

NY pilot expands organ recovery to at-home deaths

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A Nov. 22, 2010 photo released by the New York City Fire Department, shows the FDNY's Organ Preservation Unit. As part of a new six month pilot program, the vehicle will be staffed with personnel trained to get a donor family's consent, perform medical procedures necessary to keep the donor organ viable, as well as transport the donor to the hospital to harvest the organs for transplant. If someone dies at home, the team will have roughly 20 minutes to start preservation procedures. (AP Photo/FDNY)

(AP) -- Families choosing whether to donate a loved one's organs usually have days to grapple with their decision, all while the patient lies hooked up to machines in a hospital bed.

But they would have only about 20 minutes to make the choice in a new pilot program meant to recover organs from patients who die at home.

That's roughly how long a team of organ specialists will have after a [cardiac-arrest](#) patient is declared dead to arrive at the home, check a

donor registry, determine medical eligibility, obtain a family member's consent and get the person into a specialized ambulance.

The program launching Wednesday - the first of its kind in the U.S., according to organizers and other experts - could eventually lead to thousands more organs donated each year nationwide. But the six-month trial, a collaboration between Bellevue Hospital and New York City's police and fire departments, could be declared a success without a single organ being recovered, organizers say.

Instead, what's being tested is the ability of the team - composed of two EMTs, an [organ donor](#) family services specialist and a Bellevue emergency physician - to successfully interact with grieving and shocked family members in the limited time available before it is too late to use a person's organs. A police detective will arrive at the scene before the team to make sure there's nothing about the death that warrants a [criminal investigation](#).

The project is "very, very modest but has the potential to prove a concept that could be revolutionary," said Dr. Lewis Goldfrank, director of emergency services at Bellevue Hospital Center and the leader of the pilot, which is being funded with a \$1.5 million grant from the U.S. Department of Health Resources and Services Administration.

Of the roughly 50,000 people who died of all causes last year in downstate New York area hospitals, only about 600 were judged eligible to donate their organs. Of those, only 261 became donors, said Elaine Berg, the president and CEO of the New York Organ Donation Network.

The small number is due in part to policies preventing the vast majority of people who die of cardiac arrest from becoming donors, said Goldfrank, who estimated that each year 350,000 to 450,000 people in

the U.S. suffer cardiac arrest outside of a hospital, with most dying.

Only kidneys will be recovered in the pilot program. last year, more than 4,650 people in the U.S. died while awaiting a kidney - accounting for 70 percent of deaths on the transplant list, according to the United Network for Organ Sharing.

As an ethical measure, EMTs attempting to revive a person and the doctor who ultimately makes the decision to declare a person dead won't know whether the patient is a registered organ donor and whether he or she is considered a candidate for the pilot program.

Team members will be sent to the scene in a specialized "Organ Preservation Ambulance," but will only enter the home after a person has been declared dead. Once there, they must determine whether the person is a registered organ donor and they must check whether the person has any medical conditions - such as cancer or AIDS - that would eliminate them as candidates.

And they must get the permission of family in a matter of minutes.

That's a task that the medical community has long considered nearly impossible, said Dr. Hasan Yersiz, director of organ procurement at the University of California Los Angeles.

"Think about it," he said. "You have somebody dying and you have to make that decision very fast. It's not an easy situation."

The pilot program team has been told they have 50 minutes from the time a person's heart stops beating to the time his or her body must be placed in the ambulance and hooked up to a machine that creates blood circulation. Once at Bellevue, another machine will increase body oxygen. Only residents of the island of Manhattan who are between 18

and 59 will be eligible for the pilot program.

Similar programs are already in place in France and Spain, where there are fewer barriers because people in those countries are considered organ donors unless they opt out, Goldfrank said. In the U.S., a person must register as a donor - in New York state it's almost always done through the DMV - and family must also consent to the procedure after death.

In America, "people are very concerned about protecting individual rights," said Nancy Neveloff Dubler, a bioethicist with the Montefiore-Einstein Center for Bioethics who advised those developing the pilot program. "The technology is there, the question is will we use it for the good of people who are waiting for organs."

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