

Category : **Ethical issues/end-of-life**

A45 - Unlocking maastricht III: anticipated gains

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Introduction:

To reduce the discrepancy between demand and availability of organs for transplantation, controlled donation after circulatory death (cDCD) has gained momentum and became an accepted practice in many European countries. Despite the prevailing practice of curtailing medical interventions in futile cases, Portugal has yet to implement cDCD [1]. This study aims to predict the expected rise in organ donation from implementing such a program.

Methods:

Retrospective observational study, conducted in a Portuguese tertiary's hospital Intensive Care Unit (ICU), during 2019, including all deceased patients under 75 years of age, provided they had no neoplasia, infectious risk or significant renal or hepatic dysfunction. Timing of controlled suspension of treatment was determined upon the documented transition to comfort care. To identify potential donors a maximum agonic phase of 30 minutes for the liver and pancreas, 60 minutes for the lung, and 120 minutes for the kidney were used. Results were compared with donors and collected organs from the same hospital and timeframe.

Results:

Among 311 deaths, 152 occurred after suspension of organ support. Most of patients were male (67%), with a mean age of 68 years and a mean SAPS II of 57. Mean ICU length of stay was 4 days and mean time from admission to withdrawal of organ support was 1 day. The most frequent form of organ support was invasive mechanical ventilation (74%). In the subgroup analysis 10 individuals (6.6%) died within less than 120 minutes, potentially providing 3 livers, 3 pancreases, 8 lungs, and 20 kidneys for transplantation. This would result in a 21% annual growth in transplantation activity in this hospital.

Conclusion:

This study anticipates a significant increase in organ donation from implementing cDCD, with important public health and social impact, aligned with ethical end-of-life care in ICU.

References:

[1] Council of Europe European Committee on Organ Transplantation & European Directorate for the Quality of Medicines & HealthCare. 2021.