

Transplantations fall in Israel as new law takes effect

Tamara Traubmann TEL AVIV

The number of patients in Israel who die while waiting for a transplant rose last year, and the number of transplantations fell by 20%, the annual report of the Ministry of Health's National Transplant and Organ Donation Centre has said.

As a result the shortage of organs has become more acute. Rafi Biar, chairman of the centre's steering committee and director of the Rambam Medical Centre in Haifa, said that the main cause of the decrease is a new law that changed the protocol for defining "brain death" after discussions with the Chief Rabbinate.

According to Jewish law death can be determined only after cardiopulmonary failure, and until recently the Chief Rabbinate had prohibited organ donation, as it did not recognise brain stem death. However, in 2008 the Israeli parliament passed a law that defines "brain respiratory" death as an indication of death for all legal purposes and also outlined the procedure that should be carried out to ensure that death had occurred. The law was formulated in cooperation with the Chief Rabbinate.

Avinoam Reches of Hadassah Medical Centre, Jerusalem, participated in the discussions. He said, "Under the previous protocol brain death was primarily diagnosed through clinical tests. In the protocol required by the new law, on the other hand, death should be confirmed by use of equipment. This new procedure cannot always be carried out." The new law also obliges doctors to notify the family before they can embark on the process of diagnosing brain stem death.

Cite this as: *BMJ* 2011;342:d332

which promotes choice for patients, said, "Edwina Hart had been all ready to forge ahead to allow Wales to bring in a system of presumed consent. Her plans may have been spiked by worries from the attorney general [for England and Wales] that such a system might not be legal or may have human rights implications. She was undeterred by the report from her own health committee, which advised against such legislation—as did our organ donation taskforce and the House of Lords' EU committee.

"So called presumed consent is actually pretend consent. It is dishonest. As our law points out, the absence of refusal is not evidence of consent. Nothing alienates patients, their carers, and relatives more than feeling taken for granted."

Cite this as: *BMJ* 2011;342:d273

Rabbi says brain stem death is not enough for organ donation

Jacqui Wise LONDON

The United Kingdom's chief rabbi, Jonathan Sacks, has issued an edict that carrying donor cards is unacceptable and that the current organ donor system is incompatible with Jewish law.

The ruling comes after years of debate among rabbinical authorities over the definition of death and when an organ may be removed for transplant purposes. The new statement from the chief rabbi and his rabbinical court, the London Beth Din, says that organs may be removed for transplantation only at the point of cardiorespiratory failure, rather than at brain stem death.

The latest figures for 2010 show that 66% of donations came from donors after brain death and 34% from donors after cardiovascular death, NHS Blood and Transplant said.

The BMA warned that the edict may reduce the number of donations. Three people die every day in the UK because of the shortage of organs for transplantation. An association spokesman said, "Organ donation and transplantation is a huge success story, and it will be a tragedy if the number of organs available started going down and fewer lives could be saved." The BMA said it is a matter of urgency that the chief rabbi meet with organ donation experts to discuss the issue.

Lord Sacks's statement said that a living person may donate an organ, such as a kidney, to save someone else's life providing that the donor does not put his or her own life at major risk. Jewish law also permits donation after death as long as the organ is needed for immediate transplantation. However, the statement says: "Live people (irrespective of how close to death) may not donate organs to save another person's life if in doing so it will hasten their own demise."

The statement says: "There is a view that brain stem death is an acceptable Halachic [following

UK's chief rabbi Jonathan Sacks says the current system in the UK is incompatible with Jewish law

Jewish law] criterion in the determination of death. However, it is the considered opinion of the London Beth Din that in Halacha cardiorespiratory death is definitive."

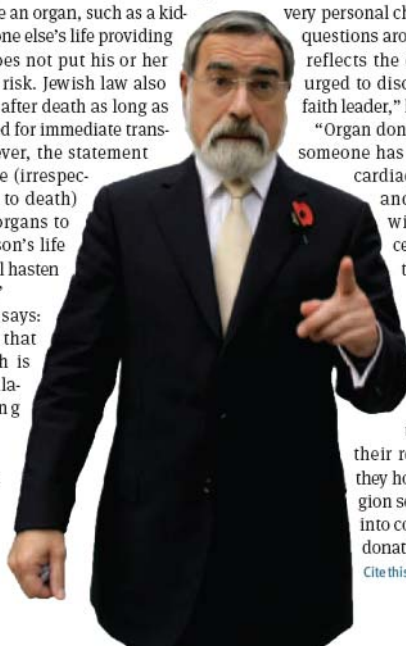
The chief rabbi's office says that it is already in consultation with the UK medical profession about the possibility of devising a method whereby the number of organs donated by Jews can be increased in accordance with Halacha. It wants Jews to be able to register directly with the NHS national organ donor registry with the clear provision that a Halachic authority is contacted if and when donation is anticipated and for the donation to be carried out within Halachic rules.

The chief rabbi said, "At this point, however, since the national registry system is not set up to accommodate Halachic requirements, donor cards (even those purporting to be Halachic) are unacceptable."

James Neuberger, associate medical director for NHS Blood and Transplant, said that it would welcome the opportunity to discuss this important issue with the chief rabbi. "NHSBT respects the views of all religions and has received public support from all the major faiths in the UK towards organ donation. It is a very personal choice, and anyone with questions around how their religion reflects the donation of organs is urged to discuss it with their local faith leader," he said.

"Organ donation only occurs after someone has died, whether it is by cardiac or brain stem death, and individual donors' wishes are always at the centre of discussions with their relatives." He added: "We do not record donors' religions on the organ donor register (ODR), but anyone in favour of donation or joining the ODR should inform their relatives of any beliefs they hold that reflect their religion so that this can be taken into consideration at the time donation is being discussed."

Cite this as: *BMJ* 2011;342:d275



MATTUNIK/WIREPA