

LETTER TO THE EDITOR

The first international roundtable on “organ donation after circulatory death by medical assistance in dying” demonstrates increasing incidence of successful patient-driven procedure

To the Editor:

Organ donation after MAiD (medical assistance in dying) is a procedure requested by patients wishing to do good with the diseased body that also led them to request MAiD. It is endorsed by Eurotransplant and Canadian Blood Services. The first international roundtable on “organ donation after VAD/MAiD/euthanasia” (ODE) took place during the 26th WONCA (world conference of family doctors) 2021 in the Netherlands. The procedure is of increasing importance to physicians involved in end-of-life care, mainly family doctors, and the organ donation and transplantation community.

The objective was to identify and discuss global ODE practice, connecting involved physicians and search for consensus. The topics, invited participants, and regional ambiguities were identified in advance by literature review and national preconference meetings. Sixteen euthanasia and/or organ donation experts, from the eight countries where euthanasia is legal, participated in the roundtable. They presented their country's practice followed by plenary discussions.

Euthanasia was defined as “the act, legally undertaken by a third party, with the explicit intention of ending the patient's life, at the patient's voluntary, competent request.” Historical associations preclude using the term “euthanasia” in Canada (MAiD: medical assistance in dying), Australia (VAD: voluntary assisted dying), and New Zealand (AD: assisted dying). As of 2021, MAiD is legal in 10 jurisdictions (eight countries). Global euthanasia incidence in 2020 was 17 261 patients, including 5280 (31%) nononcological patients, a basic factor for eligibility for ODE (Table 1). Classic ODE (MAiD and donation both taking place in hospital) is provided in the Netherlands, Canada (British Columbia, Ontario, Quebec), and Belgium, regulated by national guideline (the Netherlands-2017), national guidance (Canada-2019), and regional manuals (Belgium).¹⁻³ Provided 41 times in 2020, ODE is becoming a significant donor organ source (>5%) in the performing countries. Studies demonstrate excellent multi-organ donation results and transplant outcomes for kidneys, lungs, and livers. A different

classification needs to be implemented in national registries, for example DCD-V, for the total transplant results to become clear. ODE(H) introduction is expected this year in Australia, New Zealand, and Spain.

ODE with anesthesia initiated at home (ODEH) has occurred five times since 2017 in the Netherlands and Canada, by different modes.^{4,5} These involve either single-organ donation ODEH with MAiD provided at the home of the patient and then body transportation to the hospital⁵ or multi-organ donation ODEH with MAiD protracted after anesthesia at the patient's home with subsequent transportation to the hospital followed by death and organ donation.⁴

A common factor was the MAiD-patient-driven development of ODE in the participating countries. Physicians are urged by their own patients to make ODE(H) possible. In most countries, health-care professionals' reluctance to propagate the possibility and general familiarity was a limitation. Discussions about desirability revealed preferences for ODEH due to similarity with the private, more comfortable, MAiD procedure at the patient's home. However, patient values and regulations differ by country and participants agreed that all ODE(H) modes should be offered. Participants agreed that ODE(H) must remain a MAiD-patient-care-driven process, with maximum adaptation of donation processes and minimal intrusion into end-of-life care.

KEYWORDS

clinical research/practice, donors and donation: donation after circulatory death (DCD), health services and outcomes research, organ procurement, organ procurement and allocation, organ transplantation in general, primary care, quality of care / care delivery, quality of life (QOL)

DISCLOSURE

The authors of this manuscript have no conflicts of interest to disclose as described by the *American Journal of Transplantation*.

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TABLE 1 Organ donation after MAiD

Jurisdiction	Legalization year	National terminology	Euthanasia death 2020/% of total registered death	ODE	ODE	ODEH
				Total	2020	Total
The Netherlands	2002	Euthanasie	6938/4.6%	74 (2012–2020)	11	3
Belgium	2002	Euthanasie	2444/2.2%	56 (2005–2020)	3	
Luxembourg	2009	Euthanasie	25/<1%			
Canada	2015/2016	Medical assistance in dying	7595/2.5%	97 (2016–2020)	27	2
Australia/Victoria	2017, enacted 2019	Voluntary assisted dying	224/<1%			
Australia/Western Australia	2019, enacted 2021	Voluntary assisted dying	NA			
Australia/Tasmania	2021, enacted 2023	Voluntary assisted dying	NA			
Spain	2021	Eutanasia	NA			
New Zealand	2021	Assisted dying	NA			
Colombia	1997/2014	Eutanasia	35/<1%			

Abbreviations: ODE, organ donation after euthanasia; ODEH, organ donation after euthanasia from home; NA, not applicable.

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