

Overview of Organ and Tissue Donation

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AIMS

Role of the Specialist Nurse Organ Donation – SN-OD

Why is donation important?

Donation after Brainstem Death (DBD)

Brain Stem Death Tests

Donation after Circulatory Death (DCD)

Donation Process

Tissue Donation



Role of the SN-OD

- 24 hour on call Expert Advice
- Offer option of donation to families
- Perform in-depth patient assessment
- Work closely with members of MDT in order to facilitate process of donation
- Co-ordinate theatre process
- Offer family follow-up and support
- Form working relationships with key members of hospital staff
- Provide education on donation





- The NHSBT 2020 strategy aims to make organ donation a NORMAL part of end of life care.
- In donation we are dealing with <u>anticipated</u> but inevitable bereavement.
- The needs of family members are unique and the evidence shows that they benefit from specialist involvement even if donation is declined.

Why is organ donation Blood and Transplant important?

Donors & their Families

"If staff do not ask, they let the families down. Knowing something good came out of our tragedy is a great comfort" - quote from donor family

The Patient & The Law:

- Individual autonomy and expressed wishes now lawful as part of Human Tissue Act 2004
- DOH 2008 OD should be part of all end of life care where appropriate

Recipients

- Best treatment for end stage organ failure
- Life saving treatment
- Supply vs demand

The reality is that...



- THREE people die each day waiting for an organ transplant.
- There is an on-going shortage of organ donors in the UK.
- There are currently around 6500 patients waiting for transplants.



Potential donors....?

NICE 135 Guideline (2011)



Identify all potential donors early by either:

Defined clinical trigger factors after catastrophic brain injury:

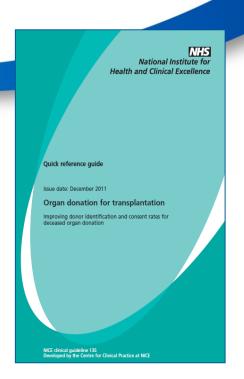
- absence of one or more cranial nerve reflexes

And

 Glasgow coma scale score of 4 or less not explained by sedation

Or

 Intention to withdraw life-sustaining treatment, which will, or is expected to, result in circulatory death





What are the contraindications to donation?

Contra-indications



The only ABSOLUTE contraindications are CJD and HIV associated illness.

Age, multi-organ failure, positive virology, malignancy, post operative complications or extended periods of hypoxia remain firmly within the parameters of a potential organ donor.

Each case must be assessed on an individual basis.

Note: Police or coroners involvement does **not** prevent donation.



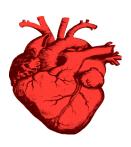
What Organs can be Transplanted?

What Organs can be **Transplanted?**

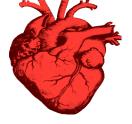


Organs

- Heart
- Lungs
- Liver
- Kidneys
- Pancreas
- Multi visceral/ Small Bowel (DBD Only)









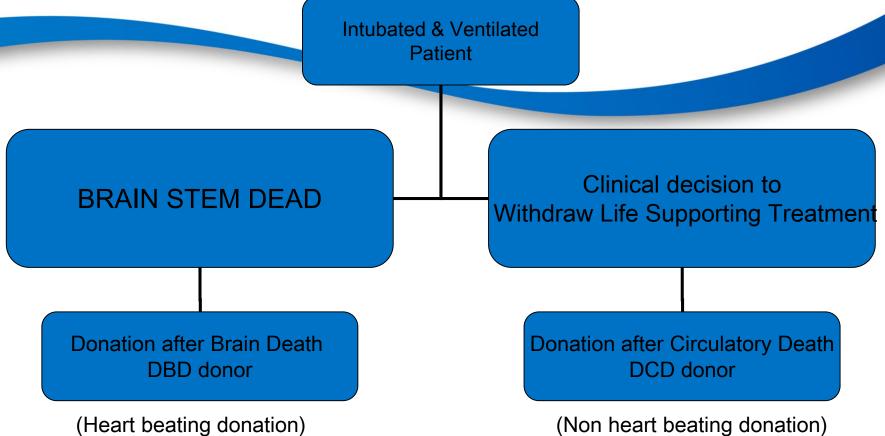
Tissues

- Cornea
- Skin
- Bone
- **Tendons**
- Heart Valves



Two Types of Deceased Organ **Blood and Transplant Donors**



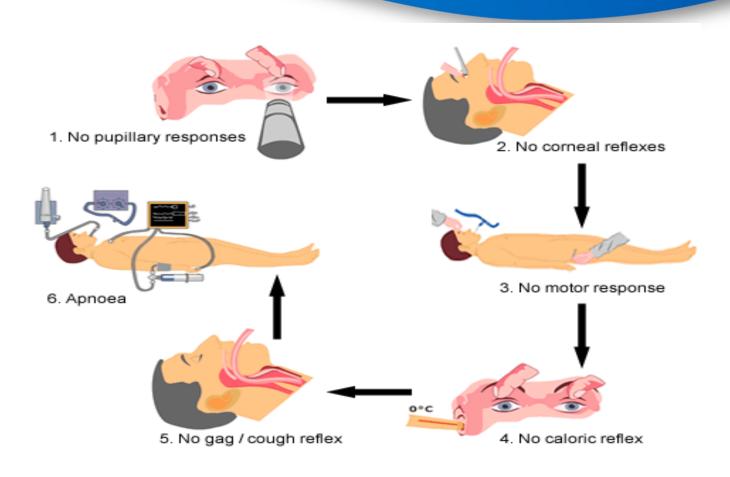




- Donation after Brain Death (DBD)
 - Irreversible brain stem death
 - Fulfils criteria for diagnosis of BSD
 - Active donor management to ensure stability of the patient and preconditions for testing addressed
 - Confirmation of BSD
 - Approach for organ donation and if consent is obtained these donors will be transferred to theatre ventilated



NAS Blood and Transplant





- Donation after Circulatory Death (DCD)
 - Treatment is futile
 - Decision has been made to withdraw life sustaining treatment
 - Approach for organ donation
 - If consent is given these donors will remain ventilated until the transplant surgeons arrive. At this point treatment is withdrawn
 - Asystolic donation



Other types of Donations

- Live donations eg Kidney
- Tissue donation.

Tissue Donation



- Can occur up to 24 hours after death
- Patients who die outside of critical care can donate (Do not have to be I&V) or those that may have been declined for organ donation
- Need to ask the family about wishes before referring
- Consent is taken over the phone
- Donation occurs in the mortuary



The Donation Process

•	Identified potential donor	F
•	PMH	Α
•	Patient/family consent	M
•	Patient assessment	1
•	GP History	L
•	Coroner Consent	Υ
•	Bloods (Virology/Tissue Typing)	
•	Extra Tests (ECG,ECHO/TOE,BRONCH,CXR))
•	Collection and inputting of data	S
•	Offering	U
•	Coordination	Р
•	Theatres/Retrieval	P
•	Last offices	0
•	Family follow-up	R
		т



Potential Donor Audit

- A national audit of all Critical Care and Emergency Department deaths of patients aged 80 years and below.
- Identify the true potential of solid organ donors
- Identify the obstacles/barriers to donation.
- Increase the referral of potential donors to the organ donation team
- Increase the numbers of organs for transplant.

Novel / Rare techniques Blood and Transplant

- Limb transplants
- Uterine transplants
- Research projects.

Opt out law



- Not applicable to under 18
- Not for those who lack capacity
- Not for people who have lived in England for less than
 12 months or are not living here voluntarily.
- Not applicable for rare or novel techniques
- Go live date- Spring 2020



A ny patient where withdrawal of life sustaining treatment is planned or Brain Stem Death is suspected/anticipated.

- o NOT withdraw treatment or offer donation as an option until you have spoken to a member of the Donor Services Team to discuss this.
- On **03000 20 30 40** or speak to a member of the "in-house" team (based on ITU) as early as possible.
- N ever make this decision on behalf of a patient or their family. 30% of the population are registered donors. The specialist nurse will consult the register.
- Only absolute contraindication to donation is CJD **EVERY** other patient should be referred regardless of age or diagnosis.
- R elatives are 7 times more likely to consent to donation if the discussion involves a donation specialist try to achieve a "Collaborative Approach" every time.
- ? If you have any questions please contact a Specialist Nurse via the pager



Any questions??

To summarise



- Role of the SNOD
- Importance of deceased donation
- Types of deceased donation
- Organs and Tissues donated.
- Opt out law.



Thank you