



**Consultation document on Organ Donation and Transplantation  
Response Form**

**Contact details of person and/or institution submitting comments**

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**1. This document describes the situation at European level in the area of organ transplantation, identifying the main problems. Are all the basic problems identified? Are the problems identified correctly described?**

**( max 750 words)**

Local organisation of transplant programmes contributes to loss of potentially useable organs. There remain logistic difficulties even in countries with long-established transplant programmes.

The lack of a career structure for surgeons in particular prevents the development of a professional cadre. Most surgeons working in transplantation are only peripherally involved. In thoracic transplantation, all have other commitments.

There is a continuing lack of legislative steps to encourage organ donation. As an example, the recent UK Human Tissue Act 2004 represented a lost opportunity to move towards an "opting-out" system. The UK has the very highest family refusal rate – 42% in this document, but up to 48% in some studies.

**2. The document also describes a number of actions oriented to tackle the main problems. Is there any other initiative that you consider useful?**

**( max 750 words)**

No

**3. The shortage of organ donors is being described as the main problem in the field. Do you think that EU action would have an added value? Do you think that the initiatives described in the document in this direction are sufficient? Are there any other actions that should be promoted at EU level?**

**( max 750 words)**

Yes.

**4. Accessibility to transplants varies widely in the EU. Do you think that the Commission should foster the coordination between Member States to improve the situation? Do you think that the initiatives described in the document in this direction are correct? Are there any other actions that should be promoted at EU level?**

**( max 750 words)**

No. There are major difficulties in moving organs transnationally, mainly revolving around ischaemic time. The benefits of shorter ischaemic times outweigh the benefits of better matching for all but kidney transplants. National donor pools, except for very small member states, are adequate for almost all kidney transplants

**5 The document presents the following three options for future EU policy on organ transplantation.**

**(1) Use of existing programmes only**

**(2) Active coordination between Member States on organ quality, safety and availability**  
**(3) Minimum harmonisation on quality & safety, plus EU initiative on organ trafficking**

**Which one of these options do you consider the most appropriate? Would you wish to modify / add / remove some of the contents included in the option? Please explain your reasons**

**( max 750 words)**

We support option 3. Minimal harmonisation is of benefit to new member states. There is no point in duplicating legislation if there are existing and effective frameworks. Trafficking remains a potential problem except for a few instances.