



European Medical Students' Association

Association Européenne des Étudiants en Médecine

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Organ Donation Across Europe

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The European Medical Students' Association (EMSA) represents medical students across Europe. We envision a healthy and solidary Europe in which medical students actively promote health. EMSA empowers medical students to advocate health in all policies, excellence in medical research, interprofessional healthcare education and the protection of human rights across Europe.

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Problem statement

Organ donation represents a procedure in which an organ is removed from one person (alive or dead) and transplanted into another person. The recipient is in need of a transplant because of a medical condition or an accidental injury to their otherwise healthy organ. The most commonly transplanted organs are kidneys, followed by the heart, lung, liver, pancreas, bowel, and corneas. European countries have either an 'opt-in' or an 'opt-out' system when it comes to donations after death. (Steward, 2022a)

Statistics on organ donation show a decrease in 2020 in contrast to 2019. The COVID-19 pandemic had a big impact on the number of transplants performed. Based on the data collected by WHO in 2020 there was a 62,4% decrease in worldwide transplant activity, with kidney transplants being the most affected. (Healio, 2022) According to data from the International Registry on Organ Donation, the rates of transplants performed from deceased donor donations increased in 2021. For example, Spain reported a spike in transplants from 37.97 per million people in 2020 to 40.2 per million people in 2021. These numbers do not compare to the numbers pre-COVID (49 per million people in 2019), but the trend shows that there is an improvement as more countries adapt to the pandemic (IRODaT 2019, IRODaT 2020, IRODaT 2021).

For example, Spain took the biggest hit with transplant rates coming down from 49,6% in 2019 to 38% in 2020. Other countries like Croatia (32% in 2019 and 25,4% in 2020), France (29,4% in 2019 to 23,2% in 2020) and United Kingdom (24,7% in 2019 and 18,4% in 2020) also had a decrease in transplant rates, while other countries like Slovenia (21% in 2019 and 22,4% in 2020), Austria (23,4% in 2019 and 24,7% in 2020), Estonia (19,2% in 2019 and 25,4% in 2020) and Denmark (17,6% in 2019 and 21,4% in 2020) even had an increase in organ donation despite the pandemic. (Statista, 2022b). In the context of the COVID-19 pandemic, transplant rates reduced in many countries due to the barriers donors (and recipients) face due to pandemic restrictions.

People mostly refuse to donate because of their distrust in the healthcare system. They are concerned about doctors not working hard enough to save them in order to procure their organs, organ theft, organs being procured unethically, wealthy people being moved up on the transplant lists, other organs being injured during procurement. (NCIB, 2021) For example in 2013 in Germany, it was reported that a doctor altered the waiting list for liver transplant favouring some patients over others, leading to a decrease of national organ donations. (DW, 2013)

Another important factor is people's religious beliefs. People are afraid that organ donation goes against their religious beliefs. All major religions of the world (Christianity, Judaism, Islam, Buddhism) agree that donation is a personal decision that helps save people's lives. (Organ donation Scotland, n.d.) Pope John Paul II stated that donation is an act of kindness and compassion, and that, if done ethically, it brings hope to sick people. (SJU, 2022)

Even if people sign donor cards one of the main issues with increasing donor rates is the right of relatives' vetoes that often goes against donors' wishes. If the donor didn't sign a consent form while he was alive, family members often make a decision that is based on their personal beliefs (for example in the UK 43% of families have vetoed the donation). (Costa, 2020)

The ethical implications of low rates of organ donation is alarming, as people consider procuring organs through illegal and potentially unsafe means. The victims of this bodily violation tend to be people of low socioeconomic status from Eastern European countries such as Romania and Moldova as well as West Africa and South Asia. (Wright, 2015).

Organ transplantation is a serious medical procedure that not only takes a physical toll, but also a mental and emotional one on the recipient and donor (or donor's families). Research shows that patients, due to sociodemographic factors such as gender, class and access to emotional support, mental health, have varying rates of adherence to post transplantation therapy (Gheith, et al 2008). This in turn affects the long-term outcome of the transplantation.

Our view. Aim

The fact that organ donation offers a life-giving and life-enhancing opportunity is a source of hope for many people. At the same time, organ donation is an emotional and challenging experience for donors and their families. The increasing waiting list for organ donations in Europe is a worrying situation. Lack of information, myths, and differences in opinion between religions and cultures constitute an obstacle to organ donation. The communication of physicians between donors and families, their reassuring attitudes, and sharing of organ donation experiences that the public can positively increase the amount of organ donations.

In order to increase the life-giving opportunity we advise the opt-out system, since it increases the number of available organs by partially closing the gap between people willing to donate organs post mortem and actual donors. While it is important not to force anyone into donation, the opt-in system leads to a low donor rate with as a result more people dying in lack of a matching organ. To live up to ethical guidelines it has to be possible and easy for anyone to opt-out of donating their organs.

The long waiting lists for recipients, as well as financial incentives and desperation of poor people can create a demand for illegally obtained organs. This is also a public health crisis because these illegitimate surgeries are not followed up or performed according to standard, which leads to various health complications that the exploited donors may not be able to afford to treat.

As European Medical Students' Association, we believe that organ donation and transplantation contents should be included more in the medical curriculum. In this way, increasing the level of knowledge and awareness of physicians will strengthen the communication between physicians and patients, and donors.

Recommendations

EMSA calls on to Governments and member states to:

- Design transparent monitoring system for donation and transplantation activities, practices and outcomes and keep organ donation statistics;
- Establish functioning national transplant system and international exchanges systems;
- Follow the current developments and meetings about organ transplantation in the world and take an active role in the meetings;
- Take a step to create a framework for expanding donor pool (Use of expanded donor criteria);
- Promote public education
 - a. use social media, television all media instruments
 - b. arrange campaigns, workshops
 - c. integrate organ transplantation into a school curriculum
- Build up a campaign that promotes awareness among the socially deprived, less educated communities and ethnic minorities;
- Fund the researchers aiming to further develop xenograft transplantations, 3d modelling, stem cell and artificial organ transplant;
- Establish stringent donor policies to protect low income individuals from being exploited;
- Ensure that each centre has a well-trained, communicative and supported team and regularly refresh their training;
- Try to implement the opt-out possibility, since this system bridges at least partially the divide between potential and actual donors;
- Create a reachable organ donation system that will promote
 - a. individuals to get enough information about organ transplantation
 - b. individual registration of donor status
 - c. encourage the registered individuals to inform their families

- Devise an environment to reintegrate transplanted patients into employment and society;
- Support the continued efforts of health care centres , medical students' associations, and other relevant organisations regarding appropriate organ donation and transplantation activities and trainings ;
- Pursue policies and system tools for more dynamic donor/recipient matching systems, optimising the role of intensive care professionals, minimising the duration of the donation process, increasing donation;
- Allocate appropriate resources towards
 - a. The training of specialist physicians, surgeons and transplant coordinators,
 - b. Funding the researches of doctors and relevant scientists on human to human transplantation technologies
 - c. Solve problems remain unsolved in the patho-physiology, immunology and molecular biology of the transplantation process and the response of the host to the donor organ, to clinical aspects and those relating to organisational, societal, psychological and quality of life issues;

EMSA calls on to Hospital Administrations to:

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- Ensure that the organ transplantation team receives the necessary training and ensure that the transplantation process is carried out as it should be at all stages;
- Create the necessary environment for every healthcare professional, medical student and staff to acquire basic skills in the organ transplantation process;
- Work with patient organisations and NGOs to create campaigns to raise awareness of patients about organ transplantation;
- Encourage medical students and healthcare professionals to conduct research on transplantation and follow developments around the world;
- Build a financially and psychologically well supported team of experienced doctors, nurses and other medical staff to deal with preparation and follow-up of organ transplantation;

EMSA calls on to Faculty Member Organisations and Medical Students to:

- Raise an awareness at your campus, hospital and faculty by organising webinars, workshops and fieldwork;
- Attend and organise educations to get skilled at good communication, transplantation process, assess donor and recipient's medical conditions;
- Make research about the unlit immunologic, pathophysiologic process of transplantation and work with your mentors who is experienced in this field;
- Advocate for incorporation of learning modules that effectively equip students with the skills needed in communicating about donation.

EMSA calls on to Medical Schools and Universities to:

- Implement trainings into the medical curriculum particularly for educating medical students on organ donation including the clear distinction between brain death and cardiac death and the eligibility criteria for donors;
- Create new fields of study that encourage your students to participate in research transplant related fields;
- Implement programs in your curriculum that supports students who want to learn about and research about organ transplantation at the university;
- Include a specific module on communication with patients and their families for organ donations into the medical curriculum;
- Incorporate into their curriculum learning modules that teach students about the ethics of Organ Donation and the precautionary laws surrounding donation.

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