



Presumed consent and the implications for eye donation

Parwez Hossain ^{1,2}

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In 2020, England and Scotland have moved to presumed consent for organ donation [1]. In Wales, the human transplantation (Wales) act 2013, already put an opt-out system in place since 2013, and the rate of organ donation increased [1]. In the home nations of England, Scotland and Wales, the law generally applies to adults who have been resident in their country for more than 12 months and die in their respective countries. The rule excludes specific individuals such as prisoners and members of the Armed Forces.

The Welsh practice has been in place for the longest time in the UK, and it operates a ‘soft opt-out’ model. This means that family members or legal representative are approached after the individual dies. The family members indicate whether they are aware that the deceased had any objection for organ donation. Donation does not proceed until the family gives consent [1]. In England and Scotland, the processes are very similar.

In Northern Ireland, there is no opt-out system. In 2016, Northern Ireland assembly did not make any changes to their legal process for consent to organ donation at that time [1].

In this issue, Dimitry et al. [2] remind us of the recent change in the law for England. In their letter, they provide an overview of the implications of the opt-out system on eye donation rates in countries in mainland Europe where there is a longer track record of this kind of legal change. Despite providing benefits to organ donation, increases in eye donation are not similarly matched. The authors highlight that in some countries, more specific measures such as education and infrastructure changes could be more effective [2]. From personal experience of running an eye

donation service, the training of allied health professionals such as trained eye retrievers, end of life care professionals would increase the capacity of a healthcare system to identify and retrieve potential eye donations. In many hospitals and healthcare organisations, this human infrastructure appears to be the rate limiting factor for higher eye donations.

There is a growing shortage of corneal tissue for transplantation both nationally and worldwide, in 2015, only 1/70 patients waiting worldwide could benefit from a corneal graft each year [3]. In the UK, NHS Blood & Transplant regularly report of eye bank shortages [2]. At the moment, we can only wait and see whether a legal change can improve eye donation rates, but it likely that a simple law change will not automatically improve eye donation rates.

Compliance with ethical standards

Conflict of interest The authors declare that they have no conflict of interest.

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✉ Parwez Hossain
parwez@soton.ac.uk

¹ Eye Unit, University Hospitals Southampton NHS Foundation Trust, Tremona Road, Southampton, UK

² Clinical Experimental Sciences, Faculty of Medicine, University of Southampton, Southampton, UK