

JOURNAL WATCH



INTRODUCTION

Welcome to the latest edition of the ISODP Journal Watch. As 2023 nears the end, we take a moment to thank a few important partners. First, our team wants to thank Stephen Beed from Canada for his exceptional leadership as president of the ISODP. He leaves a strong legacy and international impact as he steps down from his position. We also appreciate the support of the Canadian Donation and Transplantation Research Program (CDTRP) and Canadian Blood Services (CBS) for the Journal Watch. Importantly, we shout out our own review team! Aisha Adil, Amina Silva, David Thomson, and Stéphanie Larivière are smart, diligent, and committed and bring you another interesting summary of new research.

The recent ISODP Organ Donation Congress in Las Vegas brought together a world class group of clinicians, researchers, administrators, and family partners. It was an event to be remembered. Kudos to the organizers on creating a stimulating program. Recordings are available [here](#). Congratulations to the presenters - especially the trainees and the abstract winners! We will highlight these in our futures issues.

In this installment, we bring together global experiences from Canada, US, Spain, Brazil, and Turkey. We all grapple with similar issues and through the science of donation and knowledge translation efforts like the ISODP Journal Watch, we hope to share our common experiences and highlight successes that will impact systems and support patients and families worldwide. Thank you to all for the work you do to make lives better.

Dr. Sonny Dhanani

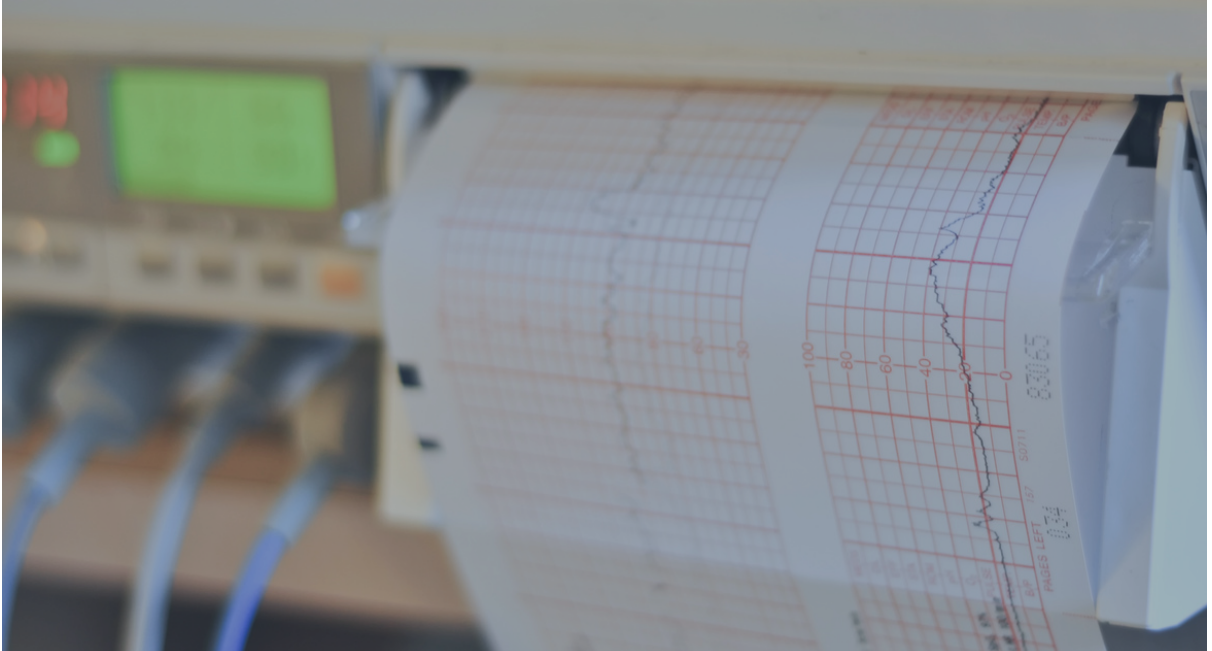
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Maintaining the permanence principle of death during normothermic regional perfusion in controlled donation after the circulatory determination of death: Results of a prospective clinical study

Mario Royo-Villanova et al.

American Journal of Transplantation, September 2023

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As anyone who attended the recent ISODP conference in Las Vegas – or any other donation focused conference in the last few years – knows, one of the principal factors limiting widespread deployment of normothermic regional perfusion (NRP) is concern over potential brain perfusion once the circuit is activated. This paper was designed to evaluate the possibility of cerebral blood flow during abdominal and thoracoabdominal NRP. While limited to 10 patients, the methods were physiologically sound, including the insertion of a microcatheter into the circle of Willis to measure intracranial blood pressure. None of the controlled DCD donors demonstrated any return of cerebral blood pressure during either abdominal or thoracoabdominal NRP. Larger studies that confirm these findings will be necessary to fully exclude the possibility of cerebral flow during NRP, but they suggest that the surgical techniques described in this manuscript would be safe for many patients undergoing controlled DCD.

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Interventions to Improve the Quality in the Organ and Tissue Donation Process

**Renata Bentes de Oliveira Restier et al.
Transplantation Proceedings, August 2023**

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This scoping review explored interventions to support the multidisciplinary team involved in organ and tissue donation, with a focus on disseminating quality throughout the process. The study analyzed 56 publications and highlighted interventions that significantly impact the improvement of results and quality in organ donation. Key interventions identified include the use of indicators, audits, early identification of neurocritical patients, donor maintenance management, and professional education. These interventions aim to enhance each phase of the organ and tissue donation process, leading to increased notifications and actual donors. The paper emphasizes the simplicity and feasibility of implementing these interventions, which enable the measurement of performance, identification of inefficiencies, and initiation of actions for process improvement. Notable interventions include the use of realizable goals, frequent audits, validation of improvement opportunities, and education for professionals involved in the donation process. The interventions tracked in this scoping review suggest the implementation of a set of actions formed by monthly audits, traceability, and reports with process indicators, coupled with continuous training for healthcare teams to improve the quality of organ and tissue donation processes. The interventions outlined in the paper are portrayed as simple, executable, and applicable in diverse global contexts, offering a promising avenue for improving organ and tissue donation outcomes.

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Canadian organ donation organizations' donor audit processes: an environmental scan

Samara Zavalkoff et al.

Canadian Journal of Anesthesia, October 2023

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This paper from Dr. Zavalkoff and colleagues discusses the current state of deceased donor audits (DA) in Canada, emphasizing the need for a national approach to standardize and improve the process. Accurate estimation of organ donor potential and identification of missed donation opportunities (MDOs) are crucial for quality assurance and improvement. In Canada, there is no national approach to DA, and data collection and reporting practices vary among provinces. The paper presents the results of an environmental scan (ES) aimed to understand current DA practices among the 11 Canadian organ donation organizations (ODOs). The study found significant variability in the frequency, methods, and scope of DAs across jurisdictions. The primary reasons for conducting DAs were to estimate donor potential, evaluate system performance, identify MDOs, and inform quality improvement initiatives. However, reporting practices, data definitions, and metrics varied among ODOs. The paper concludes that a national strategy is necessary to standardize deceased donation data definitions, metrics, and the DA process. This standardization would enable accurate assessment of the organ donation and transplantation (ODT) system's performance, facilitate quality improvement initiatives, and ultimately benefit patients awaiting transplantation.

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Does Death Anxiety Affect the Attitude Towards Organ Donation?

Melike Bayrak & Ülkü Saygılı Düzova
Transplantation Proceedings, March 2023

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Bayrak & Düzova report a cross-sectional study from Turkey examining nursing students' organ transplantation awareness and whether death anxiety influences students' attitudes toward organ donation. Given the growing length of organ transplant waiting lists and organ donor availability, multiple factors limit the organ donation process. Authors identify that healthcare professionals' attitudes toward organ donation significantly influences decision-making by potential donor patients and families hence attention to the attitudes and perceptions of healthcare professionals is a critical area of investigation. This present study surveyed 144 nursing students between December 2021 and February 2022 using Fear of Death Scale and Organ Donation Attitude Scale. Results showed that 88.9% students did not donate organs and 57.8% indicated intent to donate in the future. Those wanting to donate organs and the death anxiety of nursing students was found to be moderate. When comparing death anxiety by sex, women's death anxiety (witnessing and thinking about death, uncertainty of and suffering from death) were higher than men's however this did not impact organ donation. Bayrak & Düzova conclude that implementing interventions for improving future nursing candidates' attitudes can significantly impact care and decision-making processes for organ donation. Understanding cultural sensitivities, addressing students' lack of experience, and addressing brain death and organ transplantation into existing curriculum are all potential areas of improvement.

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US Prison Policies on Organ Donation for Individuals Who Are Incarcerated

Yoshiko Iwai et al.

JAMA Network Open, Research Letter | Health Policy, March 2023

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Organ donation from the context of incarceration is ethically challenging. It is an inherently vulnerable population and the ability of policies to ensure safeguards is paramount. In this interesting JAMA Research Letter, the authors have reviewed United States Prison policies across 50 states, Washington DC, FBI, and ICE. Overall, only 21 systems had available policies that could be reviewed. In 15 living donation was permitted and in 13 posthumous donation was permitted. In the US there are 27 states that allow capital punishment with only 10 of these having donation related policies. In one state, incarcerated people are allowed to donate their organs in exchange for the prospect of early release. The federal bureau of prisons allowed living donation to family members only and no posthumous donation. Immigration and Customs Enforcement had no policy available. The researchers also note that hospitals in prisons are not uniformly obligated to share outcome data. The authors correctly, in this readers opinion, conclude by appealing for a more uniform ethical policy to be created from a central overseeing agency such as UNOS.

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