Enhancing organ donation awareness Conor Card

DR MD RAJIB HOSSAIN

When there is a need for lifesaving organ transplant, it starts with anguish wait and rigorous search for a donor. Lying on the bed, the patient in need might harbour the excruciating pain hoping to get an organ donation from a dying person or someone living with poverty (poor enough to sell own organ). S/he might have desperate hope that someone from his/her family will make enormous personal sacrifice to donate organ.

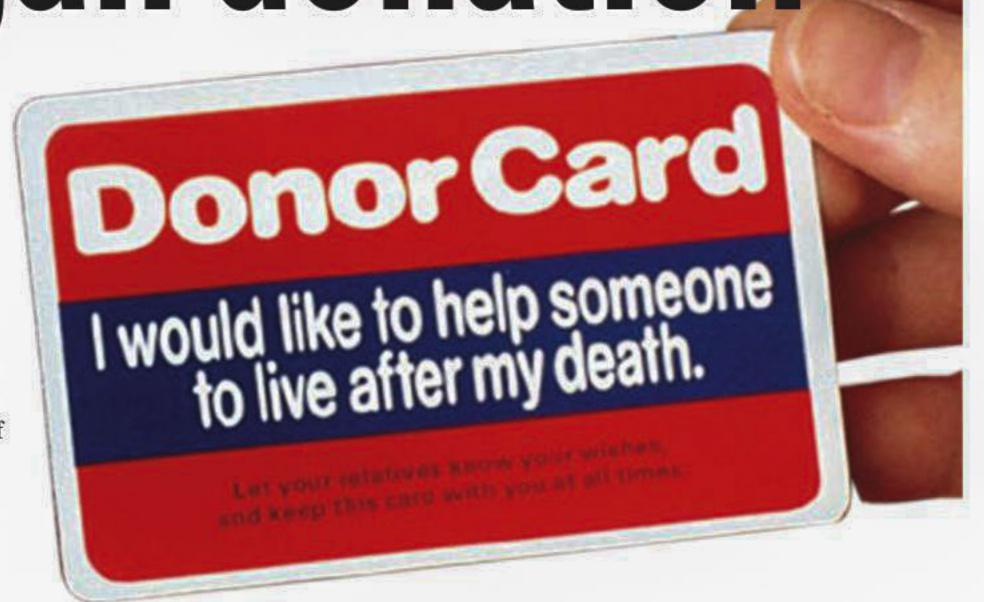
With the improvement of transplant medicine and increasing diseases that damage organs, the need for organ transplant has increased dramatically. But there is still huge gap between the demand for organ and supply where demand drastically outstrips the number of organ donors.

There are two main types of organ donation — living-donor donation and deceased or cadaveric donation. In Bangladesh, cadaveric transplant (where organs are removed surgically from donors shortly after their death or during brain death) is yet to start. By the law of the land, organs are only removed if the

deceased carried an organ donor card or if family members give permission. But, there are very few people, even in the educated segment of the society who are willing to sign a donor card. Although we claim to have better family value, most of us are unwilling to donate our organ to our near or dear ones.

Kidney transplantation is very common in Bangladesh and is done from living-donor donations. Although law does not permit selling organs or taking organ from a living stranger, media reports suggest many of the transplants are happening this way, making the transplant a questionable way out. We need to identify the effective strategy to enhance the organ donation awareness and eliminate barriers behind it.

Some countries like the USA have adopted opt-in approach where they leave the decision to people. In certain countries including Spain, Austria have tried an opt-out approach called presumed consent that says — every patient who dies is assumed to have consented to organ donation, unless they have specifically declined.



A new way to increase donations is being pioneered in Israel, that would give transplant priority to patients and their families who have agreed to donate their organs. If two patients have identical medical needs for an organ transplant, priority will be given to the patient who has signed a donor card, or whose family member has donated an organ in the past. It has shown a tremendous success taking Israel from bottom to one of the top ranked western countries where most organ donation takes place.

In Bangladesh, religious debate on organ donation is a big factor that might inhibit people to donate organ. However, most Islamic scholars agreed that saving a life supersedes most everything and organ can be donated if the only goal is to save lives. And also there is no barrier to accept organ.

In Bangladesh, strategic policy on organ donation should be accompanied by a huge public awareness campaign about organ donation countering the false perception in the society.

Millions of people die every year while awaiting for an organ transplant. Just a sign in donor card could give them a second chance at life. Help raise the awareness to save your near and dear ones.

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RESPECT TO WILL

Argentina Senate passes dignified death law

The Argentine Senate has approved a dignified death law to give the terminally ill and their families more say in end-of-life decisions, reports BBC.

The legislation means patients who are dying or suffering incurable illness or injury can refuse treatment, if there is an existing signed consent form. Until now, a court order was needed to end treatment or life support. The aim is to respect the autonomous will of the patient.

In cases where patients are unable to speak for themselves, the legislation empowers relatives or legal representatives to make the decision.

During the debate, some senators expressed concern about ending life support or withdrawing feeding tubes from a patient unable to communicate. The Roman Catholic Church rejected the new legislation, arguing that life support should never be stopped.



HEALTHbulletin

Testosterone supplements may help male weight loss

Older obese men could shift excess weight by taking testosterone supplements, suggest findings announced at the European Congress on Obesity.

In a study, hormone-deficient men were given testosterone supplements in a similar way to Hormone Replacement Therapy (HRT) for older women after menopause.

But experts warn that supplements may not be the answer in all cases due to possible risks of prostate cancer and heart disease.

Source: BBC

Blood test may help identify kids' smoke exposure

Parents may think their children are exposed only if they are around someone actively smoking a cigarette, or are unaware of where else their children may be breathing in smoke. But a blood test may help identify and reduce smoke exposure, said



researchers at the University of California, San Francisco. Secondhand smoke exposure in children has been tied to sudden infant death syndrome, respiratory problems, ear infections and asthma.

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Source: Reuters

HEALTH FINANCING

Moving towards universal health coverage

DR SAMLEE PLIANBANGCHANG

Although Bangladesh has made significant progress on health-related MDGs, the country is now facing challenges like high and impoverishing out-of-pocket health spending; an increasing burden of high-cost non-communicable diseases superimposed on an unfinished health agenda of preventable and communicable diseases. In order to tackle the challenges, appropriate strategy for national healthcare financing to move towards universal health coverage is crucial.

Universal health coverage (UHC) in countries of South-East Asia Region of the World Health Organisation (WHO) is based on three strategic choices:

(a) priority populations to be covered;
(b) essential or basic package of services to be delivered.

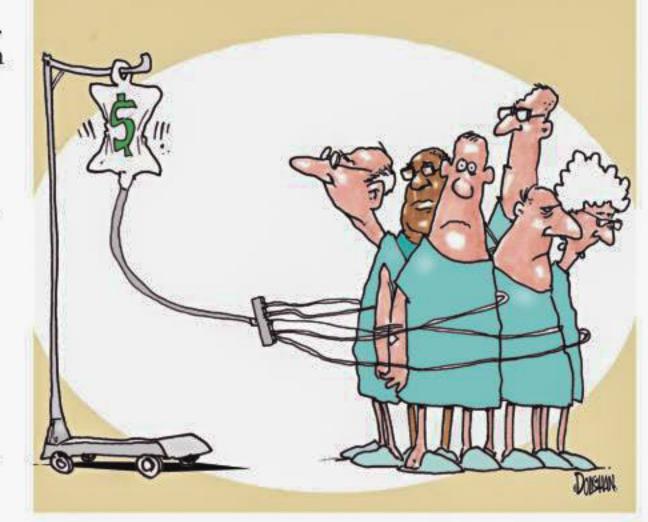
(b) essential or basic package of services to be delivered; and

(c) cost subsidies to be provided

Out-of-pocket spending (OOP) to access healthcare causes inequities in health and is a lead cause of household poverty. In South-East Asia, out-of-pocket spending contributes over 60% of total health expenditure and is the cause of one-third of annual new poverty.

Countries that have made progress towards UHC have reduced out-of-pocket spending to less than 30% of total health expenditure and increased government spending to over 4%. Experience has shown that there are inequities that could be avoided by pre-payments and social pooling of resources — general government revenues are the most equitable form of health financing.

Mandatory and contributory social insurance is the next option. Where there is limited scope to increase



fiscal space for health and where the formal sector too is limited, a practical way forward is to improve the efficiency in the current use of public resources; use innovative financing in the short-term for targeted population/services; and initiate contributory schemes as a supplementary measure.

Shifting away from fee-for-service to capitation and case mix payments methods has improved provider performance in the public sector and also aligned the private sector to universal health care efforts.

Strong government leadership and increasing institutional capacity are crucial to move towards universal coverage.

The writer is the Regional Director, WHO South-East Asia.

For any Queries or Comments Please Call: 01711539261

Know the foods that affect sleep

What you eat and drink can have a big impact on your ability to fall or stay asleep. Many foods can make you feel drowsy, while others can cause trouble sleeping. The National Sleep Foundation, USA, mentioned these examples of foods and beverages that can affect your sleep:

•Carbohydrate-laden foods make it easier for a sleep-inducing amino acid called tryptophan to reach the brain. Tryptophan is found in many protein richfoods. So combining proteins and carbs makes for good pre-bedtime snacks. Examples include milk and cereal, cheese and crackers or peanut butter and toast. •Eating a big meal also can trigger sleepiness, par-

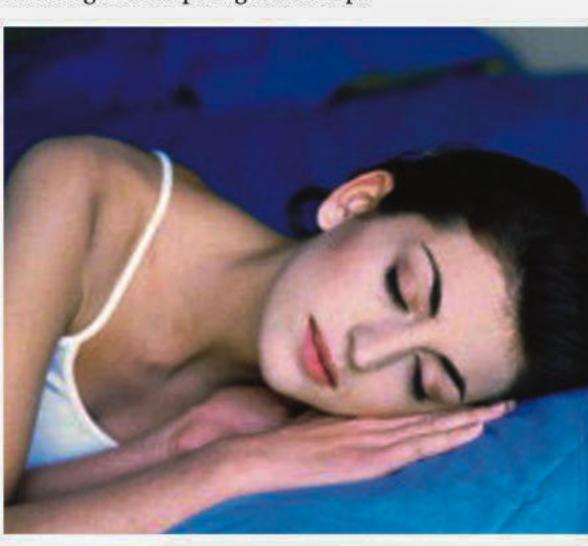
ticularly when it is heavy in carbohydrates.

•Caffeine in the late afternoon or before bedtime can

inhibit drowsiness, but can lead to trouble sleeping.

•Energy drinks may temporarily boost energy levels, but they often cause a crash and ultimately can lead to drowsiness.

 Alcohol can cause disruptions in sleep and inhibit entering the deep stages of sleep.



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