



**ROYAL BRISBANE HOSPITAL
and District Health Service**

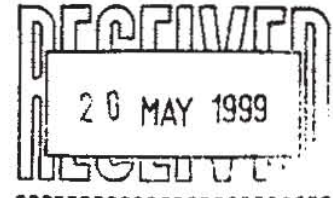
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18 May 1999

Mr G Fenlon MLA
Parliament House
George Street
BRISBANE Q 4000



Dear Mr Fenlon

Re: Inquiry into the Transplantation and Anatomy Amendment Bill 1998

Thankyou for your letter of 5 May 1999 and for the opportunity to make some comments on the proposed amendment to the Transplantation and Anatomy Act.

In my opinion the amendment is unnecessary as the Act as it stands has the effect intended by the amendment.

The use of the driver's licence as a method of increasing organ donation is not as straightforward as some may believe.

For a start, if the drivers licence contains an "N" because the applicant ticked the "No" box, no donation can occur. This can only be reversed by a subsequent consent to donation in writing. Even if relatives were convinced the person was now in favour of donation, the tick box "No" is conclusive.

My personal view is that the driver's licence form should only permit a positive response so that the driver's licence allows only for a "Yes". If the applicant does not tick "Yes", the box should be left empty. It is too easy to tick the "No" box rather than think the issue through.

Although, under the present Act, next of kin of a deceased person has no power to overrule the deceased person's consent (whether on a driver's licence, kidney donor consent form or any other written consent), in practice the opposition of next of kin is usually allowed to prevail.

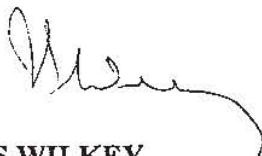
The reason is concern that the potential adverse publicity resulting from a confrontation between a hospital or transplant team and next of kin is very likely to affect adversely organ donor recruitment. The organ donation program can only be successful because of the altruism of members of the community. Adverse publicity is likely to be counterproductive.



The driver's licence program provides an opportunity to give the message of the need for organ donation. The effectiveness of the program could possibly be increased by providing transplant coordinators with access to a database which would allow them to have knowledge of a persons consent before the approach to the next of kin. If it were known that a person had given consent, the transplant coordinator could approach next of kin from the position that consent had been given, rather than that they were seeking consent.

I think it is important that a person who wishes to be an organ donor makes it clear to their next of kin that that is their wish.

Yours sincerely

A handwritten signature in black ink, appearing to read 'I S Wilkey', with a long, sweeping underline that extends to the right.

I S WILKEY
Medical Superintendent