LEARNING MORE ABOUT ORGAN & TISSUE DONATION

Organ donation is reserved for those with serious illnesses who may, otherwise, die if a transplant does not occur. Organ donors can be alive or deceased.

For living donors, the following must be considered:

- The recipient's need must be serious with no other treatment options.
- The benefit to the recipient must be proportionate to the risk taken by the donor.
- There must be free, informed consent from the donor, without coercion.

For deceased donors, the following must be considered:

- Vital organs that occur singly in the body may only be removed after death.
- The donor's consent must be given well in advance, freely and in writing or in discussion with loved ones.
- There must be moral certainty that the donor is dead.

The act of love, which is expressed with the gift of one's own vital organs, is a genuine testament of charity that knows how to look beyond death so that life always wins. The recipient should be aware of the value of this gesture that one receives, of a gift that goes beyond the therapeutic benefit. What they receive is a testament of love, and it should give rise to a response equally generous, and in this way grows the culture of gift and gratitude.

Pope Benedict XVI, November 2008 (From his Address to Participants at a Conference entitled, "A Gift for Life. Considerations on Organ Donation.")

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If you or a loved one are sick and admitted to hospital, state that you are a Roman Catholic and express your desire to have a Catholic Chaplain visit

As soon as you or a loved one become ill or become aware that you are in need of surgery or some other serious medical procedure, contact your parish office to receive the Sacrament of the Sick and to include your name on the list of those prayed for at Mass.

Even if you have signed a donor card, you still need to register your consent through one of these two methods to ensure that your decision to donate is known and respected.

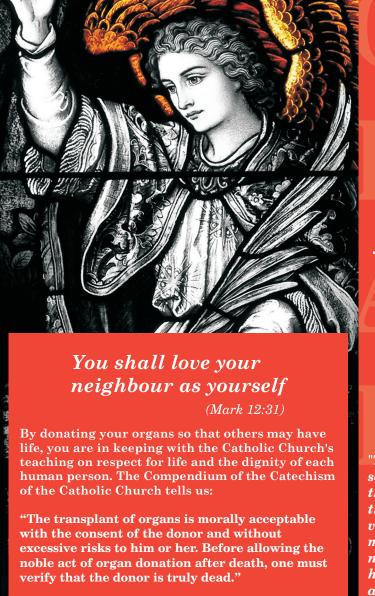
health.gov.on.ca, or at HealthyOntario.com.

Visiting your local Service Ontario Health Card Services - OHIP office or outreach site. You can also download and complete a Gift of Life Consent Form available at giftoflife.on.ca,

 \square Say "Yes" to organ and tissue

Talk to your family \mathcal{E} friends about organ \mathcal{L} tissue donation. Make your wishes known to them.

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Organ
Donation:
A Catholic
Perspective



CANADIAN CATHOLIC BIOETHICS INSTITUTE
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"Transplants are a great step forward in science's service of man, and not a few people today owe their lives to an organ transplant. Increasingly, the technique of transplants has proven to be a valid means of attaining the primary goal of all medicine - the service of human life...There is a need to instill in people's hearts, especially in the hearts of the young, a genuine and deep appreciation of the need for brotherly love, a love that can find expression in the decision to become an organ donor."

- Pope John Paul II to attendees at the International Congress on Transplants in Rome – August 2000

- Winnie Lo, Johnny's Mother

"The moment we decided to donate Johnny's organs we felt a great sense of relief and a tremendous sense of peace washed over us. We held Johnny's hands and communicated silently with him with our touch, telling him that we would donate his organs so that his organs could be a gift and benefit to others. I believe that Johnny had got our message and I know it is what he would have wanted."

In the summer of 2007, 28 year old Johnny Lo was killed in a workplace accident. While mourning the loss of their son, Johnny's family made the decision to donate his organs and tissue so that others might be touched by the healing hand of a stranger. Johnny's special gift saved the lives of people across Ontario.

THE GIFT OF LIFE: JOHNNY LO

"Unless a grain of wheat falls into the earth and dies it remains just a single grain, but if it dies, it bears much fruit." (John 12:24)

Toronto Archbishop, Thomas Collins, with the Lo family



How do I express my wishes to become an organ and tissue donor? You can express your wishes to become an organ and tissue donor by signing a donor card and talking to your loved ones. It's critical to share your decision with your family, sa they will be asked for final consent to donate your organs after your death. Discuss your intentions with them and give them your signed donor notification card so they can understand, support and respect your wishes in the future.

(Compendium of the Catechism of the Catholic

Church Sec. 2296, Compendium Sec. 476)

Will doctors be anxious to hasten death in order to transplant organs for a waiting recipient? First and foremost, doctors' primary concern is for the patient in their care. In addition to steps outlined in this brochure taken by Catholic hospitals, it should be noted that the medical team working to save the life of an individual is completely separate from the transplant team that performs organ transplants.

Do transplants really work? Transplants not only save lives, they recapture productive lives. Outcomes continue to improve each year so more and more transplant patients are living enhanced, productive lives.

What organs and tissue can be donated?
Organs and tissue that can be donated include the heart, liver, kidneys, pancreas, lungs, small bowel, stomach, corneas, heart valves, bone and skin.

Why should I donate my organs and tissue? Your decision to donate could save a life. There is a chronic shortage of organs and tissue continues to and the need for organs and tissue continues to outweigh their availability. More than 1,800 Ontarians are waiting for an organ transplant and many others are waiting for a tissue transplant. In 2004 in Ontario, 122 people died waiting.

VBOOLT ORGAN & TISSUE DONATION

FREQUENTLY ASKED QUESTIONS

ABOUT THIS BROCHURE...

To assist Catholics in reflecting on the issue of organ and tissue donation, the Canadian Catholic Bioethics Institute (CCBI) has created this resource.

Since 2002, the CCBI has been working to promote and protect the dignity of each person through every stage of life. Each year, the institute offers workshops, conducts research and provides helpful resources for Catholics across the country.

Visit the CCBI online at: www.ccbi-utoronto.ca

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Only my readiness to encounter my neighbour and to show him love makes me sensitive to God as well. Only if I serve my neighbour can my eyes be opened to what God does for me and how much he loves me.

- From Deus Caritas Est – Pope Benedict XVI (2005)

A CATHOLIC PERSPECTIVE: ADDITIONAL REFLECTIONS ON ORGAN DONATION

From a Catholic perspective, are there guidelines about extraordinary or excessive treatment?

A Christian view of death sees it as the culmination of earthly life and a transition to the next life. It is legitimate for Catholic patients to forgo any medical intervention that delays death from a fatal medical condition if it imposes significant and excessive burdens on oneself, one's family or one's community. These could be regarded as "extraordinary" lifesustaining medical interventions. The issue of donating organs after the refusal or withdrawal of excessively burdensome interventions should be thought through and discussed by individuals with their family while they are still capable. Such end-of-life planning is part of responsible stewardship of one's life.



How does the Catholic view of death relate to the medical view of "end of life"?

Catholics understand death to be the separation of body and soul, which cannot be observed directly. Medical science determines that death has occurred based on signs that an individual's ability to carry out the activities of life in an integrated way is irreversibly lost. Usually this is based on detecting a person's permanent loss of a heartbeat and ability to breathe, but increasingly with the use of ventilators and other life-sustaining treatments, doctors rely on neurological signs.

In Canada, brain death, which has been defined as the irreversible loss of the capacity for consciousness combined with the irreversible loss of all brainstem functions including the capacity to breathe is generally accepted by the medical community and the public as equivalent to the traditional circulatory criterion of death. However there is no law relating to determining death in Canada and there are no uniform clinical guidelines for detecting brain death.

How can I stay informed when making important end of life decisions?

Catholics who are considering organ donation should know that the Church has no official position on the particular medical criteria that should be used for determining when death has occurred. The Church relies on the expertise and judgment of scientists, clinicians, and ethicists for such questions. Catholics should, however, be informed about the ways in which death is determined in Canada and the distinct ethical issues for organ transplantation that may arise with each method.

What can I do to ensure responsible care is taken with and for those I love?

When death is determined using the circulatory criterion, enough time should be allowed after a person's heart has stopped beating to be morally certain that this loss is irreversible.

How do opinions differ on the definition of "death" within the Catholic community?

Most Catholic ethicists and clinicians accept brain death as a valid way of determining when death has occurred. Pope John Paul II in 2000 stated that "the complete and irreversible cessation of all brain activity (in the cerebrum, cerebellum and brain stem), if rigorously applied, does not seem to conflict with the essential elements of anthropology" (Address to the 18th International Conference of Organ Transplant Specialists, August 2000).

Members of the Pontifical Academy of Sciences and the Pontifical Academy of Life who met to consider this question in 2006 issued a statement affirming this view ("Why the Concept of Brain Death Is Valid as a Definition of Death" in Signs of Death, Pontifical Academy of Sciences, 2006).

However there are some Catholics, including a few members of the Pontifical Academy for Life, who hold either that total brain death is an inadequate sign that a person is dead or that the current tests for determining brain death are unreliable" (Finis Vitae: Is Brain Death Still Life?, 2007)

What steps can I take to ensure decisions aren't made in haste?

Families should be provided with adequate information, opportunities to ask questions, assistance and time to make an informed decision about organ donation, and with support for grieving.

Are there other areas for concern?

Catholic ethicists and clinicians generally agree that persons in whom there are signs only of the loss of higher (cortical) brain function, such as those in a "post-coma unresponsive state" or "persistent vegetative state", are not dead. Catholics should oppose proposals to increase the number of possible organ donors by introducing the concept of partial or higher brain death as the definition of death.



Organ donation is a peculiar form of witness to charity. In a period like ours, often marked by various forms of selfishness, it is ever more urgent to understand how the logic of free giving is vital to a correct conception of life. Indeed, a responsibility of love and charity exist that commits one to make of their own life a gift to others, if one truly wishes to fulfil oneself. As the Lord Jesus has taught us, only whoever gives his own life can save it (cf. Lk 9: 24)."

- Pope Benedict XVI, November 2008 Address at a Conference entitled, "A Gift for Life. Considerations on Organ Donation"



DETERMINING DEATH: CALLED HOME TO GOD

Catholics have embraced organ donation for years and have recognized that death can be determined, using reasonable available means, by the complete and irreversible cessation of all brain activity – so called "brain death". When brain activity stops completely and irreversibly, the functions necessary to sustain life have also ceased and the death of the person may be medically declared.

More recently, some hospitals have started to implement organ donation after so called "cardiac death", i.e., once the donor's heart has stopped beating.

Catholic hospitals continue to be actively involved in identifying the most prudent criteria for the identification of irreversibility after the heart has stopped beating, however, the discussion continues as to what amount of time is appropriate to establish that death has occurred before retrieving organs.

Many hospitals use 5 minutes as the benchmark, and others 2 minutes. With these concerns in mind, it is important to note that, in Ontario, several Catholic hospitals prudently use a benchmark of 10 minutes once the heart has stopped beating before organ donation occurs. This protocol is followed to be morally certain that all of the integrated functions necessary to sustain life have irreversibly ceased.