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## Uniform Anatomical Gift Act

### Oregon and Idaho Sign Revised UAGA Into Law

The opportunity to save and enhance lives through organ and tissue donation has received a measurable boost in Idaho and Oregon with the passage of the Revised Uniform Anatomical Gift Act (UAGA) in each state. Thanks to the expertise of each state's uniform law commissioners and the efforts of many dedicated legislators, professionals, and the public, an improved and more comprehensive law has come into being.

The UAGA 2006 revisions represent an important update to laws related to donation. This act revises the earlier 1968 and 1987 Uniform Acts, which are the basis for organ donation throughout the United States. Without changing the basic concept that an individual may execute a document of gift to donate organs, UAGA 2006 makes the act more usable than the earlier acts. This bill represents a significant step forward in galvanizing support of an individual's magnanimous decision to donate organs and tissue to save and enhance lives through transplantation.

The revision accurately reflects the environment in which the donation process operates and seeks to bring conformity with the federal National Organ Transplant Act (NOTA) and Medicare regulations. The revision also supports donor registries and upholds individual autonomy by clarifying the binding personal decision for donation.

The revised UAGA:

- Expands persons, other than the donor, authorized to make an anatomical gift on behalf of the donor during the donor's lifetime to include a health care agent, parent or guardian.
- Grants minors who can apply for a driver's license the power to make anatomical gifts. However, the revision does allow either parent to revoke the gift if the minor dies under the age of 18.
- Provides clearer language regarding one's ability to revoke or refuse to make an anatomical gift.
- Reinforces an individual's right to make an anatomical gift and prohibits others from changing the decision. First person consent is substantially strengthened to bar others from amending or revoking a gift (or refusal) made by the donor.
- Provides remedies for intentional actions in violation of the Act while retaining immunity for good faith actions under the Act.

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- Strengthens the functionality and purpose of donor registries. Idaho successfully launched its registry in July 2004, and Oregon on April 2 of this year.
- Strengthens cooperation and coordination between procurement organizations and medical examiners.
- Harmonizes the Uniform Anatomical Gift Act with federal law, current technology and practice, and Advance Medical Directives.
- Successfully integrates the Oregon DMV database for 24/7 access by procurement agencies.

The revision is timely and brings both Oregon and Idaho into sync with best practices in the arena of organ, tissue, and eye donation. It allows for further success and makes a significant contribution to saving and enhancing lives.

The Revised UAGA has been endorsed by:

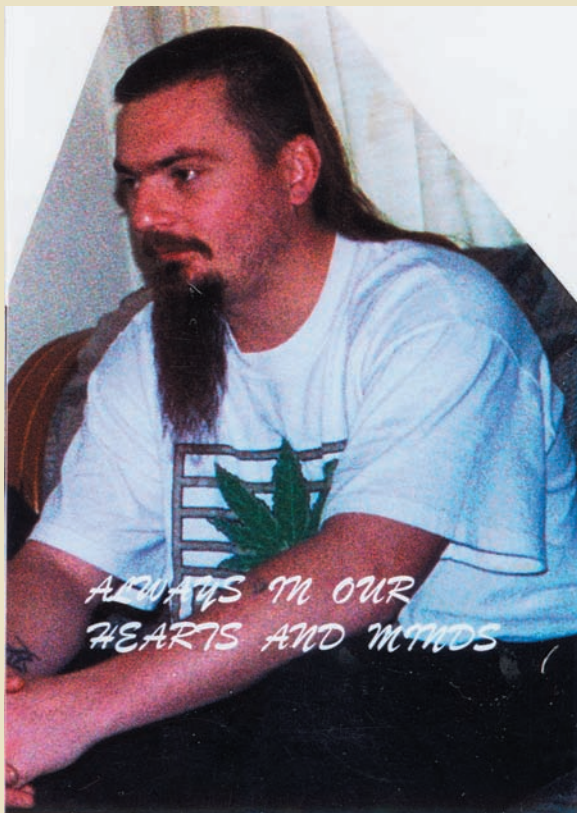
- American Academy of Ophthalmology
- American Association of Tissue Banks
- American Society of Cataract and Refractive Surgery
- Association of Organ Procurement Organizations
- Cornea Society
- Eye Bank Association of America
- National Kidney Foundation
- United Network for Organ Sharing

STATE	2007 INTRO-
ADOPTIONS:	DUCTIONS:
Arizona	Alabama
Arkansas	Alaska
Colorado	California
Idaho	District of
Indiana	Columbia
Iowa	Maine
Kansas	Michigan
Minnesota	Missouri
Montana	New Jersey
Nevada	New York
New Mexico	North Carolina
North Dakota	Texas
Oregon	US Virgin
Rhode Island	Islands
South Dakota	Washington
Tennessee	
Utah	
Virginia	

## "YOU CANNOT HURT ME ANY MORE THAN I AM ALREADY HURTING"

Bradley Thomas Jordan had always wanted to scuba dive. That is one reason why his mother Linda feels such a strong connection with the man who received Bradley Thomas's liver; three years after his transplant, the liver recipient has just become certified in scuba diving.

Bradley Thomas died in 2003 at the age of 28 after a motor vehicle accident. He donated his liver, heart, and two kidneys, and all the recipients are doing very well. Linda never had a second of doubt that her son wanted to be a donor. As a young teenager, even before he had a driver's license, Bradley



*"He was a no-nonsense person, but could still make you laugh until you were sick."*

Thomas asked his mom for a state ID card so he could get the "Donor" sticker on it. He recognized even then that organ donation was one way he could give others another chance at life.

When Bradley Thomas's family learned that he was not going to survive the accident, Linda was eager to hear that donation would be possible. The organ procurement coordinator and hospital staff, very appropriately, avoided talking with her about donation until after Bradley Thomas was diagnosed as brain dead, and his family had a chance to absorb that information. Since Bradley Thomas had been so adamant that he wanted to be a donor, Linda was comfortable and even relieved to talk about donation sooner than many families might be able to.

Her message to organ procurement coordinators and hospital requestors approaching families about donation is, "Don't hesitate to ask. I need something good to happen. You cannot hurt me anymore than I am already hurting."

Bradley Thomas left behind numerous friends and family members who loved him dearly. He acted as the nanny for his sister's nine children, ages 5 to 17. He knew all their schedules, knew their teachers, and knew just how to listen to and understand all of them, from the little ones to the high-school aged children. Bradley Thomas had friends who were homeless and friends who owned companies, and everything in between.

In addition to the people who loved him in life, he now has gained the gratitude of his four organ recipients and their friends and families, to whom he will forever be a hero.

## CONTROVERSIES IN ORGAN DONATION: TRANSPLANT TOURISM

The sale of human organs is illegal in the U.S. However, not all countries have the same laws or taboos against organ selling. The result is a fast-growing international trade in human organs for transplant. According to the World Health Organization, "Reports on 'transplant tourism' show that it makes up an estimated 10% of global transplantation practices. The phenomenon has been increasing since the mid-1990's, coinciding with greater acceptance of the therapeutic benefits of transplantation and with progress in the efficacy of the medicines - immuno-suppressants - used to prevent the body's rejection of a transplanted organ.<sup>1</sup>"

### QUESTIONABLE TRANSPLANT PRACTICES IN CHINA

Transplant practices in China have sparked significant international debate. According to a recent article in the *Wall Street Journal*<sup>2</sup>, "China performs more transplant operations every year -- about 10,000, doctors estimate -- than any country except the U.S. The costly procedures have been embraced by cash-strapped Chinese hospitals, which have also marketed their services abroad to wealthy foreigners.

Patients from rich nations such as the U.S., Japan and Israel have traveled to China for transplants that they couldn't get at home, sparking criticism that such people are taking organs that could have gone to needy Chinese...



Mallika was cheated by a kidney broker.

Doctors and human-rights groups outside China have also consistently criticized China for taking most of its organs used in transplants from executed prisoners. Chinese officials say such donations are legal and voluntary and have given no sign that they will abandon the practice."

### UNETHICAL ORGAN BROKERS

In many impoverished parts of the world, poor and vulnerable populations are targeted by organ brokers, looking to recruit living kidney donors. Often these donors do not receive adequate, or any, medical care following their donation, and too often they are not even paid what they were promised for their organ.

"Mallika (no last name) is the only person to officially register a case with the police against a kidney broker. The broker promised \$3,000 for her kidney, but gave her just \$700, she says.

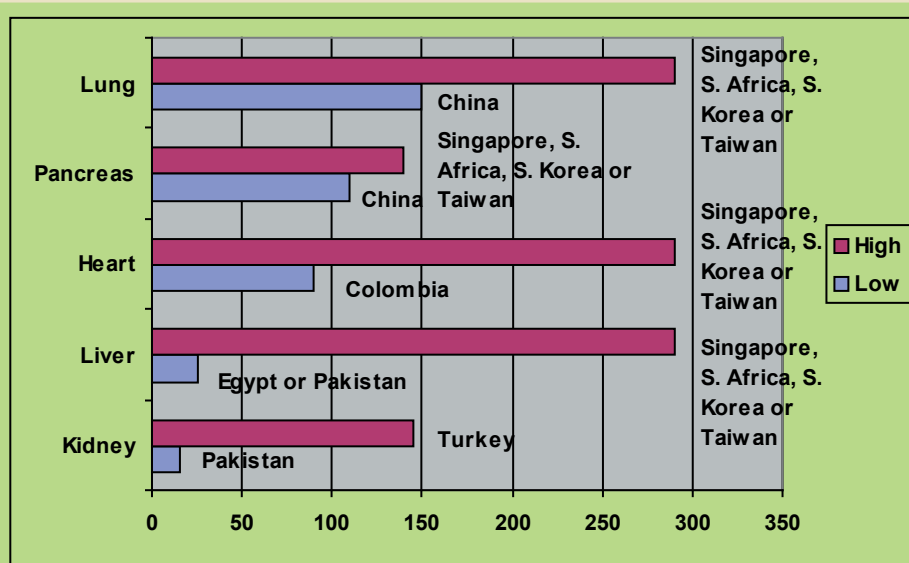
Now her 16-year-old son is on dialysis at Stanley Hospital in Chennai [India] after jaundice destroyed his kidneys. 'I wish I had never sold my kidney,' Mallika said through tears during an interview with Wired News. 'I could have saved my son's life with it. Now I need to buy one on the black market, but I don't have the money to do it.'<sup>3</sup>"

ADDRESSING THE PROBLEM

On June 26, 2007, The Board of Directors of United Network for Organ Sharing (UNOS) approved a series of resolutions amplifying UNOS' position regarding transplant tourism. The Board adopted the statement below [condensed for space]:

"...It is the considered view of the UNOS Ethics Committee that the current practice of transplant tourism is predicated on exploiting the desperation of vendors, recipients and their families... The practice of transplant tourism, by design, manifestly undermines the ethical principle of non-maleficence. Furthermore, it is the position of the Ethics Committee that participation in such a practice cannot be defended on ethical or current empirical grounds.<sup>4</sup>"

India criminalized the sale of human organs in 1994, and that same year created laws to be followed for all human organ transplants. No exchange of money is to take place between the donor and the recipient, and non-related living donors need to obtain governmental approval before they can donate an organ.<sup>5</sup>



According to organ transplant provider BEK-Transplant, Inc., based in Tianjin, China, "The...price covers the new organs, priority on the waiting list, the transplant surgery, hospital stay, interpreter etc. It does not cover your travel costs, hotel stay & transportation."

"Note: If the patient's function of the heart and lungs is poor, the patient has diabetes and/or high blood pressure and if the patient's condition is bad, an additional charge might be added or that the planned transplant will be canceled."

"Comparison shopping" for organs. Cost is listed in thousands of U.S. dollars.

The Chinese government has also recently taken a new stance against unethical transplant practices. According to the same *Wall Street Journal* article, "The new rules, issued by China's State Council, or cabinet, late Friday, enshrine the principles that all organ donations must be voluntary and approved by doctors and that trade in human organs is forbidden... The rules... require hospitals to set up medical and ethics committees to review each transplant candidate and each operation. The rules also create a new licensing system. The ministry has been sending inspection teams around the country to review the qualifications of the 600 or so hospitals that had been performing transplants. It intends to limit organ transplants to a smaller number of reputable hospitals that can be more easily monitored.<sup>6</sup>"

<sup>1</sup> World Health Organization Web site: <http://www.who.int/mediacentre/news/releases/2007/pr12/en/index.html>

<sup>2</sup> *Wall Street Journal*, "China Sets Organ-Transplant Rules Following Medical, Ethical Criticism," Andrew Batson, April 7, 2007, page A3.

<sup>3</sup> WIRED News, Scott Carney, May 8, 2007.

<sup>4</sup> UNOS news release, June 26, 2007, <http://www.unos.org/news/newsDetail.asp?id=891>

<sup>5</sup> Medical India Tourism, <http://www.medicalindiaturism.com/medical-tourism/human-organs-transplant-laws-india.html>

<sup>6</sup> WIRED News, Scott Carney, May 8, 2007.

## ORGAN DONATION BREAKTHROUGH COLLABORATIVE: IDAHO

Collaborative: To work together, especially in a joint intellectual effort. To cooperate reasonably. These are the definitions of Collaborative. Apply this to an effort to increase organ donation and eliminate the unnecessary deaths of those on waiting lists, and that is what will take place in Boise, Idaho this fall.

On September 18th, 2007, Pacific Northwest Transplant Bank with the cooperation of LifeCenter Northwest and Intermountain Donor Services will be hosting a collaborative event for all Idaho hospitals and hospitals in the surrounding areas. The event will be filled with speakers ranging from recipients on a waiting list, to transplant surgeons. The agenda has been planned to address issues from CMS compliance to the newly updated Uniform Anatomical Gift Act.

Only through collaboration between the hospital and the organ procurement agency is it possible to provide the life-saving gift of donation.

Invitations will be mailed to many Idaho hospital representatives the first week in August. For more information or to be added to the invitation list, please contact Cynthia Stevenson Newsom, 208-484-1362.



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