

NATIONAL POTENTIAL DONOR AUDIT

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UK Transplant's (UKT) national potential donor audit (PDA) began in January 2003, as part of a series of measures to improve organ donation.

Evaluation of 12 months of data has shown that at the time of analysis, 284 hospitals (341 intensive care units) had reported at least one patient death. Of the 22,667 audited patient deaths, death was confirmed by brain stem tests in 1,386 (6%) patients.

In 198 (14%) families there was no record of any discussion of donation with relatives. Of the 1,181 patients with no absolute medical contraindications, for whom the possibility of solid organ donation was known to have been discussed with relatives, consent for donation was given for 690 (58%) and not given for 491 (42%) patients. Of the 690 patients for whom consent for donation was given, 621 (90%) became heartbeating solid organ donors.

The overall relative refusal rate is 42%, although there is considerable variability in this rate over time. The relative refusal rate ranged from 49% in April-June 2003 to 36% in January-March 2004. Relatives were less likely to refuse consent if a transplant co-ordinator was involved in the approach than not involved, with refusal rates of 26% and 48%, respectively.

Further analyses of the overall relative refusal rate by gender and ethnicity were performed. The relative refusal rates were 42% and 41% for male and female potential donors, respectively. For ethnicity, of 1,115 potential donors for whom data were complete, the relative refusal rates were 36% and 77% for white and non-white potential donors, respectively.

The relative refusal rate also differed depending on the timing of approach to families to discuss the subject of solid organ donation and who was involved in the approach. Some of the reasons given for lack of consent to donation were that the next of kin were not sure if the patient would have agreed to donation or they were divided over the decision or felt the patient had suffered enough.

UKT hopes that the national PDA will continue to raise the profile of organ donation and provide critical information on ways to increase donor numbers. UKT is grateful to all those who are taking part in the PDA and to the Intensive Care Societies and Critical Care Networks for their ongoing support of this audit.