
Medics mull organ donor options

Posted by DoricMan - 2008/06/10 12:44

I was pleased to learn that the Royal College of Physicians of Edinburgh is considering whether moving to a system of presumed consent is the best option for boosting donors.

Apparently the UK currently has one of the lowest organ donor rates in Europe.

Health secretary Nicola Sturgeon urged donors to tell relatives when they join the register.

See http://news.bbc.co.uk/1/hi/scotland/edinburgh_and_east/7443583.stm

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Re:Medics mull organ donor options

Posted by Clare - 2008/06/10 14:22

I agree that the donor system is best. I find the term "presumed consent" doesn't sit well. It reminds me of the defence often put by solicitors representing rapists to be honest.

The register should operate more smoothly and I think relatives should not have the right to over rule someone's wishes after they are dead. If a person is registered and on a database then that should be it. But the whole idea of people dying and their organs being removed on a "presumed consent" basis reduces our value considerably and kind of suggests that we're just a collection of spare parts. I think therefore that a decision needs to be made formally by the owner of those parts so that their wishes are known for certain.

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Re:Medics mull organ donor options

Posted by Martin - 2008/06/10 15:47

I really see where you are coming from here Clare, ad to be honest I felt the same way until one evening I was involved in a discussion on this very subject. Of the 15 or so of us there, only 3 were recorded as donors. However, much more significantly, only 1 had a strong objection to the idea of being a donor. The rest were quite happy for their organs to be used but, by their own admission, were too lazy to do anything about it.

While I would not claim this to be a scientific random sample, I think that this is, generally, the case in this country. I also feel that it is unfair, both on the donor system and, perhaps more importantly, on the relatives who will have to make that decision on someone else's behalf at a very stressful and emotional time.

I'm not going to go into a lecture about the good that organ donation can do, that speaks for itself, but the potential benefit that could come from those friends of mine could be easily lost with the time delay involved.

The idea of presumed consent still does not sit 100% with me, but I do feel that it is a good thing, in that it would sweep up all the people who "did not get round to it". It does not remove any freedoms from anyone as they have the right at any time to register their objection.

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Re:Medics mull organ donor options

Posted by Clare - 2008/06/10 18:15

Martin wrote:

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Actually Martin it does remove freedom from people. Presumed consent is exactly that in that someone else is making a decision for them without asking.

There are many reasons why people don't get around to becoming a donor although I agree its lazy of us. There could be just as many for those who don't get around to registering that they don't want their bodies emptied without their consent when they die. I really don't think the state has the right to do that and I hope it doesn't happen. The scope for the new system to be manipulated is too great I think. The very idea makes me feel very uncomfortable. I would go so far as to say that if they introduce it many people will register as NON-donors. I know that sounds odd, but I think it will happen.

I think we must make people more aware of the good organ-donation can do and the lives it can save but I think we also must retain the present system whereby people register as donors. Removing the right of relatives to refuse after a person's death should however be done away with and I've never thought relatives should be able to do that when a person's own wishes are clear.

Think worst case scenario Martin. Lydia has told us of the experience parents had in the past when hospitals removed the organs of dead children without asking parents. Think of the "presumed consent" system in a situation like that. I'm sorry, it doesn't work for me. Imagine parents of a child approaching death being informed that under "presumed consent" their child was being taken to theatre in order to remove organs. Nope, it doesn't work for me. Ultimately we are individuals and we are not as I previously potential walking factories full of spare parts. The whole idea leaves me cold.

We need to wake up and get people registering as donors. I just think its really important that a person's wishes are absolutely clear.

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Re:Medics mull organ donor options

Posted by Clare - 2008/06/10 21:45

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I am more and more drawn to the idea of properly promoting organ donation Martin, really. Nothing is unclear then but is straightforward.

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I know they are saying we can opt out but ultimately I can't get away from the fact that our bodies don't belong to the State and the whole "presumed consent" thing has a ring to it which disturbs me.

We have to change the way we persuade people to become donors and promote it everywhere. GPs could kick that off by asking every patient they see, dentists too, opticians: donor cards should be available everywhere. everywhere. We must go that route but first let's get rid of the clause whereby relatives can overturn a person's wishes. That would be a very good start given the high percentage of cases where that happens. I was thinking it would be maybe around 7-10 per cent, but 40% is a huge amount, its almost half. We need to address that.

Re:Medics mull organ donor options

Posted by LYDIA REID - 2008/06/10 21:57

<http://news.bbc.co.uk/1/hi/scotland/4673388.stm>

I will answer this post in two ways; I would like to outline the dangers of the system of presumed consent and the suggestions that have been made to the old executive and our new Health Minister Nicola sturgeon and our new Government by my organisation.

We worked hard to bring about the new Human Tissue Act (Scotland) and fought vigorously against some of the measures passed in this act.

Our Objections.

We believe it is a personal decision and a relative should not have a veto either way.

Medical staff can obtain legal authorisation from a child of twelve and over, which can be verbal, to organ donation for transplant and for post mortem. Without the knowledge or consent or presence of parents, the parent could go to the toilet and a child signed up. Remember this will be taken only from critically ill/terminal children; otherwise, it would probably not be useful. E U law dictates the person must have a full explanation of what happens to the body. Either way is unacceptable for a dying child of twelve without the support of the parents.

The verbal authorisation may be presumed if the staff member says so. No signature necessary, the staff member fills in a form to say that any person old or young has given verbal consent. That consent may consist of a nod, even from a dying person in pain, under the influence of pain relief, drink or drugs, or with no ability to communicate through language difficulties, which may include the lack of ability to speak English. This person of course may also be deaf and unable to speak. They may be unconscious for all we know. No proof needed. They may be Muslim.

For our organisation any collection of Doctors and Pathologists who would bring in such a terrible law when the promise was made that this law would protect the bodies of our loved ones, should never be trusted with the lives or bodies of any person in Scotland.

During the meetings of the health committee, while I gave evidence, we were round the table with pathologists who objected to the ability to take verbal authorisation and the ability to take authorisation from a child of twelve and still this Bill was passed by Labour Government.

Presumed Consent

The suggestion is we would have an online register of objectors. We would also be offered a card to carry along the lines of the opt in card. (Try finding a card for either system)

The lack of safety of this system is obvious when you realise that an aggrieved wife husband or mother - in -law can at this moment in time sign you up to donate your organs for transplant online if they have access to your e-mail account little information proves it is you filling in this authorisation. It is also possible for a doctor or any member of the medical staff to do this.

If the Royal College of Surgeons have their way, this will also happen online for authorisation for post mortem, for research purposes.

What would happen if a person did not have the intelligence to find out how to opt out, for any reason? The old who do not understand the internet. The people who cannot read or write. Who cannot speak English? Who have no permanent address? Who live alone and have no relatives to protect their body. Perhaps relatives live abroad and cannot reach the hospital before the person dies. The vast majority of residents of Scotland who rarely read a paper. (It is all too too depressing)

Children / over the age of twelve who live in care. A social worker has parental rights over this.

The person who slips out to the shops or goes on a night out and is killed and the card is left at home.

If a relative finds it later, will we have a succession of court cases, which will damage any good done by the positive

publicity we worked so hard to get.

Life or Death.

Most medical staff within the NHS are normal people, honest and a level of integrity fit for purpose. We are though treated in the NHS by people, and within will have a normal level of dishonest people with no integrity. We also will have people who are completely mad or just plain wicked, people who will kill for money and will run a system where an organ can be bought for a reasonable price; unfortunately, to run a system like that donors will be killed. If we allow a doctor or nurse the ability to decide whether you or I or our relatives are helped/ waste NHS resources/are perhaps too fat to help/a smoker and should not be helped, or are to be used and our organs harvested it is a step too far.

Lives will be lost and particularly the lives of the homeless, alone, old, infirm of mind and body.

A nurse working in the head injury wards in Edinburgh who was not alone in having grave reservations about the systems used to decide if a person is brain dead contacted us.

When a person lies on that bed it is a doctor who will decide if they are worth saving or should be used to harvest organs. The right of life or death over you and your relatives.

OTHER OPTIONS.

Laziness is the main reason people do not donate, lack of trust is another, allowing access to the body. The relatives inability to allow the mutilation of a loved one.

However, time for some home truths, in the opt out debate in parliament we discovered that Scotland does not have the capability to do the transplants of the people currently on the waiting list. We have enough donors but not enough theatres room, staff or beds. Why, when the professionals and the Government including Nicola Sturgeon know this do, they want more donors.

Each person at some time fills in a form to give the people in their house the right to vote/ pay council tax

Most people will apply for car tax, passport, forms for benefits, housing benefits, pensions, etc

The sixteen year old would ask for a national health number

Many other options exist; crucially the person would not receive what they have applied for unless they fill out and return the form asking for their authorisation.

A computer could easily generate a form and an information pack with any of these forms.

On the form, the person would be asked to decide from three options.

1. I want to donate my organs for transplant, /or would allow a post mortem on my body after death/donate organs for research.
2. I would not want to donate my organs / have a post mortem.
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The form could include a section which the next of kin could sign stating they are aware of this persons intentions

This would overcome the laziness and protect each persons right to choose for themselves.

Re:Medics mull organ donor options

Posted by LYDIA REID - 2008/06/10 22:15

Clare wrote:

Martin wrote:

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That is not quite how presumed consent works, the child would not have their organs removed if they have opted out. You are very right about the protest votes and we will lead that campaign as it will be a way of showing that the country does not want the opt out system.

It would only be a last resort as we have no wish to damage the list which is so vital to lives.

Technically the law states that a relative cannot stop organ donation if the person is on the register. Practically doctors do not want the bad publicity if a relative objects.

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very good start given the high percentage of cases where that happens. I was thinking it would be maybe around 7-10 per cent, but 40% is a huge amount, its almost half. We need to address that.

Claire we fought for the right of the personal decision and it is something that I truly believe in. Realistically though when you are in the situation where it is your loved one dead or rather someone is telling you they cannot be saved. It is usually the result of two main scenarios. It may all be a terrible shock and the person has had a heart attack or knocked down, No time to say goodbye and along comes this person who is asking that they be put onto a machine which will keep organs working while they are removed, before your loved one is in your eyes properly dead. it is a leap of faith in the person who is telling you that your loved one is dead but not really dead. Your brain does not work as it normally would, your only feeling is to protect the body as this is all you have left of this much loved person. Perhaps best explained by the fact that some people want to put warm things onto their loved ones when they are buried it is completely illogical but that is grief and how it effects some people. If your relative has gone through a long illness and you have feelings along the lines of what if they could be saved or just not properly dead. You may feel they have had enough now just leave them in peace to die in dignity. You may also feel a terrible horror at the thought that a scalpel is to open the body of this person before you have a chance to get used to the idea of the death of this much loved person.

Re:Medics mull organ donor options

Posted by Levenax - 2008/06/10 22:46

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Posted by LYDIA REID - 2008/06/11 09:30

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Levenax

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I have young mums in my organisation who were asked to hold their babies until they died and were asked to agree to a post mortem as they held their babies.

I have several young mums who were asked minutes after delivering their dead babies to sign that form not just by nurses and doctors but also in one case the minister and in another the priest. The worst-case scenario a young mum still holding her dead baby was asked 12 times by doctors, nurses, and the priest. At one point, twelve people were in that room. They asked her partner to persuade her but they would not allow him to see his son as they were not married and needed her permission.

Parents in neo-natal units are asked before the baby is dead.

Many parents discovered that the forms had been forged. A member of staff had signed them thinking that the process of post-mortem would never be discovered, as information was so protected in the past.

The Procurators Fiscal know nothing about these post mortems until after the deed is done, it is physicians and Pathologists who want to do these post mortems, not only because they may be interesting cases but also because of training. The last information I was given Pathologists are paid £200 per procedure. It may be more now.

We have no objections to any of these procedures being carried out. Doctors must learn, surgeons must learn, if any of our little ones needed an operation I would want a surgeon that had been trained on a dead body not a live one. None of these issues takes away the right of a person as they hold their dead child to say no. With adults, it is different; an adult should make this decision for himself or herself. It is their body, which, will be used. My body will go to science if it is not usable for transplant I am the greatest supporter of research and learning. The issue is that many do not want to give their body for anything and that is the mindset that we must change. The arrogance of Doctors Nurses and Laboratory technical staff who believe they have the right over our bodies is another mindset, which must change.

I see a huge problem with the fact that when working in this area many doctors' nurses' pathologists and other staff are immune to the grief felt by relatives. As they are so involved in life saving work, it is possibly understandable but this must change, they cannot be allowed to believe that they own our bodies or us.

Re:Medics mull organ donor options

Posted by Clare - 2008/06/11 10:03

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Lydia, the point I'm making is that if a person makes a decision about the matter for themselves and registers as a donor their family should simply not be allowed to overturn that decision. Families should not be asked for their approval, the person has already made the decision. Grief doesn't come into the matter, the decision has been made already, and surely they should wish to honour that person's wishes? The issues surrounding this problem would best be dealt with if as I have suggested the registration process includes that person's decision being final and barring relatives from changing it at a later date.

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Posted by Levenax - 2008/06/11 11:32

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I'm very sorry to learn that you've had the experiences you describe. You must have encountered some very unfeeling medics for such things to have happened. The medical profession harbours just as many chancers, crooks and incompetents as any other it's just that they're better than most at covering it up or passing the buck. Pathologists are only paid extra for autopsies ordered by the Procurator Fiscal and the last I heard it was around £240. In a hospitals in big cities with lots of murders and neglected old folk being found dead or if they've got a busy casualty department the pathologists can make many £K on top of their £100K salaries. A nice little earner when you think they are doing it in NHS time using NHS facilities and support staff. The last place I worked in, which wasn't all that big, did about twenty a month so it was around £60K a year between two medics. I almost said nice work but if you've ever been in the room when they're cutting up a corpse that's been mouldering in a centrally heated flat for a month you would know it's mingin.

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Levenax

You must be on the wrong end of the discussion.

My son was dying of cancer and he and his wife were asked. This is common to try to overcome the objection of relatives.

When my youngest son died many years ago the hospital asked if they could do a post mortem and I refused, they simply used the procurator fiscal to do the post mortem, this post-mortem proved without a doubt that medical negligence had killed my son and the information was hidden for many years.

I have young mums in my organisation who were asked to hold their babies until they died and were asked to agree to a post mortem as they held their babies.

I have several young mums who were asked minutes after delivering their dead babies to sign that form not just by nurses and doctors but also in one case the minister and in another the priest. The worst-case scenario a young mum still holding her dead baby was asked 12 times by doctors, nurses, and the priest. At one point, twelve people were in that room. They asked her partner to persuade her but they would not allow him to see his son as they were not married and needed her permission.

Parents in neo-natal units are asked before the baby is dead.

Many parents discovered that the forms had been forged. A member of staff had signed them thinking that the process of post-mortem would never be discovered, as information was so protected in the past.

The Procurators Fiscal know nothing about these post mortems until after the deed is done, it is physicians and Pathologists who want to do these post mortems, not only because they may be interesting cases but also because of training. The last information I was given Pathologists are paid £200 per procedure. It may be more now.

We have no objections to any of these procedures being carried out. Doctors must learn, surgeons must learn, if any of our little ones needed an operation I would want a surgeon that had been trained on a dead body not a live one. None of these issues takes away the right of a person as they hold their dead child to say no. With adults, it is different; an adult should make this decision for himself or herself. It is their body, which, will be used. My body will go to science if it is not usable for transplant I am the greatest supporter of research and learning. The issue is that many do not want to give their body for anything and that is the mindset that we must change. The arrogance of Doctors Nurses and Laboratory technical staff who believe they have the right over our bodies is another mindset, which must change.

I see a huge problem with the fact that when working in this area many doctors' nurses' pathologists and other staff are immune to the grief felt by relatives. As they are so involved in life saving work, it is possibly understandable but this must change, they cannot be allowed to believe that they own our bodies or us.

I'm very sorry to learn that you've had the experiences you describe. You must have encountered some very unfeeling medics for such things to have happened. The medical profession harbours just as many chancers, crooks and incompetents as any other it's just that they're better than most at covering it up or passing the buck. Pathologists are only paid extra for autopsies ordered by the Procurator Fiscal and the last I heard it was around £240. In a hospitals in big cities with lots of murders and neglected old folk being found dead or if they've got a busy casualty department the pathologists can make many £K on top of their £100K salaries. A nice little earner when you think they are doing it in NHS time using NHS facilities and support staff. The last place I worked in, which wasn't all that big, did about twenty a month so it was around £60K a year between two medics. I almost said nice work but if you've ever been in the room when they're cutting up a corpse that's been mouldering in a centrally heated flat for a month you would know it's mingin.

I hope you don't think I am against the basic principle of the procurator Fiscal ordering a post mortem when it may be that wrong doing has taken place. We need this protection. In some states of America it is possible to refuse, which could easily cover up a murder or criminal negligence etc.

The objections I hold are to the Fiscal being used to obtain material for research that should not be his remit, and indeed was not until our new law was passed in Scotland. Now this service can order a post mortem in "the best interest of the public" and can obtain material in the "best interest of the public" which is another way of saying that they will take what they want from our bodies if it is needed for research. How else do you think they got the material for research on cot death. Only the procurators fiscal can do a post mortem on cot death babies and could not come up with one form which gave them the permission to use the body parts for research and yet all this research was done.

I believe it must be terrible for all of you when you must be in the same room as an old body. I would not want that job.

=====

Re:Medics mull organ donor options

Posted by DoricMan - 2008/06/11 12:59

Having posted the original post, I must declare where I am coming from.

There are two events in my life, the first my wife's younger sister with terminal kidney failure, and no donor.

The next is one of my fishing pals, he suffered kidney failure but was able to exist, albeit in a highly restricted environment. A donor organ was found and he returned to full health in an amazingly short time. He returned to work and was a regular member of our angling club.

I understand the doubts and deeply held concerns, that have been expressed above, but ways must be found to help overcome some, and perhaps the majority, of these difficulties.

We need to come to terms with this important public health issue, and how to increase organ donation.

=====

Re:Medics mull organ donor options

Posted by Levenax - 2008/06/11 13:49

Probably the simplest way to sort this difficult problem is to tell people that they won't get a donor organ if they fall ill if they haven't signed up to the organ donation scheme. It would be a bit like breakdown insurance on your car; pay the premium i.e. sign up as a donor, and get the insurance after a suitable latent period i.e. an organ if and when you need one.

It would probably take a few deaths of lazy or stupid types before the message sank home to the great unwashed but IMO such a scheme would have a fair chance of success.

=====

Re:Medics mull organ donor options

Posted by LYDIA REID - 2008/06/11 15:04

Levenax wrote:

Probably the simplest way to sort this difficult problem is to tell people that they won't get a donor organ if they fall ill if

they haven't signed up to the organ donation scheme. It would be a bit like breakdown insurance on your car; pay the premium i.e. sign up as a donor, and get the insurance after a suitable latent period i.e. an organ if and when you need one.

It would probably take a few deaths of lazy or stupid types before the message sank home to the great unwashed but IMO such a scheme would have a fair chance of success.

I would probably have worded that post differently but I agree.

I do not think it is fair if a person will not sign up to allow the use of their organs and then expect to get one if they fall ill.

I have and would again use that issue in a campaign to get people to sign up.

=====

Re:Medics mull organ donor options

Posted by LYDIA REID - 2008/06/11 15:16

DoricMan wrote:

Having posted the original post, I must declare where I am coming from.

There are two events in my life, the first my wife's younger sister with terminal kidney failure, and no donor.

The next is one of my fishing pals, he suffered kidney failure but was able to exist, albeit in a highly restricted environment. A donor organ was found and he returned to full health in an amazingly short time. He returned to work and was a regular member of our angling club.

I understand the doubts and deeply held concerns, that have been expressed above, but ways must be found to help overcome some, and perhaps the majority, of these difficulties.

We need to come to terms with this important public health issue, and how to increase organ donation.

I wondered when I read the post.

This must be a very important issue in your family and I agree, some solution must be found and quickly. I hope your wife's sister gets a transplant soon.

I wonder if you read my previous post and the suggestions we made for increasing the number on the register without losing the support of the public.

Dr Simpson MSP is the man putting pressure on Nicola Sturgeon to increase capability within the NHS to do more transplants, I believe she will try to do that soon, as that is the only way more transplants will be done at this time. I wonder if you listened to that debate. If you want to send a message to me with your own e-mail I will send you a copy of some of the correspondence which outlines the suggestions made to increase the donor register.

Our organisation is very much concerned with making sure that authorisation is fair and open but I can promise you we put as much work into trying to find ways to increase the transplants in Scotland.

=====

Re:Medics mull organ donor options

Posted by LYDIA REID - 2008/06/11 21:39

Clare wrote:

LYDIA REID wrote:

Clare wrote:

I didn't realise the refusal rate (on the part of relatives after a registered donor has died) was as high as 40%. When you think about it that's massive! Nicola Sturgeon is saying the "key" is for people to tell their relatives when they register. I think the real key is for the wishes of these people to be respected by their relatives and I think that is the first angle this should be viewed from. Imagine the difference it would make if those refusals weren't permitted, if a person's wishes couldn't be overturned by relatives after their death. Surely donors who register are essentially making a decision along the lines of making a will almost and so legally their wishes should be paramount and legally irrevocable?

I am more and more drawn to the idea of properly promoting organ donation Martin, really. Nothing is unclear then but is straightforward.

My previous post possibly included one scenario that won't arise but I'm not sure. I've realised the "presumed consent" proposal will almost certainly only include adults and not children, yes? Maybe someone could clarify.

I think tho that the scenarios I've referred to would still arise involving relatives in a "presumed consent" situation and that the distress there would be much greater than where relatives of a registered donor over-rule the deceased wishes. How bizarre would it be if we went from a situation whereby relatives of a registered donor were able to stop that process to a position where the relatives of someone whose wishes weren't known were unable to stop their organs being taken?

I know they are saying we can opt out but ultimately I can't get away from the fact that our bodies don't belong to the State and the whole "presumed consent" thing has a ring to it which disturbs me.

We have to change the way we persuade people to become donors and promote it everywhere. GPs could kick that off by asking every patient they see, dentists too, opticians: donor cards should be available everywhere. everywhere. We must go that route but first let's get rid of the clause whereby relatives can overturn a person's wishes. That would be a very good start given the high percentage of cases where that happens. I was thinking it would be maybe around 7-10 per cent, but 40% is a huge amount, its almost half. We need to address that.

Claire we fought for the right of the personal decision and it is something that I truly believe in. Realistically though when you are in the situation where it is your loved one dead or rather someone is telling you they cannot be saved. It is usually the result of two main scenarios. It may all be a terrible shock and the person has had a heart attack or knocked down, No time to say goodbye and along comes this person who is asking that they be put onto a machine which will keep organs working while they are removed, before your loved one is in your eyes properly dead. it is a leap of faith in the person who is telling you that your loved one is dead but not really dead. Your brain does not work as it normally would, your only feeling is to protect the body as this is all you have left of this much loved person. Perhaps best explained by the fact that some people want to put warm things onto their loved ones when they are buried it is completely illogical but that is grief and how it effects some people. If your relative has gone through a long illness and you have feelings along the lines of what if they could be saved or just not properly dead. You may feel they have had enough now just leave them in peace to die in dignity. You may also feel a terrible horror at the thought that a scalpel is to open the body of this person before you have a chance to get used to the idea of the death of this much loved person.

Lydia, the point I'm making is that if a person makes a decision about the matter for themselves and registers as a donor their family should simply not be allowed to overturn that decision. Families should not be asked for their approval, the person has already made the decision. Grief doesn't come into the matter, the decision has been made already, and surely they should wish to honour that person's wishes? The issues surrounding this problem would best be dealt with if as I have suggested the registration process includes that person's decision being final and barring relatives from changing it at a later date.

As the law stands in the new bill technically the relative cannot change that decision. The law says that the person has carried a card or signed the register and according to law then the decision is final. I believe that is how it should be. The biggest problem I see is not enough education. In years to come it will change as we now have packs in upper levels of Schools which are designed to encourage a discussion in class. This we hope to extend to video's and other teaching aids with the hope that it will cover more than one or two lessons.

Our hope is that with discussion it will become more normal, the feeling of disgust will not exist. We hope that as with all discussion this subject will become a standard discussion at home and with mates so that generations to come will believe it is standard practice.

It is though unlikely we will ever lose the feeling that effects a relative when they cannot bring themselves to allow that scalpel to touch their loved one. It is a very brave decision for a relative to allow the body of the person they love to be cut and part of their body to be removed. We have a saying and that is an organ is a gift of life and you cannot take a gift.

Keeping the profile high for organ donation is as important or possibly more important than getting names on a register.

Doctors are aware that negative publicity does not do the profile any good.

I don't know if you saw the terrible publicity recently over the mum who sat at her daughters side as she died only to discover that although her daughter had her name on the register, and her mother was dying while waiting on a kidney, and her mother was a perfect match, the mother could not receive the kidney, as there were other donors on the list above her and the organs were given to them. It was heartbreaking but unfortunately the law must be adhered to in these situations.

We have also made suggestions such as walls round cemeteries could be covered with plaques holding the names of people who have donated organs or people who have given permission for a post mortem which will help research or teaching. We believe this small measure could make huge changes to attitude. Only the brave can have their name on this wall.

=====

Re:Medics mull organ donor options

Posted by Levenax - 2008/06/11 23:05

LYDIA REID wrote:

We have also made suggestions such as walls round cemeteries could be covered with plaques holding the names of people who have donated organs or people who have given permission for a post mortem which will help research or teaching. We believe this small measure could make huge changes to attitude. Only the brave can have their name on this wall.

A few years ago one of my work colleague died suddenly from a stroke. She was a lovely person and aged only about fifty. We were all very upset by her death but when we heard her minister tell the packed congregation at her funeral that many of her organs had been used to help others it was a most uplifting moment that brightened what was an otherwise black day. Your idea for plaques sounds like an excellent one and I wish you well with it.

=====

Re:Medics mull organ donor options

Posted by LYDIA REID - 2008/06/12 08:48

Levenax wrote:

LYDIA REID wrote:

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Thanks levenax,

I find the powers that be look on measures such as these as petty and stupid; they don't have the close contact with families that we do and don't seem to see how a family or person will react to this idea of posterity.

The idea of a family member on the wall or your own name on that wall particularly in the beginning when the publicity level is high, could make the difference between saying yes and no. I feel a special corner could be kept for children. One of the bravest decisions for a parent is to allow a post mortem on their child or for the organs of an older child to be used for transplant.

This attitude won't stop us trying to bring this about.

=====

Re:Medics mull organ donor options

Posted by Clare - 2008/06/12 09:46

Lydia

I'm kind of losing the topic here through your posts as a lot of information from you is about policies you are working towards via groups you are involved with. You keep saying "we" and its confusing me. I also am unsure about parents "allowing" a PM to be done. I thought if there were grounds to conduct a PM then the medical authorities had to do it to establish the facts.

On the "presumed consent" issue I'm going with information provided elsewhere and one statistic quoted by Nicola Sturgeon states that 40% of families refuse to give the go ahead for organs to be removed.

The whole "presumed consent" thing is being buried under all of that. I am all for donation of course but I'm now sure I'm against "presumed consent" completely.

Re:Medics mull organ donor options

Posted by scunnert - 2008/06/12 16:11

'Dead' patient comes around as organs are about to be removed

tinyurl.com/6qcdk7 http://www.scotsgait.co.uk/images/fbfiles/images/surgeons_32599t.jpg

Re:Medics mull organ donor options

Posted by Clare - 2008/06/12 18:39

Good grief Scunny!

Re:Medics mull organ donor options

Posted by scunnert - 2008/06/13 03:39

A useful link:

<http://www.eubios.info/NBB/NBBOT.htm>

Re:Medics mull organ donor options

Posted by Brenna1508 - 2008/06/13 09:36

Scunnert posted: 'Dead' patient comes around as organs are about to be removed
That is why I am against presumed consent. I think we're on dangerous ground even considering it until absolute death
can be declared without error.

Re:Medics mull organ donor options

Posted by LYDIA REID - 2008/06/25 08:55

Clare wrote:

Lydia
I'm kind of losing the topic here through your posts as a lot of information from you is about policies you are working
towards via groups you are involved with. You keep saying "we" and its confusing me. I also am unsure about parents
"allowing" a PM to be done. I thought if there were grounds to conduct a PM then the medical authorities had to do it to
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Sturgeon states that 40% of families refuse to give the go ahead for organs to be removed.

The whole "presumed consent" thing is being buried under all of that. I am all for donation of course but I'm now sure I'm
against "presumed consent" completely.

Hi Claire,

Although this thread would seem to be finished, I wanted to answer this now I have time. I am sorry if I confused you I
do blether on.

There are two types of post mortems.

1. Hospital post mortem, which can be authorised by the patient before or after death. It can be authorised by a relative after death both methods apply to organ donation for transplant.

The patient being any person over the age of twelve.

This can be a written authorisation or (our objection) a verbal authorisation.

A verbal authorisation needs only a member of NHS staff to say the person said yes.

The member of staff then fills in a form, which states the person told them they wanted a post mortem after death.

This is applicable for organ donation for transplant.

This authorisation in our view, could, from a member of staff with no morals or honesty, be taken from a person in a deep coma for instance. No proof needed.

This verbal authorisation can be taken from a child of twelve or over without including the presence or authorisation from a parent. This would only be useful if the child had an unusual or terminal illness.

Although the law states a relative cannot veto written or verbal authorisation from the person, in practice doctors do not want the adverse publicity of a relative storming away to the media so in practice if the relative objects the procedure does not take place.

2. The second type of post mortem is one in which relatives have no say. A doctor if they believe foul play has occurred or the police can approach the Procurators Fiscal and ask the Procurators Fiscal to carry out the post mortem.

This is done automatically if for instance a person is involved in a death at home or at work. If it is possible, they may have contracted a transmittable disease.

In practice if a person dies in hospital, the procurator Fiscal has the right with the new law to carry out a post mortem "in the public interest", which means if the case is interesting to doctors. In practice the fiscal may not know that a post mortem has been carried out in his name until it is done. The pathologists want the post mortem. It is now possible if the body parts are needed for research to have a post mortem carried out. This can happen when the person or relative objects to the body being used for research.

Originally, the remit of the Procurators Fiscal was to discover the cause of death only.

In general, I believe we need the Procurator Fiscal to carry out post mortems this protects us all. I feel his remit should be protection and this system should not be used to procure material for research.

This technically was how it used to work; when we objected to the fiscal, being used to procure material for research it was then made law, that the fiscal could do this.

In the past, for instance much research was carried out on cot death babies. The Fiscal could not produce one form of authorisation from one parent for the use of the bodies of the babies for research and yet we all know the research was published. The fiscal only could carry out these post mortems. It is though obvious that the post mortems were vital to protect babies from the possibility that a parent may have killed them.

If I use we and us, it is simply to describe the organisation that I chair which is Justice for the Innocents. Originally the parents in Scotland whose children had organs removed at post mortem. We have grown into an organisation, which tries to make authorisation for procedures honest and fair.

The real reason pathologist want to use presumed consent is that people who do not have the ability or opportunity to access a computer to object will have organs removed without consultation. The people who cannot access an opt out card or just simply forget to take it with them.

The people most at risk are the alone, people with language difficulties, people with lower mental capabilities be that through lack of intelligence or mental health issues. The list goes on and on.

The volume is not really the issue, as we do not have the ability in Scotland to do more transplants at this time. The issue is that a blood test will confirm suitability.

Re:Medics mull organ donor options

Posted by LYDIA REID - 2008/06/25 09:00

scunnert wrote:

A useful link:

<http://www.eubios.info/NBB/NBBOT.htm>

hi scunnert

I cannot get that link to work so I am now having a tantrum that did not work either

=====

Re:Medics mull organ donor options

Posted by Martin - 2008/06/25 09:09

I'd persevere with the link, Lydia. It works for me. (I'm using Firefox 3 browser).

=====

Re:Medics mull organ donor options

Posted by LYDIA REID - 2008/06/25 09:35

Martin wrote:

I'd persevere with the link, Lydia. It works for me. (I'm using Firefox 3 browser).

Hi Martin,

Unfortunately you are advising a person who as yet cannot record from the telly. I have no idea what a Firefox 3 browser is. I have no idea what my browser is. Bless you for trying.

=====

Re: Scientists to deny Brown's organ donor rules

Posted by Brenna1508 - 2008/11/14 18:27

There is an update on this story at: [http://www.politics.co.uk/news/opinion-former-index/health/scientists-deny-brown-s-organ-donor-rules-\\$1249232.htm](http://www.politics.co.uk/news/opinion-former-index/health/scientists-deny-brown-s-organ-donor-rules-$1249232.htm)

Gordon Brown's proposal to make everyone a prospective organ donor unless they actively decline is set to be denied by the government's advisory board next week.

Though Mr Brown and England's chief medical officer both think the new proposal could save thousands of lives, the Organ Donation Taskforce is likely to decide that changing the law is pointless, the Times has learnt.

The 'presumed permission' system is thought by some consultants to have very little potential to increase organ donations and is likely to create hostility and recoil from the public as well as expediency issues for the NHS. It should be noted that the advisors cannot compel the government to comply.

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Re: Scientists to deny Brown's organ donor rules

Posted by DoricMan - 2008/11/16 11:53

Does anyone know how other countries deal with their "presumed consent" and whether it provides a greater supply of organs for transplant?

=====

Re: Scientists to deny Brown's organ donor rules

Posted by Robin T Cox - 2008/11/16 15:55

DoricMan wrote:

Does anyone know how other countries deal with their "presumed consent" and whether it provides a greater supply of organs for transplant?

See:

http://en.wikipedia.org/wiki/Organ_donation

There are four different legislative approaches to the donation, if the donor has not explicitly dissented. The least restrictive approach is the dissent solution, according to which the donor has to explicitly dissent to donation during his lifetime. According to the extended dissent solution, relatives may dissent in the event the potential donor has not consented.

The different legislative approaches are the main reason that countries like Spain (27 donors per million inhabitants) or Austria (24 donors per million inhabitants) have higher donor rates than Germany (13 donors) or Greece (6 donors). In most countries with the dissent solutions, there is no waiting list for donations, or the list is short, while most countries with consent solutions have substantial organ shortages. The reason for this is that, in both situations, most people do not explicitly state their wishes. Thus, in a country requiring dissent, most people will not have dissented, while in a country requiring consent, most people will not have consented.

=====

Re: Scientists to deny Brown's organ donor rules

Posted by Robin T Cox - 2008/11/17 10:39

However, according to today's Guardian:

The UK Organ Donation Taskforce has come out against the idea of an opt-out system, which is supported by Gordon Brown and the British Medical Association (BMA).

Elisabeth Buggins, of the taskforce, which was set up by the government to help increase the number of donors for transplants, said a new law that would require people to actively opt out of the donor register was "quite clearly not the best way of increasing the number of organs available".

The taskforce, an independent advisory committee, amassed more than 400 pages of evidence from around the world.
<http://www.guardian.co.uk/society/2008/nov/17/health-organ-donation>

=====

Re: Scientists to deny Brown's organ donor rules

Posted by DoricMan - 2008/11/17 14:12

Robin T Cox wrote:

However, according to today's Guardian:

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Elisabeth Buggins, of the taskforce, which was set up by the government to help increase the number of donors for transplants, said a new law that would require people to actively opt out of the donor register was "quite clearly not the best way of increasing the number of organs available".

The taskforce, an independent advisory committee, amassed more than 400 pages of evidence from around the world.
<http://www.guardian.co.uk/society/2008/nov/17/health-organ-donation>The taskforce has done a comprehensive appraisal of all the relevant facts and for the moment presumed consent in some form or other is out of the question now. However, increasing organ donation through increased awareness or other active promotion is a welcome step forward. I also hope that we are informed of the lives saved through organ donation, as a result of the new initiatives.

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