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Compensation for organ donation

The move calls for giving the signatory of a donor card credits concerning his placement on the waiting list of candidates for transplants, if one day he is in need of such an operation.

By Yaakov Lavi

As someone who has been active in the field of heart transplants in Israel for over 16 years, I have experienced countless times the frustrating situation of a deceased person whose organs could save one of my patients, but whose relatives refuse to agree to donate them, citing a variety of reasons. I have even occasionally witnessed the infuriating phenomenon of candidates for heart transplants who admitted that they themselves would not have agreed to donate the organs of a loved one, had he died.

In Israel the rate of organ-donation agreement is only 45 percent, a rate that is about 50 percent lower than in most Western countries. The percentage of signatories that have a donor card ("ADI" cards) in Israel is only 8 percent; in Western countries the percentage of signatories to similar cards is 30-40 percent. With a rate similar to that in the West, we would be able immediately to double the number of organ transplants each year, and to shorten the waiting list, which now stands at about 1,000 patients, in just a few years.

These problematic statistics have led me to initiate a move that was advanced first in the context of the National Transplant Center, and at present in that of a subcommittee of the Knesset Health Committee, which is discussing the wording of a new transplant law prior to its second and third readings.

The basic assumption is that the higher the proportion of people who take out organ donor cards, the higher the rate of agreement will be to donate the organs of the deceased. The experience accumulated thus far in Israel has taught that with one exception, in all cases in which a deceased person had signed such a card in his lifetime, his family agreed to the donation. The signature on a donor card is rightly seen as a kind of spiritual "testament" of the deceased for his relatives.

The move that I have initiated calls for giving the signatory of a donor card credits concerning his placement on the waiting list of candidates for transplants, if one day he is in need of such an operation. In order to discuss the implications of such a step, which for the first time introduces a non-medical criterion to the list of medical criteria that determine a patient's place on the list, the National Transplant Center set up a special forum in which several of the best minds in the field of ethics and law in Israel participated. After a penetrating discussion, the following proposal was accepted by a majority: Every list of candidates for an organ transplant will be headed by those candidates who signed a donor card at least a year before being listed (the exact order will be determined according to the currently accepted medical criteria). Candidates who did not sign a donor card in time will be placed further down the list, according to medical criteria.

In case the medical condition of a candidate who has not signed a donor card requires moving him up to the top of the list, because of an immediate danger to his life, he will be moved up without regard to the fact that he did not sign. However, if at any given time the list of top-priority candidates includes two candidates for an actual transplant who are identical in terms of their medical situation, the fact that one signed a donor card will be considered an additional criterion in his favor with respect to receipt of the organ.

Those patients who are already on the list for a transplant will be given an extension of three months in which to sign a donor card. Assuming that all the candidates on the list provide such a signature, the existing roster will remain

unchanged, and listing according to the new criteria will begin only with the new patients who join, beginning a year from the date of the publication of the new procedures.

Children under age 18 will not be included in the arrangement. The same number of points on the list of candidates for transplants will also be granted to the relatives of the deceased who gave their de facto agreement to donate his organs, even if the deceased was a signatory to a donor card, as well as to living donors who donate a kidney or a part of their liver, whether to a relative or as an altruistic donation to an unknown recipient.

In the wake of the initiative, a paragraph has been introduced into the new organ transplant bill, which, as we have mentioned, is now being discussed in a subcommittee of the Knesset Health Committee; this paragraph grants the health minister the power to order the addition of nonmedical criteria to the process of allocating organs for transplants.

The writer is the director of the Heart Transplant Unit at Sheba Medical Center.

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