

# SEVENTH WORLD KIDNEY DAY 2012 DONATE KIDNEYS TO SAVE LIVES

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## Organ Donation: What Should We Do?

## Round Table

## Donor Screening Systems

### THE COST OF ORGAN TRANSPLANTATION IN TURKEY PRACTICES

**Prof. Aydın Dalgıç, M.D.**  
Gazi University Medical School Department of General Surgery

The average annual treatment cost of a patient who undergoes renal transplantation for the first year is around 22 000 Turkish Liras. In the following years this figure reduces by 50%. Similar significant economic gain is also possible for the liver and heart transplant surgery.

The optimal use of a single cadaveric donor's organs provides a contribution of over 20,000 Turkish Liras to our economy accompanied by a healthy life opportunity, free of cost.



### TISSUE AND ORGAN TRANSPLANTATION COORDINATOR

**Nurse Esin Gülkaya**  
Hacettepe University Medical School Hospitals

Ministry of Health has great support for the realization of organ transplantations. In recent years, although detection of brain death has been increasing, even if this is not the desired case, unfortunately organ donation has not increased yet. Primarily health care professionals must be trained, awareness and belief in organ donation must be created.



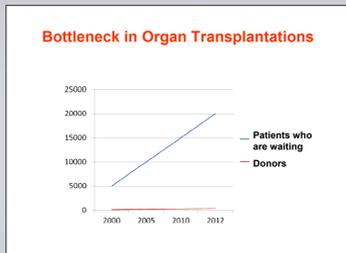
**Prof. Sadık Ersöz, M.D.**

**Eyüp Kahveci, M.D.**

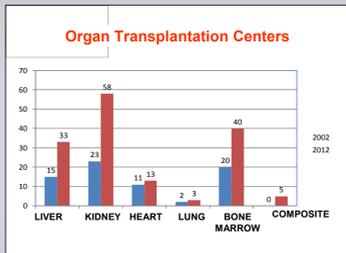
## ORGAN TRANSPLANTATION SERVICES IN OUR COUNTRY



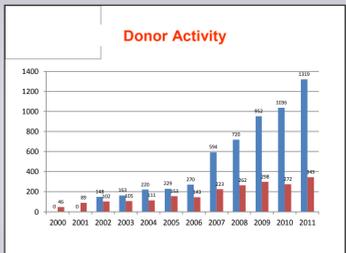
**Table 1.** Alarming figures of organ waiting lists and lost lives while waiting for organs show us how much serious Picture we have to fight against.



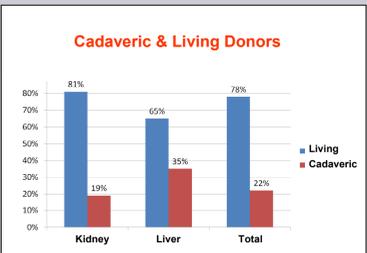
**Table 2.** Regarding today's performance in organ transplants, it seems unlikely to cope with this high number of patients in the waiting lists, due to the serious shortage of organs.



**Table 3.** As far as numbers are concerned, today organ transplants have been performed in almost every geographic region in our country by 61 renal transplantation centers, around 33 liver transplantation centers and around 13 heart transplantation centers.



**Table 4.** There are two sources of organs in solid organ transplantation: A living donor and a cadaveric donor. As for living donors, there are two sources: In relatives, unrelated. Still another source of living donor is application of cross-transplantation. Cadaveric donor is an individual who has developed brain death and after the determination of brain death and with the permission of his family.



**Table 5.** Cadaveric donors are seen as the most important organ source in the world and in developed countries. Nearly 80% per cent of organ transplantations are provided from this source (Table 5).

## THE TRANSMISSION OF THE OPINIONS OF THE REPRESENTATIVE OF THE MINISTRY OF HEALTH



**Bahri Kemalolu, M.D.**  
General Managemess of Health Services – Branch Director of Organ Transplantation Services

**Bahri KEMALOGLU stated :** The Ratio of Living Donation, The Cost of Organ Transplantation, Cooperation with the European Union on Organ Transplantation, Relationship with Media, The fewness of Cadaveric Organ Donation, Strengthening the Infrastructure of Information of Ministry of Health and Future Projects. The most prominent among these is:

### The Small Number of Cadaveric Organ Donation

If people who request organ donation among the families of persons diagnosed with brain death, after being subjected to training with a professional certification by Certification Training of Organ and Tissue Transplantation Coordination Center, much more positive results will be obvious. In this context, as involved in our legislation, through these certification trainings organized by the ministry, transplantation coordinators are provided for each hospital with a ventilator in their intensive care beds. When brain death is diagnosed, Organ Transplantation Coordination Center is one of the most important touchstones which provides coordination between intensive care professionals and the physicians who will diagnose the brain death. Training for intensive care physicians tries to provide completion of missing information about brain death, clarification of controversial issues, family interviews, diagnosis of brain death which is the primary rule to ensure organ donation,

increase in physicians' interest in this issue. Two most important obstacles increasing organ donation from cadavers are as follows: Diagnosis of brain deaths is not on the desired level in intensive care units, physicians are not sufficiently sensitive to this issue. In this regard, determination of the potential donor hospitals should be provided, strengthening of the structure related to specialist physicians and other health personnel so facilitating the diagnosis of brain death with the physical conditions of intensive care units.

### International Projects

The European Union Projects (Compliance of organ donation project), MTN (EU-European Union) Mediterranean Transplant Network, ETPOD (European Training Project for Organ Donation), EOD (Essentials in Organ Donation) Courses, BSA (CE-Council of Europe) Black Sea Area Transplant Network (Turkey – Spain).



**Prof. Mehmet Deniz AYLI, M.D.**  
Kafkas University Medical School Nephrology Section

**The organization of organ donation and organ transplantation systems are currently serious and significant problems in our country. While the number of cadavers from 40 per million population in developed countries, this rate is only 3 per million in our country. Although there are over 6,000 intensive care beds in our country and one notification of brain death is expected, unfortunately this number is one tenth of it.**



**Assoc. Prof. Çetin KAYMAK, M.D.**  
Ministry of Health Ankara Training and Research Hospital Clinic of Anesthesiology and Reanimation

**As a result of studies in literature, follow-up criteria in intensive care units and the increase in awareness, while brain death diagnosis increases, about 9% reduction in mortality rates have been reported in intensive care. These results are connected to more closely follow up of patients in intensive care units. Therefore, patients with Glasgow Coma Scale less than 5 in intensive care units should closely be monitored.**