being fit for human consumption.

At the moment in this country, a leaflet pointing out the risk if practising homosexuals give blood, is apparently put in various clinics. Do you think this is enough?

Well, at the risk of making myself unpopular with my colleagues in the blood transfusion service, I think it is very clear that the exposure of donors to the AIDS leaflet is insufficient, because I myself have two male friends, who are not gay, incidentally, but have acted as blood donors, and in both instances, neither of them were asked, nor did they see the AIDS leaflet. Now, that is worrying if that can happen to two friends out of the small number of blood donors who are my personal friends.

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Finally, what is your view on what's happened in Australia? Three babies are dead, could it happen here?

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In the United Kingdom, the proportion of blood donors who may be infected with the AIDS virus is vanishingly small. That is true of 1984, whether it will still be true in 1985 or '86 I think is questionable. It must be seen only as a matter of time before British blood products and British donors become contaminated with the virus.

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. Well, is it then possible that during transfusion, a hospital patient in Britain has already received blood contaminated with the virus? That's the question that put to the Director of the North-West Regional Blood Transfusion Service,

(phonetic), who's also the Department of Health's advisor on blood transfusion.

Well, yes indeed, AIDS disease has a very long incubation period, and there is a possibility that someone may be incubating this disease without actually knowing it at the present time. However, I think one has to say that the incidence of AIDS following transfusion of blood is very low.

But people are, obviously, going to be very alarmed by what you've just said. Is there any reassurance you can give them?

Yes, I think one has to think positively about blood transfusion. There are many medical procedures which cannot be undertaken without blood transfusion. If we were to

restrict the supply of blood or, in any way, then this would cause much more harm than good. We do have a very good voluntary donor system in this country, we do screen donors for many, as many diseases as we can, and unfortunately, this time we're unable to have a test available for AIDS. But we do ask people who are in the high risk group from AIDS to refrain from giving blood. Patients who are suffering from AIDS may have allied diseases such as hepatitis and other possible venereal diseases, and we do in fact test for these. Our attempts to stop the practising homosexual giving blood has been through a leaflet. Now, this distribution of the lealet has, in some regions, been sent to donors prior to their coming to sessions and asking those in the high risk groups not to give blood. And, I can only say, one cannot be one hundred per cent sure, but we would hope that all the homosexuals, or intravenous drug users, would heed this

warning, and refrain from donating blood.

But, surely there must be an argument for carrying out what happens in the United States, where people are asked individually, men are asked individually, privately, by a nurse, when they come to a clinic. Isn't that much better than just sending out leaflets, or indeed having a stack of leaflets simply on a table in a place where the blood is being given?

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Yes, there is an argument that you could put forward for doing that. We have not been directly asking questions of donors about their sexual habits, and perhaps this is something we may have to consider. It would mean an alteration in the general system that we've used in this country for many years, but it may warrant such steps.

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## PRESENTER:

, who's the blood transfusion advisor to the Department of Health. He was talking to (

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