Institute of Medicine

Organ Donation: Opportunities for Action

Report available via http://www.nap.edu

WASHINGTON, May 2, 2006 — After examining a wide range of proposals to increase rates of organ donation, a new report from the Institute of Medicine of the National Academies urges federal agencies, nonprofit groups, and others to boost opportunities for people to record their decisions to donate, strengthen efforts to educate the public about the benefits of organ donation, and continue to improve donation systems. The committee that wrote the report also supported initiatives to increase donations from people whose deaths are the result of irreversible cardiac failure, but said that the nation is not yet ready to enact policies that presume consent to donate unless individuals opt out.

"All members of society have a stake in an adequate supply of organs for patients in need, because all of us are potential recipients as well as potential donors," said committee chair James F. Childress, John Allen Hollingsworth Professor of Ethics, professor of medical education, and director, Institute for Practical Ethics and Public Life, University of Virginia, Charlottesville. "This committee looked carefully at a wide array of proposals to reduce the current deficit of available organs. We believe that at this time the best approaches are to pursue ways to increase donations based on circulatory determination of death, to enhance public education about the value of organ donation, to increase opportunities for people to opt in, and to sustain quality improvements in the organ donation system."

Rates of organ donation in the United States have increased steadily since 1988, and the number of organs recovered has climbed by approximately 1,100 each year. In 2005, 7,593 deceased donors provided 21,215 organs for transplantation, and there were 6,896 living donors. But this growth lags far behind the increasing need, as approximately 40,000 individuals are added to the U.S. transplant waiting list each year, with a net increase of about 6,000 people over the prior year. At the start of 2006, more than 90,000 people were waiting to receive organs.

Most organs come from deceased donors whose deaths have been determined by neurologic criteria based on the irreversible loss of activity in the brain, including in the brain stem. At most, there are about 16,000 eligible donors whose deaths are declared in this way each year in the United States. Many more deaths are determined based on circulatory criteria, meaning an irreversible loss of heart function that leads to permanent cessation of blood circulation. For instance, it is estimated that at least 22,000 people who die of heart attacks outside of hospitals could be potential donors, provided certain ethical and practical issues can be resolved. The committee recommended that federal agencies work with states and cities that have extensive trauma centers and emergency response systems to develop demonstration projects that can determine the feasibility of increasing rates of donation after circulatory determination of death.

People in the United States must make a deliberate decision to donate their organs, or next of kin must make this choice after their deaths. Some groups have suggested enacting policies that would presume consent to donate unless a person explicitly opts out. While supporting many of the principles underlying a presumed-consent approach, the committee determined that it is premature to replace the current legal framework requiring explicit consent. Without broad public support, such a shift would probably reduce rather than increase the supply of organs, the report says. However, the committee encouraged those with a stake in increasing donation rates to work to create the social support necessary to make this change.

Financial incentives – including direct payments, coverage of funeral expenses, and charitable contributions – should not be used to increase donation rates, the report says. Data on the effectiveness of incentives to increase donation rates are lacking, and experimental programs to gauge

(MORE)

efficacy could lead people to view organs as commodities and diminish donations from altruistic motives. Moreover, there is more evidence that other initiatives – such as quality improvement efforts under way in hospitals and organ procurement organizations across the country – can significantly boost rates of donation and successful transplantation.

Individuals who have declared their willingness to be organ donors should not be given preferential status as recipients of organs, the report adds. Inequities in access to health care, information about organ donation, and opportunities to record willingness to be a donor led the committee to conclude that this approach should not be adopted.

Organ donation by living individuals saves lives, reduces recipients' waiting times, and in some cases improves the chances for a successful outcome. However, these operations place otherwise healthy individuals at risk, and government oversight of the living donation process is limited. Hospitals should provide independent advocacy teams to each person who volunteers to be a living donor to ensure that the individual's decisions are fully informed and voluntary, the report says. The committee recommended further scrutiny of the process of living donation and additional assessments of living donors' risks.

The study was sponsored by the U.S. Department of Health and Human Services and the Greenwall Foundation. Established in 1970 under the charter of the National Academy of Sciences, the Institute of Medicine provides independent, unbiased, evidence-based advice to policymakers, health professionals, industry, and the public. A committee roster follows.

Copies of the pre-publication version of ***Organ Donation: Opportunities for Action*** are available from the National Academies Press; tel. 202-334-3313 or 1-800-624-6242 or on the Internet at *http://www.nap.edu*. Reporters may obtain a copy from the Office of News and Public Information (contacts listed above).

# # #

[This news release and report are available at *http://national-academies.org*]

INSTITUTE OF MEDICINE
Board on Health Sciences Policy

Committee on Increasing Rates of Organ Donation

James F. Childress, Ph.D. *(chair)*
John Allen Hollingsworth Professor of Ethics and
Professor of Medical Education;
Professor
Department of Religious Studies; and
Director, Institute for Practical Ethics and Public Life
University of Virginia
Charlottesville

Mary Ann Baily, Ph.D.
Associate for Ethics and Health Policy
Hastings Center
Garrison, N.Y.

Richard J. Bonnie, LL.B.
John S. Battle Professor of Law;
Professor of Psychiatric Medicine; and Director
Institute of Law, Psychiatry, and Public Policy
University of Virginia
Charlottesville

Clive O. Callender, M.D.
Chairman
Department of Surgery, and
LaSalle D. Lefall Jr. Professor of Surgery
Howard University College of Medicine
Washington, D.C.

Raul de Velasco, M.D.
Clinical Assistance Professor of Medicine
Clinical Associate Ethics Program
Miller School of Medicine
University of Miami, and Chair
Baptist Health System Bioethics Committee
Miami

James M. DuBois, Ph.D., D.Sc.
Director
Ph.D. Program in Health Care Ethics, and
Associate Professor of Health Care Ethics
St. Louis University
St. Louis

Lewis R. Goldfrank, M.D.
Professor and Chairman of Emergency Medicine
New York University School of Medicine
Bellevue Medical Center, and Medical Director
New York City Poison Control Center
New York City

Sandra Hickey
Director of Human Resources
Georgetown Community Hospital
Georgetown, Ky.

David H. Howard, Ph.D.
Assistant Professor
Rollins School of Public Health
Emory University
Atlanta

Danny O. Jacobs, M.D.
Chair
Department of Surgery
Duke University Medical Center
Durham, N.C.

Cynda H. Rushton, D.N.Sc., R.N.
Associate Professor of Nursing and Faculty Member
Phoebe Berman Bioethics Institute
Johns Hopkins University, and
Program Director
Harriet Lane Compassionate Care Program
Johns Hopkins Children's Center
Baltimore

David Schkade, Ph.D.
Jerome Katzin Chair and Professor
Rady School of Management
University of California
San Diego

Debra A. Schwinn, M.D.
James B. Duke Professor of Anesthesiology and Professor of Pharmacology/Cancer Biology and Surgery
Duke University Medical Center
Durham, N.C.

Keith Wailoo, Ph.D.
Professor
Department of History and Institute for Health, Health Care Policy, and Aging Research
Rutgers University
New Brunswick, N.J.

INSTITUTE STAFF

Cathy T. Liverman, M.L.S.
Study Director

THE NATIONAL ACADEMIES PRESS

Read more than 3,000 books online FREE! More than 900 PDFs now available for sale

THE NATIONAL ACADEMIES
Advisers to the Nation on Science, Engineering, and Medicine

Quick Links

- Email Updates
- Get Our Catalog
- Permissions Requests
- Deskcopy Requests
- D.C. Bookstore
- Career Opportunities
- Marian Koshland Science Museum

Surface Temperature Reconstructions for the Last 2,000 Years

Sufficient evidence shows that the last few decades of the 20th century were warmer than any comparable period in the last 400 years. Read the report

PASSION. DRIVE. PERSISTENCE.

ONE STORY AT A TIME...

The National Academy of Sciences launches its new biography series for middle-school readers: Women's Adventures in Science

WOMEN'S ADVENTURES IN SCIENCE

Get the books!

Special Presentations

» Special Online Version of *One Universe: At Home in the Cosmos*

» Netsafe Kids: Protecting children from pornography and sexual predators on the Internet

Special Offer

order online and save 10%

»More Special Offers

Categories

- Agriculture
- Behavioral Science
- Biology
- Computer Science
- Chemistry
- Earth Science
- Education
- Energy
- Engineering
- Environmental Issues
- Food & Nutrition
- General Interest
- Industry & Economics
- International
- Marine/Maritime
- Math & Statistics
- Materials
- Medicine/Public Health
- Natural Resources
- Physical Sciences
- Public Policy
- Research Issues
- Space Science

New Releases

Food Marketing to Children and Youth: Threat or Opportunity?

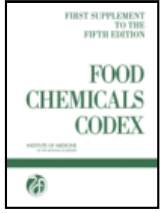
What impact has food and beverage marketing had on the dietary patterns and health status of American children?

MORE

Improving the Quality of Health Care for Mental and Substance-Use Conditions: Quality Chasm Series

Examines the distinctive characteristics of health care for mental and substance-use conditions.

MORE



Food Chemicals Codex: First Supplement to the Fifth Edition

Provides revisions and updates, and reports on changes in tests, monographs, and assays to the Fifth Edition.

MORE

Quick Pick

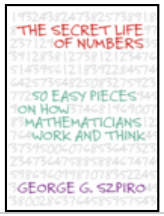
GO

Enter last 6 digits of ISBN (xxxxxx)

Featured Book

Health Risks from Exposure to Low Levels of Ionizing Radiation: BEIR VII Phase 2

- Science & Ethics
- Transportation
- Urban Development



The Secret Life of Numbers: 50 Easy Pieces on How Mathematicians Work and Think

Chock full of stories, anecdotes, and entertaining vignettes, this book shows us how mathematics really does affect almost every aspect of life.

MORE

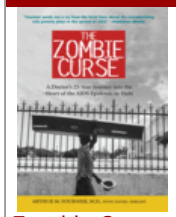
Best Sellers

- Health Risks from Exposure to Low Levels of Ionizing Radiation: BEIR VII Phase 2
- How Students Learn: Science in the Classroom
- Multiple Origins, Uncertain Destinies: Hispanics and the American Future
- Rising Above The Gathering Storm: Energizing and Employing America for a Brighter Economic Future
- Learning to Think Spatially: GIS as a Support System in the K-12 Curriculum

Popular Searches

- public health
- space exploration
- science education
- childhood obesity
- stem cell research

Featured JHP Book



Zombie Curse: A Doctor's 25-year Journey Into the Heart of the AIDS Epidemic in Haiti

Special Collections

- » Women's Adventures in Science Series
- » Nutrient Requirements of Animals
- » Dietary Reference Intakes
- » Tools for Understanding Evolution
- » Science and Technology for Children (STC) Books
- » Science Classics
- » More...

Copyright © 2006. National Academy of Sciences. All rights reserved. 500 Fifth St. N.W., Washington, D.C. 20001.
Terms of Use and Privacy Statement