

Only a policy of presumed consent will improve organ donation rates, say experts

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The Organ Donor Taskforce is unrealistic if it thinks that it can dramatically increase donation rates without adopting a policy of presumed consent, say experts in the British Medical Journal today.

The authors, Sheila Bird from the MRC Biostatistics Unit in Cambridge and John Harris from the Institute for Science, Ethics and Innovation in Manchester, argue that "the taskforce did not consider all the relevant evidence, particularly on relatives' refusal rates, and that the current policy, however reinforced, will not substantially increase the number of organs available."

By modelling different scenarios, they show that only a policy of presumed consent will substantially increase the number of organs available for transplantation.

They believe that the taskforce's report - commissioned to assess the impact of presumed consent on organ donation rates - has a number of serious shortcomings. For example, they say the taskforce misreported their assessment team's findings by referring to "apparent correlation" between presumed consent and donation rates.

The taskforce also failed "to exploit the UK's potential donor audit to measure, under different scenarios, the additional number of kidney, pancreatic, liver, heart and thoracic transplantations that there could have been in the past 10 years from donations after brain stem death," they add.

Using data from the past 20 years, they analysed the effect of four scenarios to determine how many extra transplants could have been carried out over a 10-year time frame. These varied from the current opt-in policy but with a reduced refusal rate of 30%, a presumed consent system with an opt-out rate ranging from 5-10%, and finally a mandatory donation system.

Based on these scenarios the researchers calculate that there could have been up to 2,880 extra solid organ donors. Changing the presumption, they say, has the potential to deliver 68% of the extra solid organ donors that mandatory donation would give.

They conclude: "Twenty years after the UK's first confidential audit, we continue to jeopardise substantial quality adjusted life years (uncounted by the [Organ Donor](#) Taskforce) for those awaiting transplantation by chasing a holy grail of enhanced consent by means other than presumption. Presumed consent, even allowing for over-rule by relatives, should ultimately cut costs, add life, and save bereaved families from anxious, as well as generous, deliberation in extremis."

Provided by British Medical Journal

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