

PERCEPTIONS AND PRACTICES ENCOURAGING ORGAN DONATION AMONG DOCTORS IN SURAT CITY

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ABSTRACT

This study was carried out among 100 randomly selected medical practitioners reveals that 47% had encouraged their patients to donate organs commonly cornea and kidney (19%). The study brings out their perceptions regarding organ donation, reasons favouring their view for motivating for organ donation and their perceived barriers towards the same. The study also describes the situations when a patient and his relative should be approached for this sensitive topic.

Keywords: Organ donation, Surat city, doctors

INTRODUCTION

Organ Transplantation is a boon to medical industry as it has helped in saving the lives of those who would have died otherwise. There is a great need for human organs for transplantation. In fact, the need far exceeds the supply of transplantable organs. This disparity has led to the formulation of various legislations, attempting to regulate the scarce resources (transplantable human organs) and to help establish an equitable system to allocate the organs where they can do the most good. The Transplantation of Human Organs Act (1994) provides for the regulation of removal, storage and transplantation of human organs for therapeutic purposes, to prevent commercial dealings in human organs and accept brain death and make it possible to use these patients as potential organs donors. Various amendments were made in 2008 that is to make the punishments under the Act harsh and cognizable for the illegal transplantation activities to determine the offenders from committing this crime and to provide for registration of the centers for removal of organs from the cadavers and brain stem dead patients for harvesting of organs instead of registration

of centers for transplantations only. THOA limits live transplants to three categories: relatives by blood, spouses, and those who donated "out of affection. Organs that can be donated are kidneys, heart, liver, pancreas, intestines, lung, bone and bone marrow, skin, cornea. In 1967 the first successful cadaver kidney transplantation in KEM Hospital, Mumbai was done. In 1994 the first successful heart transplant was done at AIIMS, New Delhi and in 1995 the first successful multi-organ transplant was done at Apollo Hospital, Chennai. Until 1997, only four hospitals in India were undertaking cadaver transplants. From 1995 to 2001 there have been a total of 426 cadaver transplants in India including kidney (377), heart (34), liver (12), pancreas (2), lungs (1). This averages to just over 50 cadaver organ transplants a year.

India lags behind in the implementation of a cadaveric donation programme. Annually, while over 100,000 Indians suffer from End Stage Renal Disease, only a mere 3,000 are recipients of a donor kidney, of which only a small percentage are cadaver organs. In fact, the total number of patients who have received cadaver kidneys in India from 1995 to 2003 is

only 524, an abysmally small figure. The major problem now facing transplant surgery is a critical shortage of available organs.¹ Health care providers need to have a better understanding of their role in organ donation so as to encourage and motivate the public in general and the family members of patients with brain stem death, in particular, towards organ donation. This should be done in order to save the lives of many patients with organ dysfunctions. The number of fatal road traffic accidents every year in India is constantly rising and averages at about 8,500 per year. At any given time there are 8 to 10 brain dead patients in different ICU's in any major city of the country. There is hence potentially a huge pool of brain death donors available in India. In the UK, 12 out of every 1 million persons donate. They perform 650-700 liver transplantations a year. In India, less than 0.1% of the population participates in cadaver donation.²

With the advent of potent immunosuppressive drugs for renal transplantation, the scope of potential living kidney donations to patients with endstage renal disease (ESRD) has widened.³ Healthcare professional's knowledge, attitudes and behaviors are essential factors in fostering an environment that positively influences organ donation rates.⁴ The unique and close relationship many physicians develop with their patients may further facilitate greater donation rates.⁵ However, several barriers have been identified to physicians' involvement in the donation process, including discomfort with the subject, unwillingness to address the issue in an urgent setting, and a lack of adequate knowledge of the criteria for and process of donation.⁶ Adding donation and transplantation curriculum to medical school training may be the best means of enhancing physician knowledge of and involvement in the donation and transplantation process.⁷ So there is a great need to address physicians about the organ donation, diagnosis of brain death patients and encourage them to make people aware about organ donation, remove misconcepts and religious beliefs and ask them to come forward for organ donation.

METHODOLOGY

This study was carried out among 100 randomly selected medical practitioners in Surat by distributing questionnaires pertaining to their beliefs, opinions and awareness regarding organ

donation. The period of study spanned over two months from 29 September 2007 to 5 December 2007. The study group includes both- the private sector and those employed in Govt. and public institutions. Both general practitioners and those specializing in various fields practicing in - Bhatar, Athwa lines, Ghod Dod road, Varaccha, Majura gate, Ring road, and Rander have been incorporated into the study.

OBSERVATIONS AND DISCUSSIONS

33%, 20%, 12%, 10% and 9% of respondents belonged to the category of general practitioners and specialists of medicine, surgery, obstetrics and gynecology and pediatrics, whereas the remaining comprised equally of ophthalmology, E.N.T., anesthesia/ radiology and pathology with an attempt to include all age group distribution. 46%, 32%, 15% and 7% had opined that cornea, kidney, stem cells and bone marrow were the organs that should ideally be donated for potential transplantation. Thus we observe that cornea and kidney emerge as the top two choices about organs that they perceived ought to be donated. One fifth (20%) of them were affiliated to an organization that had an organ donation program, such as the Surat branch of the Indian Renal Foundation.

47% of them had encouraged their patients for an organ donation at some or the other time during their practice, most commonly cornea (28%) followed by kidney (19%). 34% had motivated their patients for organ donation primarily as they had perceived that organ donation is a life saving measure and this practice needs to be encouraged and practiced more frequently for saving lives of potential recipients; another 10% counseled their patients for donation so as to help spread greater awareness and to inspire others, in addition to saving lives of recipients, whereas the remaining 3% gave no specific single reason. On the other hand 53% had reported of not having encouraged their patients to donate organs as they had either never come across such a case where they perceived that they should discuss about organ donation (22%); they found it difficult to raise such a sensitive issue with the patients and their relatives (20%); they had perceived absence of proper infrastructure available for organ donation (10%); and, lastly they did not themselves believe in organ donation (1%) so they did not encourage any potential organ donor or their relative.

Among the 47% respondents who had encouraged their patients for organ donation, the major difficulties perceived by them as obstacles for promoting organ donation were religious beliefs (18%); complex and ethical issues surrounding compensating of potential donor (16%); patients were unwilling even after explanation (7%); and extreme apprehensiveness (6%).

When all of the respondents were quizzed as regards the experiences of the doctors while discussing this issue with the patients and relatives, the overwhelming majority (71%) had perceived that people do not wish to donate organs easily when this issue was posed to them. What is heartening is that 29% do agree with ease. The medical practitioners had reported that as per their perceptions, people between the ages 25 to 50 are the most willing (48%) to donate their organs, followed by those >50 (44%), whereas people under the age of 25 years are least willing to donate (8%).

The respondents were asked their as to why do donate organs, 40%, 31%, 19% and 10% perceived this to the wish of patient i.e. the deceased, to help other people in need of transplants, to set an example and on the basis of as past personal experience favouring their inclination for organ donation. Lack of awareness / information (39%), religious factors (25%), lack of facilities (18%), non-support of relatives (16%), and physician do not convince (2%) were perceived as obstacles by the medical practitioners that prevent people from donating organs.

As regards the situation in which a patient and the relative should be approached for counseling regarding organ donation 59% had perceived that this should be done when the patient is in a brain dead state, 31% perceived that it should be when the patient is in a critical stage and is appropriate with discussing such a situation. An half (48%) of the medical practitioners in Surat

CONCLUSION

In a study on perceptions of health care professionals, barriers noted in Africo-americans were preexisting medical conditions, financial concerns, reluctance to ask family members and friends, distrust of the medical community, fear of surgery, and lack of

awareness about living donor kidney transplantation.⁸

In a study on Medical students, it was noted that 80% had signed a donor card and were willing to donate organs, 96% were willing to donate kidney while living to family member and 32% to stranger. The barriers noted were the desire to be buried with organs intact, personal conflict with the concept of organ donation, concern that carrying a donor card will lead to insufficient medical care.⁹ Main Problem faced by physicians to promote organ donation is lack of awareness and religious beliefs and misconcepts. This can be improved through newspaper, radio, television, religious meetings and discussions among family members and friends. This will help overcome cultural and religious stigmata. Enhanced public awareness of the need for transplants was seen as the most important means of increasing organ harvest.¹⁰ Donor cards have been used in western countries to encourage awareness and practice of organ donation. Six percent of the Spanish population¹¹ and 5% of the Swedish was carrying donor cards.¹²

After an intensive campaign to promote organ donation by distributing brochures, the rate increased threefold in the following year in the same countries. It indicates that individuals who are aware of organ donation may come forward to donate organs. Thus organ donation ought to be made by the person before death.¹³ This also helps in removing myths about ventilating patients with a hopeless prognosis. Some felt that many of the problems faced by the kith and kin of the patients can be overcome by using donor cards. An intensive public awareness campaign should be launched periodically.

Inclusion of organ donation in the medical curriculum was welcomed by the majority of the participants. It would help physicians to gain access to viable organs during the crucial window period and also to remove incorrect assumptions about the medical suitability of organs.

The government could make it compulsory to donate organs of brain dead patients so that the wastage of organs, and thereby shortage, is solved. One brain dead patient can help seven patients in critical stages to lead normal lives. According to cardio-thoracic surgeons the heart of a cadaver can be kept alive for five hours and can even be flown from one city to another if needs be and transplanted. Cadaver organ

donation ennobles the dead through the living. The Eye donation activists of the country are already lobbying for a "required request law" in event of a death in a hospital. This is likely to be soon passed by the parliament and be enacted as a law.¹⁴ Hospital Organ Donation Registry coordinates the process of cadaver organ donation i.e. organ donation after death and transplantation

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