

# DIVERSE STRATEGIES FOR FIGHTING ORGAN SHORTAGE IN EUROPE

Organizational and Ethical Questions

5 - 6 May 2009



Pierre et Marie Curie University  
Campus des Cordeliers  
- Amphithéâtre Farabeuf  
21, Rue de l'École de Médecine  
- Paris 6e – métro Odéon



## Programme



Organized within the framework of  
“États Généraux on Bioethics”  
by the French Commission for UNESCO  
et  
the French Ministry of Foreign and European Affairs

in Partnership with the Agency for Biomedicine  
and Pierre & Marie Curie University

With the support of the René Descartes University  
the National Academy of Medicine,  
Espace Éthique de l'Assistance Publique  
-Hôpitaux de Paris,  
MACIF-Prévention,  
Les Entreprises du Médicament (LEEM),  
les Laboratoires Astellas et Baxter  
and  
Demain la Greffe,

and also the participation of members of the  
Office Parlementaire d'Evaluation des Choix Scientifiques  
et Techniques

*Please use the application form  
to sign up for the conference*

*Simultaneous translation French-English*

## Context

The public debate organized in 2009 in the context of the revision of the French law on bioethics is an opportunity to improve one of the most developed public health systems in the patients' interest, in compliance with the core principles of bioethics stated in the Oviedo Convention on Human Rights and Biomedicine, particularly as regards following fundamental principles shared throughout Europe: primacy of the individuals, human dignity and well-being, non-discrimination and equitable access to health care, enlightened consent, respect for privacy and the non-commercialization of human body parts. This discussion, under the banner of États Généraux, would be incomplete without also considering concrete European experiences in this area.

The chronic organ shortage provides an opportunity to open the debate in Europe on this issue.

## Facts

13 687 people were registered on a waiting list for an organ transplant in France in 2008, meanwhile only 4 620 transplants were performed. 222 patients died awaiting transplant, a number which actually underestimates the total since the patients awaiting transplant whose health deteriorates are generally removed from the waiting list.

The situation is particularly critical for patients suffering kidney failure: only 2 911 kidney transplants were done in 2008, as compared to nearly 10 000 candidates for a kidney transplant, which means that there are more than 3 candidates for every available kidney graft. Yet a kidney transplant doubles the life expectancy of the recipient, as compared to dialysis, and allows a considerable improvement in quality of life.

Patients are confronted with a situation of chronic penury which continues to grow as a result of the success of organ transplant therapy and a broadening in the type of cases for which kidney transplant therapy is prescribed.

This situation is rather widespread in Europe. However in some countries it is less important because they managed to expand in different ways the donor pool. There are two sources: deceased donors and living donors. Indeed the organ donation rate from deceased donors in France, only 24.6 per million population, is clearly exceeded in Spain. The same issue concerns the amount of kidney transplants from living donors, namely 7.5% of total kidney transplants, while in neighbouring European countries this percentage may reach 40%.

## Goal of the Seminar

Important progress can therefore be made in this area, which will mean saving scores of human lives. This seminar, organized in the context of the revision of the French law on bioethics, aims at contributing to the reflection of those undertaking this task by providing an international perspective on some of the solutions possible in the face of the existing organ penury. A number of today's leading figures in Europe in this field will be invited to present their experience and to debate the relevant ethical aspects of the question. These debates will provide the French legislator with information on the variety of solutions implemented by other European countries to solve the problem of the organ shortage. These solutions, which come out of very different cultural contexts, constitute attempts to address the potential difficulties coming up from their transposition in the French system.

## Lines of Reflection offered by practices in other countries:

### - An improvement in technical organization

The experience of Spain demonstrates that good organization and coordination of trained and well-recognized organ procurement professionals allow a significant increase in organ supply.

### - More diligence with regard to donor's family approach

Specially trained hospital personnel can significantly reduce the opposition to organ transplant expressed by relatives of the deceased, currently occurring in about 30% of cases in France (17, 8% in Spain).

### - A greater interest in donation after cardiac death

In France the use of organs from patients who have died from a cardiac arrest, after all attempts of cardiopulmonary resuscitation have failed, and the brain destroyed by the stoppage of blood circulation is still in its infancy whereas this supply represents a large source of kidney grafts in Spain, the U.K., the Netherlands, and the United States.

### - Broadening the conditions for living kidney donation

The risk during kidney removal surgery has become extremely limited: the mortality rate is estimated at .03% and the risk of serious complications at .3 and 1%. In France, the living donor must have a close family tie with the recipient (at least second degree) or live with the recipient in a stable relationship. In other countries, only an emotional tie is necessary, or the organ donation may be anonymous. A new open approach that complies with enlightened consent principle allows organ donations from living donors to reach 30 and 40% of all kidney transplants (in northern Europe, U.S.).

## Public

Decision-makers, legislators, experts, associations, media, students, teachers, medicine and life sciences researchers (about 400 persons).

## Program

### **Diverse strategies for fighting against organ shortage in Europe : organizational and ethical questions**

**5 may 2009**

**8.15 am – Welcoming participants**

**9 am – Opening ceremony:**

Mrs. Roselyne Bachelot - Narquin, French Minister of Health and Sports or her representative

Pr. Jean-Claude Ameisen, Member of the French Commission for UNESCO and President of the Committee on Ethics at INSERM

Pr Alain Grimfeld, M.D., Ph.D., President of the National Consultative Committee on Ethics

Pr Christian Cabrol, Member and Representative of the National Academy of Medicine

Pr Bruno Riou, Vice- President Medicine of the Pierre et Marie Curie University

Pr Christian Hervé, Director of the Medical Ethical and the Legal Medicine Laboratory of Paris Descartes University

Dr Marc Guerrier, Assistant Director of the Ethical Space of the Public Assistance-Hôpitaux de Paris

Mr Roger Iseli, MACIF General Manager

**10.30 am: Coffee Break**

**11 am – Round Table I: Current situation, outcomes, shortage and complications in Europe**

**Moderator :** Mr Philippe Bas, Former Minister, State counsellor

a. **Organ transplantation: medical indications and outcomes**

Pr Michèle Kessler, M.D., Ph.D. (Chief of Nephrology Service, CHU Nancy)

b. **Social & economic consequences of organ shortage**

Dr Christian Jacquelinet, M.D. (Medical and Science Department, French Biomedicine Agency)

c. **Organ shortage - increasing the use of available donor organs by organ allocation strategies within Eurotransplant**

Dr Axel Rahmel (Medical Director of EuroTransplant International Foundation, Netherlands)

d. **Situation and reasons for the organ shortage in France**

Dr Bernard Loty, M.D. (Medical and Scientific Department, French Biomedicine Agency)

e. **Transplant tourism, shortage impact (current situation, Istanbul Conference)**

Pr Jacques Belghiti, M.D., Ph.D., (Chief of Liver/Pancreatic/Gall Bladder Surgical Department, Beaujon Hospital, AP-HP, Clichy)

f. **Organ trafficking (current situation of organ trade recipients, the future of “remunerated” donors)**

Dr Moglie Le Quintrec, M.D. (Nephrology Department, Foch Hospital, Suresnes)

## **2.15 pm - Round Table II: New tracks to reduce organ shortage and their results**

### **Introduction: Compared outcomes of different ways to expand the donor pool**

Pr Christophe Legendre, M.D., Ph.D. (chief of the Adult Renal Transplantation Department, Necker Hospital, AP-HP, Paris)

## **2.30 pm Part I: Does France make the most of organ procurement from brain dead donors?**

**Moderator :** Mr Jean-Claude Etienne, Senator, Member of the Parliamentary Office for Scientific and Technological Assessment

### **a. Potential organ donor pool in France**

Dr Philippe Tuppin (Strategy for research and statistics Department, National Office of Health Insurance for Paid Workers)

### **b. The promising results of the “donor action” program**

Dr Patrick Jambou, M.D. (Organ procurement coordinator, CHU, Nice)

### **c. The Spanish “model” and its adaptation in Italy**

Dr Carlo di Cillia (Centro Nazionale Trapianti, Italy)

## **4.00 pm: Coffee Break**

## **4.30 Part II: Non heart beating organ donation**

**Moderator:** Mr Jean-Sébastien Vialatte, Var Deputy, Vice-President of the Mission for information on bioethics laws revision of the National Assembly, “Co-rapporteur” of the Parliamentary Office for Scientific and Technological Assessment

### **a. The Madrid experience**

Dr Jose Ramón Núñez, M.D. (San Carlos Hospital, Madrid, Spain)

### **b. Non heart beating organ procurement from type III donors: The UK experience**

Dr Eric Chemla, M.D. (Saint Georges Hospital, London, UK)

### **c. The French experiences and results**

Pr Lionel Badet, M.D., Ph.D. (Civil Hospices, Lyon)

## Program

### **Diverse strategies for fighting against organ shortage in Europe : organizational and ethical questions**

**May 6, 2009**

#### **9.15 am - Round Table III: The need to consider non-medical aspects of organ donation**

##### **Introductory speech: The tricky consent issue**

Pr Robert Carvais, Ph.D.(Law History Institute, University Paris I)

**Moderator :** Pr Jean-Louis Touraine, Rhône Deputy, Member of the Mission for information on bioethics laws revision of the National Assembly, Member of the Parliamentary Office for Scientific and Technological Assessment

##### **a. Explicit consent versus presumed consent**

(Which policy for which impact? Which alternatives to develop?)

Dr Daniela Norba (Deutsche Stiftung Organs Transplantation, Germany)

##### **b. The philosophical aspect**

Dr Elisabeth Lepresle (Doctor specialized in intensive care, Ph.D in Philosophy)

##### **c. The sociological and religious dimensions**

M. Marc Grassin (Philosophy Professor, Catholic Institute of Paris)

#### **11 am: Coffee Break**

**11.30 am** Intervention of M. Didier Houssin (General Manager of the Health)

#### **11.45 am, Round table III – Follow-up**

##### **d. Approaching the donor family - training the organ procurement professionals (TPM)**

Dr Marty Manyalich, M.D. (Barcelone, Spain)

##### **e. A specific approach in a multicultural context**

Pr Randhawa Gurch , Ph.D. (University of Bedfordshire, UK)

#### **1 pm: Lunch**

#### **2.30 pm - Round Table IV: Should we increase living kidney donation?**

##### **Introductory speech: Organ donation & relation to the body**

Pr Christian Baudelot, Ph.D. (eminent Sociology Professor, ENS, Paris)

**Moderator :** M. Alain Claeys, Vienne Deputy, Member of the Pilotage Committee for Etats Généraux on Bioethics, President of the Mission for information on bioethics laws revision of the National Assembly, “Co-rapporteur” of the Parliamentary Office for Scientific and Technological Assessment

- a. **The European landscape**  
Dr Christian Hiesse, M.D. (Nephrology Department, Foch Hospital, Suresne)
- b. **How do transplantation teams perceive organ transplant from living donors**  
M. François-xavier Lamy ( Agency for Biomedecine)
- c. **Solidarity in action**
  - **The Norwegian “model”**  
Dr Per Pfeffer, M.D. (Rikshospitalet Oslo, Norway)
  - **Paired exchanges, “good Samaritans”, The Netherlands experience**  
Pr Willem Weimar (chairman of the Dutch Transplant Foundation and Head of the Nephrology Department of the Erasmus Medical Center of Rotterdam, Netherlands)

### 3.30 – 4.00 pm: Coffee Break

- d. **Why Spain decided to develop living kidney donation?**  
Dr Julio Pascual Santos, M.D. (Nephrology Department, Ramon y Cajal Hospital, Spain)
- e. **Regulated market of kidneys from living vendors: a wrong solution**  
Pr Sadek Beloucif (Avicenne Hospital, Bobigny, Member of the Pilotage Committee for Etats Généraux on Bioethics)

### 5.15 pm: Xenotransplantation perspectives

**Pr Gilles Blancho** (Xenotransplantations specialist at the Institute of Transplantation and Research in transplantation-urology-nephrology, Director of the Laboratory Big Animals, CHU Nantes)

### 5.30 pm Conclusions:

**M. Michel Doucin**, Ambassador for Bioethics and Corporate Social Responsibility:  
and **Mrs Yvanie Caillé**, Demain la Greffe: summary of the debate

**Dr Maurizio Salvi**, Head of the European Group on Ethics Secretariat, Policy Advisor to the President of the EC (BEPA) with specific tasks on ethics

**Mrs Emmanuelle Prada-Bordenave**, Director General of the French biomedicine Agency

**Mr Jean Leonetti**, Alpes Maritimes Deputy, Chairman of Pilotage Committee for the Etats Généraux on Bioethics, « Rapporteur » of the Mission for information on bioethics laws revision of the National Assembly.