



# Organ Donor Cards—Concepts Versus Reality: A Study Among Academic Students in Poland

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## ABSTRACT

**Introduction.** Organ Donor Cards (ODCs), despite presenting no legal value in Poland, are considered an important mean of expressing one's intent toward organ donation. This study was an assessment of the effectiveness of ODCs in social communication and their connection to one's transplantology knowledge, attitude, and beliefs.

**Subjects and Methods.** The study included 400 medical students and 400 nonmedical students from public universities in Kraków, Poland. Data were collected by using an anonymous questionnaire with attached ODCs examining demographic factors and transplantology issues.

**Results.** Approximately 41% of students possess an ODC, and the majority of the remaining group are willing to sign one. The main reasons for not having an ODC originate from a positive or neutral interest in organ donation (eg, previous conversation with the family, lack of knowledge about ODCs and how to obtain them) rather than a negative one (fear of "do not resuscitate" approach or organ trade) and remain open for modification. Eighty-three percent of ODC holders are aware of its ethical rather than legal value, and 3 of 4 have informed their family about their attitude, proving ODCs are an effective way of expressing one's intent toward organ donation. An actual ODC holder presents a more explicit positive attitude than a potential one, and his or her level of transplantology knowledge is significantly higher.

**Conclusions.** The support for informed consent for organ donation is particularly strong among students presenting with the highest level of transplantology awareness, with a good/very good state of knowledge and extremely positive attitudes, already owning an ODC, and using it correctly. Thus, such a decision will have the status of a truly conscious and thoroughly considered choice.

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**P**OLISH legal regulations for cadaveric organ recovery are based on presumed consent for organ donation, allowing organ recovery for transplantation unless subjects have objected during their lifetime by registering in the Central Objection Registry or by displaying their intent with a written or an oral statement (an opt-out system) [1]. Therefore, Organ Donor Cards (ODCs), stating one's readiness for organ donation after death, present no legal value in Poland and cannot be treated with the same priority as ODCs functioning in an opt-in system of consent [2]. However, such ODCs are considered an important mean of expressing one's attitude toward organ transplantation by signaling donation preferences to the family members [3]

whose authorization for organ recovery is included in Polish organ procurement procedures and whose objection is

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responsible for 9% to 10% of annual cases of aborting cadaveric organ recovery from potential donors [4].

The aim of the present study was to: (1) evaluate the effectiveness of ODCs in social communication; and (2) determine their influence on one's attitude towards informed consent for organ donation. Students are characterized by a highly supportive attitude toward organ donation [5] and have a direct impact on their social surroundings [6], forming an ideal target group for introducing ODCs, as well as a promising control group for evaluating current ODCs' exploitation. By assessing the transplantology knowledge of this group, as well as the beliefs and attitudes toward organ donation in context of their ODC ownership status, we were also able to provide a list of potential methods and means for increasing the number of ODC holders in Poland.

## SUBJECTS AND METHODS

The sample comprised 800 academic students from 4 public universities in Kraków, Poland, divided into 2 groups: medical students ( $n = 400$ ) and nonmedical students ( $n = 400$ ).

The medical student group was composed of 37.25% male subjects, 62.25% female subjects, and 0.5% had no data. They ranged in age from 18 to 28 years (mean  $\pm$  SD,  $21.8 \pm 1.85$  years). Most lived in a city (80%) and were first- to sixth-year students of medicine at Jagiellonian University Medical College; the number of students from each year was comparable ( $14.29\% \pm 6.36\%$ ; analysis of variance,  $P = .9345$ ).

In the nonmedical group, 24.5% were male and 75.5% were female. They ranged in age from 19 to 28 years (mean,  $21.4 \pm 1.32$  years). Most lived in a city (67%), and they were first- to fifth-year students at Jagiellonian University (42%), Pedagogical University of Kraków (24%), Kraków University of Economics (22%), or AGH University of

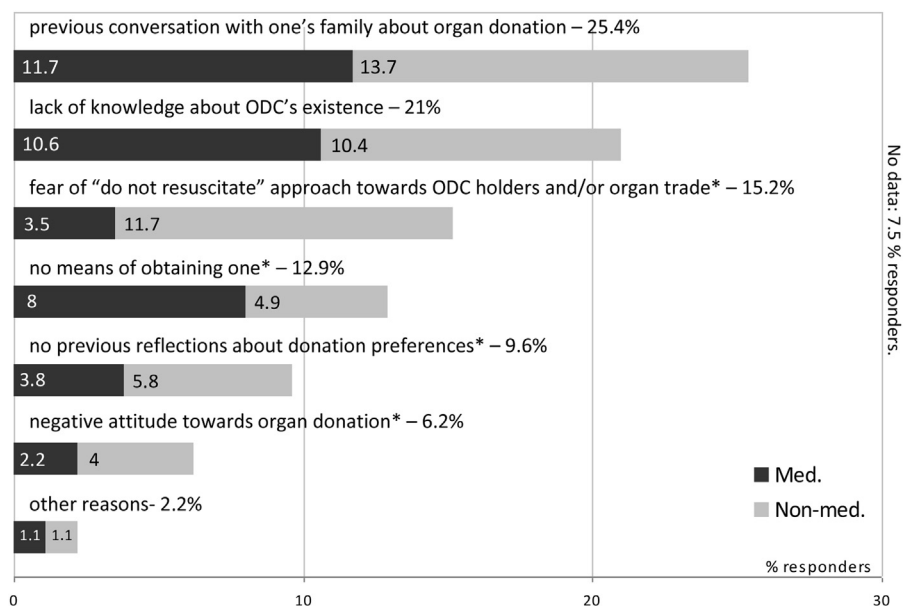
Science and Technology (12%). The number of students from humanistic and scientific disciplines was equal (50% for each).

For the purposes of further analysis, 3 alternative populations were also differentiated:

Actual ODC holders (group A;  $n = 331$  [41.4%]) were responders who currently own a signed ODC. The medical/nonmedical student breakdown was 56.2%/43.8%; 25.7% were female subjects, 73.7% were male subjects, and 0.6% had no data. They ranged in age from 18 to 28 years (mean  $\pm$  SD,  $21.8 \pm 1.64$  years) and most lived in a city (73.4%). Potential ODC holders (group P;  $n = 304$  [38%]) were responders not owning an ODC but willing to sign one. The medical/nonmedical student breakdown was 46.4%/53.6%; 32.2% were male subjects and 67.8% were female subjects. They ranged in age from 19 to 28 years (mean,  $21.5 \pm 1.62$  years) and most lived in a city (73.7%). Responders reluctant toward ODCs (group R;  $n = 148$  [18.5%]) were responders not owning an ODC and not willing to sign one. The medical/nonmedical student breakdown was 43.9%/56.1%; 38.5% were male subjects and 61.5% were female subjects. They ranged in age from 19 to 26 years (mean,  $21.5 \pm 1.52$  years) and most lived in a city (74.4%). Overall, 2.1% of students did not share their ODC ownership status and were not included in groups A, P, or R.

Data were collected by using an anonymous questionnaire examining: demographic factors (6 questions [as previously described]), current status of ODC ownership (2 questions) (Fig 1), general and professional transplantology knowledge (13 + 9 questions) (Table 1), attitude toward organ transplantation (7 questions) (Table 2) beliefs concerning transplantology (6 questions) (Table 3), and sources of knowledge and responders' comments (2 questions). Responders' knowledge and attitudes toward organ transplantation were graded according to the total score received, respectively, in questions concerning knowledge and attitudes (Table 4). Questions concerning other issues were not graded.

Data were analyzed by using Microsoft Excel and Statistica software (StatSoft®, Inc., STATISTICA data analysis software system, version 10). The survey was conducted during the academic years



**Fig 1.** Reasons for lacking Organ Donor Cards. \*  $P < .05$ ; frequency of all other answers is not dependent on students' discipline of studies (p-value assessed using Pearson's chi-squared test).

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