



Speech by

Mr M. HORAN

MEMBER FOR TOOWOOMBA SOUTH

Hansard 14 April 1999

TRANSPLANTATION AND ANATOMY AMENDMENT BILL

Mr HORAN (Toowoomba South—NPA) (9.37 p.m.): I have pleasure in seconding this motion, namely, that all words after "Bill" be omitted and the following be inserted: "be referred to the Legal, Constitutional and Administrative Review Committee for consideration and report back to the House by 1 August 1999."

I personally congratulate the member for Thuringowa for bringing forward this issue. I believe that his intent in introducing this private member's Bill is very humanitarian. Certainly anyone who read the maiden speech of the member for Thuringowa would have noticed that his speech was very well considered. The member talked about people with disabilities. And tonight in this House we see the results of his humanitarian thoughts and attitudes through the debate on this Bill.

This private member's Bill perhaps makes us all stop and think for a while. A lot of serious ethics are addressed in this legislation. It makes one stop and think about the extent of medical science and medical technology and how we live in a world where there are many serious ethical issues, problems and dilemmas that we have to talk through, debate and understand.

Particular procedures have to be undertaken with a great deal of sensitivity and care as well as respect for the people involved in the process. Through advances in medical technology we are now seeing transplants being undertaken which we would not have thought possible a few years ago. The shadow Minister for Health mentioned Fiona Coote. I think we can all remember the publicity that surrounded Miss Coote and our feelings for her and her family.

Since then heart transplants have become relatively commonplace. At the Prince Charles Hospital in Brisbane medical staff are now able to undertake heart and lung transplants. People suffering from cystic fibrosis now face the possibility of being able to obtain lung transplants. With such transplants they are now able to live longer and have more productive lives.

Perhaps one of the greatest time bombs facing the world is hepatitis C. Liver transplants can be performed to help patients who have malfunctioning or failed livers as a result of hepatitis C. I understand there is a great demand for such transplants in the United States of America. This has been brought about because some people, two or three generations ago, were foolish enough or naive enough to dabble in intravenous drugs and, as a result, have contracted hepatitis C. These people are finding that in their fifties they are suffering the effects of hepatitis C and will perhaps need a liver transplant.

An Opposition spokesperson quoted figures for kidney transplants. We were told that some 1,555 people are waiting for kidney transplants and that some 441 patients received kidney transplants in the last 12 months. This is one of the results of the advances in medical technology. Patients are now able to access renal dialysis units which have been established throughout Queensland. The former Goss Government and the former Borbidge Government both put in place additional dialysis units throughout the State. Some centres which previously did not have such a service now have a dialysis machine in their hospitals.

Patients have to access the hospital three or four days a week to receive dialysis treatment for a number of hours. The treatment is administered by highly trained staff. Of course, these patients are hoping that they may be able to receive a kidney transplant which would save them the lifelong umbilical cord of having to go through renal dialysis every second or third day of their lives.

I would like to mention the Government Air Wing which provides such wonderful service at very short notice in relation to transplants and organ retrieval. There have been times when the media has talked unkindly about the fact that the Queensland Government of the day has access to a jet and a King Air. I believe all honourable members understand the necessity for such a service in a State as big and decentralised as Queensland. We should never forget the humanitarian aspects of the Air Wing. It does not matter if the service is carrying the Premier or some other person, if a call comes out that the Air Wing is to go to North Queensland, New Zealand, New South Wales, or wherever, for an organ retrieval, the politician is dropped off at the next available airport.

Mr Swarten interjected.

Mr HORAN: Even if it is the Minister for Public Works and Housing. I think all Ministers and all Government officials understand when they get on the plane that a call for an organ retrieval comes first.

Mr Swarten: Not one person in this place would ever complain.

Mr HORAN: We must thank the pilots and their assistants for what they do. All previous speakers tonight have mentioned the transplant coordinators and the service that they deliver. When I was Health Minister I would often shake my head in awe at some of the services provided by people who work in the health area. As a word of encouragement I often used to say to them that they can look back on every hour, on every day, on every week and on every month and realise that they have made people more comfortable, have helped people, or have done something in a caring way that assisted people. I think they are very fortunate to be able to work in the health area and provide such comfort.

People who work in the area of organ donations, organ retrieval and organ transplants are involved in an extremely sensitive area. They are very special people indeed. They are dealing with people who are suffering the greatest grief and tragedy. On the other side of the equation, they have to deal with people who have been asked to come to the hospital at short notice in order to receive an organ.

One of the most touching ceremonies one could attend in Queensland is the annual thanksgiving service which is organised by the transplant coordinators. The families of deceased persons who have donated organs and the recipients of the organs—the gift of life—all come together at a service in Brisbane. I remember attending one such service at the Albert Street Uniting Church. It was a wonderful service. One realises how grateful people are for such a donation. One understands the meaning of the transplant family of Queensland. The people have a high regard for each other. It makes the donees appreciate life and the gift with which they have been provided.

Mr Sullivan: The donor family, too, is very important.

Mr HORAN: It helps the donor families come to grips with the loss they have suffered. They know that life is enduring. It is one of the most wonderful services held in Queensland each year.

We have been receiving fewer organ donations because of the dramatic reduction in the number of deaths on Queensland roads. We have been able to reduce the severity of the deaths through such things as seat belts—

Mrs Edmond: Most deaths are pretty severe.

Mr HORAN: The severity of the injuries. We have been able to reduce the severity of the injuries through the use of helmets and seat belts and through our system of intensive care where people are able to be saved. We have to be thankful that we are having fewer and fewer deaths and road trauma.

I do not believe many people understand what an event such as an organ retrieval or a transplant involves in a hospital. A number of theatres are tied up and staff have to drop whatever they are doing and attend to that particular issue. They can be involved for many hours or days.

I would like to get back to the point of the private member's Bill. The intent of the Bill was to increase the availability of organ donations or to put in place a system that can make available an organ at a particular time. I believe that previous speakers have spoken very eloquently about the need to do that with great care and sensitivity—to take notice of the actual event or the circumstance in which it happened. All of that can make a significant difference to the family of a person who, maybe years before when he or she was healthy and well, simply ticked a box on a licence application in relation to organ donation.

Tonight, I want to tell the Parliament—and the Minister may have received a letter from me about this matter; it was written only a few days ago—about a fellow in Toowoomba who received the gift of life about a year ago. Last Saturday, I was listening to him on 4WK. He is a hotelier who rings in during the racing program on Saturday mornings with tips and so forth. He spoke about how it had been 12 months since he had received the gift of life of a liver transplant. Throughout his life he had been heavily involved in marketing and advertising. Some members of this Parliament may remember the Bulimba Beer ads—"The big, big beer is Bulimba"—of many years ago; that was a project of this

fellow who, at that time, had an advertising agency. He has since worked in marketing and advertising and, for the past 18 years, he has worked in hospitality.

He feels extremely grateful for what has happened to him and has become part of the Queensland transplant family. He runs a hospitality business in Toowoomba—a major hotel and family eating area. He has put his marketing ability, his commitment and resolve behind a fundraising program directed towards building an awareness in Queensland of the need for organ donation.

Mrs Edmond: I will be happy to hear from him.

Mr HORAN: He has had a liver transplant. In association with the Queensland Hotels Association and the Rotary district, which covers south-east Queensland and Toowoomba, he has put together and commenced a fundraising campaign in the hope of raising \$100,000 by October of this year to be donated to the Princess Alexandra Hospital foundation for research, I presume particularly for research related to organ donation and retrieval. However, it will be for the foundation to make that decision as to what research it will undertake. The people involved are also running an awareness campaign through various companies and organisations. They have had some of the talent and the production time donated. Already, they have gained quite a substantial amount of advertising on radio and TV free of charge.

One of the points of my letter was that these people are seeking \$35,000 to assist with the production of these first-class advertisements and so forth, and another was that I would be seeking, through the Premier's Department, a possible deputation when Cabinet visits Toowoomba on 9 May. I applaud the efforts of Mr Richard Bowly, who is the provedore of the Southern Hotel in Toowoomba. He has had a long, long history in hospitality, advertising and marketing. I think that he is just one of many, many Queenslanders who are so grateful for what they have been given—the bonus, the gift of life that they have been provided with. That is why I spoke about the thanksgiving service. So many people are prepared to provide some form of assistance through Rotary and through the QHA. I know that last Saturday they were out at the racecourse selling tickets for various raffles and so forth. There is no doubt whatsoever that they will hand over \$100,000 to the PA Hospital foundation.

I do not particularly want to use this speech to ask for money; I just want to tell the Minister about the campaign, because I know that she will look at the detail of it and come to whatever decision. I think that it is only honest and fair to say that these people will go ahead with this campaign regardless. The money is not absolutely essential, but if there is some assistance, it is certainly going to help them substantially in reaching their target. I have no doubt also that Queensland Health may wish to provide some ethical, technical or other advice on developing further coordination and so on so that whatever is done is done correctly and is directed towards the right end.

I am pleased to support the amendment that has been moved by the member for Maroochydore, the shadow Minister for Health. I think that it gives this Parliament the opportunity, through one of the parliamentary committees, to really do something together in a non-partisan way. I have taken note of what Queensland Health is doing at the moment. It has things going. It may well be that that would make the task of the parliamentary committee substantially easier in that it can say, "This is what is happening at the moment. Can that be enhanced? Is there any other advice that we can get? Can we do it better? Is it satisfactory?" Certainly, the amendment gives this Parliament a chance to be involved.

I conclude by saying, once again, that many of us in this House admire the member for Thuringowa for his principles, his humanitarian attitude and the way in which he has brought this legislation into Parliament. He has made the Parliament think about this issue long and hard. He has made the Parliament move an amendment to the legislation. He has made members talk about the issues. He has also made us all aware of the difficulties, the ethics, the sadness, the grief and the happiness that is involved in the entire system of organ donation and transplants. Most of all, this legislation has made us all feel very grateful and thankful for the generosity of spirit of the families of people involved in organ donations and the high level of skill of those who actually do the transplants. So it is with great pleasure that I second this amendment. I was pleased to hear the Minister—I think that I am correct in this—say that she is prepared to go along with it. I think that this process will take place in a truly bipartisan spirit. Hopefully, out of the process we can improve the donation rate of organs in Queensland.
