

Bilsen ONAT*Provincial Directorate of health
Bursa, Turkey
blsn@mynet.com.tr*

Health Workers in Organ Donation: Evaluation of Information and Approach

ABSTRACT**Health Employees in Organ Donation: Evaluation of Information and Approach**

Human life has become much easier thanks to the changes brought by technologies. However, reasons of these tech business or illness occurring in life were insufficient to prevent human deaths. Cadaveric transplantation in the bodies of dead people or other people with medically bodily integrity of the bodies provided. To make sense of something which is an indicator of transplantation in the name of humanity, dead people, people living is more than a matter of concern.

This article is aimed to assess knowledge and attitudes of health workers about organ donation. Survey of health workers' application has been made. Frequency of the resulting data in SPSS 19.0 statistical analysis software package, percentage (%) and the chi-square (χ^2) were used in the course of performing tests.

The survey related the participation rate of health workers at the age group between 31-40 (51%), including female health care workers (80.5%), male health professionals (19.5%), nurses (52.1%); these people have knowledgeable about transplantation, they want to be informed about transplantation, of all information relevant persons could obtain, relatives or families in need of transplantation is understood to be more precise, was found to support the issue of transplantation.

People who make decisions about transplantation also need to be aware of death of close relatives. For this purpose, there should be given an adequate importance to transplantation, there should be informative programs for all segments of the society.

Key words: *Organ transplantation, Organ donation, Health worker, Medical death.*

1. Introduction

Irregular health is the biggest of cases that negatively affect people's normal life and work life is. Significant economic losses in human life are results from encounters with people's diseases. Reduction of impact of these negative situations, that occur in human life, is very important. Nowadays there are significant improvements in the situation relating to adverse conditions in organ transplants and organ donation programs promoting to minimize the recorded effects. Any disease occurring in people's lives, especially causes a decrease in the quality of human life, it affects people's lives performance and mental health. Application of organ donation and transplantation depends on the health management studies and management styles. The biggest feature of organ donation and transplantation is known about human life. The most small omissions, likely to be related to human life, are always the end of a human life. Health workers are the first who are encountering with the wounded and sick at the place of accident. Therefore it is necessary to have very high value to organ donation and transplants given by these employees.

Health services management style can lead to increase or decrease of organ donation rates. In this project, information on organ donation and approaches of health workers have been investigated. Due to increasing value of human health in recent years, the importance of organ donation service has increased. The increase in positive and negative, depending on the number of cases of organ donation, has occurred. Business life has the opportunity to correct the mistakes made in other sectors, particularly in the health sector, where organ transplants can give the smallest chance of reversing an error. So performing continuously training in organ donation services is important for implementation these services as well. In this study, information on organ donation and attitudes of health workers were investigated.

1.1. Organ and Tissue Donation

The tissues collected structure and formation the function of cells of similar structures are coming together. There are four basic tissues in the human body. These are epithelial tissue, connective tissue, muscle tissue and nervous tissue. These tissues, as they are independent, at a certain rate are in contact with each other as well. The organs consisting of the said tissue are similar to those structures (Tokalak ve ark., 2003).

Integrity of tissues and organs can be disrupted by various factors. Non-fulfillment of mandatory function would be in question. Transplantation, chronic tissue or organ failure and life-threatening are conditions when relevant tissues or organs from living or cadaver are to be transferred to the patient – is the name given to the process (Tokalak ve ark., 2003).

1.1.1. Organ Donation

While alive people living with medically free will are not allowed after the end to use tissues and organs for the treatment of other patients. Organ and Tissue Removal, Storage and Transportation – in accordance with the Law on Vaccination. The age at least eighteen years old and presence of at least two witnesses of the donor, to be a person from the organs and tissues of the distinctive open, informed and as far away from the action already given in writing and signed or at least two witnesses should report that there are verbal sign and declare, has to be approved by physician (<http://www.tip2000.com/tedavi/bnakli.html>).

1.1.2. Definition and Classification of Organ Transplantation

Organ transplantation is transfer of living tissue or cells of one individual to another, transferred to the functional integrity of the donor organ transplants in order to be able to continue in the recipient. Graft (allograft) is the transplanted tissue or organ. Donor is the person who gives the live tissue; receiver (recipient) is the person to whom the live tissue has been transmitted. Tissue and organ transplants (transplants), relationship between transmitter and receiver are also classified according to the place of transplantation (Koşar, 1994).

1.1.3. Classification by Genetic Relationship Between Donor and Receiver

Autotransplantation: A tissue or organ of the same creature, taken from one place for to be transferred to another location (Anadolu Üniv., 1993).

Isotransplantation: Transfer made between individuals with the same genetic makeup. Examples are organ transplants performed between identical twins (Getiren, 1997).

Allotransplantation (homotransplantation): Tissue and organ transplantation between individuals of the same species but without genetic similarity between them (Anadolu Üniv., 1993).

Xenotransplantation (heterotransplantation): Transplantation of tissue and organ between two different types. Chimpanzees are examples of heart transplantation to human (Getiren, 1997).

1.1.4. Classification by Place of Organ Transplantation (Transplant)

Orthotopic Transplantation: Transplantation of tissue and organ if they are not normal (Anadolu Üniv., 1993).

Heterotopic Transplantation: Transplantation of tissues and organs from where they normal at different location (Koşar, 1994).

1.1.5. Organ extraction from alive

Protection of health of organs from living donors during the removal process is the main target. Therefore, there are series of operations until all donors undergo thorough investigation. Donor's surgery can be a cause of morbidity and mortality. During the process an adequate field of vision must be provided. Protection from potential surgical complications of donor is required (Southard, Belzer, 1997).

1.1.6. Organ extraction from cadavers

Preparations for the surgical procedure begins with the declaration of organ donation. Brain death of a human is the best way for to protect the body as soon as the operation and removal is the main objective. During removal of any organ the general surgical principles are applied. The patient is taken to the table and the planned incision is made according to the organ. A large incision in order to run the process convenient and hassle are often preferred. On the first phase of organ preservation the process of vascular structures liberalization is performed. Then warm ischemia and create damage to the perfusion solution was cooled by means of cannula inserted into aorta in order to protect it (Wisconsin solution, Collins solution) is cooled by the organs. Organs carefully and rapidly removed and are ready for transplantation on a separate table. The organs to be transplanted are stored at +4 ° C until they are needed. As a short, to the possible extent, keeping the waiting time, it is important to safeguard structural and functional integrity of the body (Özerkan, 1993).

1.2. History of Organ Transplantation

Legends about the need for transplantation west and is common in the eastern culture. Created by the gods in Homer's Iliad and a mythological creature with the head of the 3 different animals, namely is mentioned Chimaera (Acarlı, 1998).

XVI. century. in Rabelais 'Gargantua and Pantagruel': the chapter about battle in this book describes refitting of the severed head Epistomology (Yurdakök, 2002).

In 1804 Giuseppe Baronio for the first time has successfully placed the skin autografts in sheep. In 1822 Bunker used a skin graft to repair the nose defect. In 1880, in Scotland, William MacEwan for the first time made auto bone transplantation in humans. In 1980, Eric Lexter has performed transplantation of cadaveric knee joint. The first successful corneal transplantation in humans has been made in 1905 in Austria by Edward Zirner. Corneal transplantation became widespread after 1935 (Bayraktar, Talas, 2002).

John Hunter, the Scottish surgeon (1728-1793), started experimental studies on transplantation, began to lead and is reflected by going to the clinic. In 1902 Alexis Carrel developed and created new vascular anastomosis technique and experimental studies on organ transplantation on possible transplantation of various organs. Modern sense organ transplantation made progress in 20th century. Kidney, liver, heart, lung, pancreas, vascular transplantation of organs such as the bowel, since the second half of this century began to enter into clinical practice (Acarlı, 1998).

3. Material – Method

This is a descriptive study. The universe and the sample of the study consisted of 419 health workers of a state hospital. Employees covered by the study were selected from these health workers who are working with the terminally ill often critical patients of the clinic. For conducting the study a written permission from the hospital administration has been obtained. The purpose of the study carried out by the researcher was by using questionnaire and interviews about content of the information given to health care workers, and oral consent was obtained to participate in the study. All health professionals working in clinics has been reached, all health professionals are covered in the study. For obtaining data, with the idea of the health of workers and demographic characteristics of organ donation intended for identification the factors affecting the idea that open-ended questionnaire consisting of 12 questions was used. The study was conducted in February, 2014. Every researcher, working with each of health workers, face to face have filled the question papers. Answers given to open-ended questions have been grouped according to their content and data obtained were statistically evaluated by the SPSS software package 19.0. Statistical evaluation of the chi-square method and percentages were used.

4. Results

According to the data obtained from the study, female made 80.5% of health workers, male – 19.5%. As regards age distribution, 25.5% were in the group 20-30 years, 51% – 31-40 years, 22% – 41-50 years, 1.5% – 50 years and older. Occupational distribution: 7.2% – physicians; 52.1% – nurses; 22.2% – midwives; laboratory technicians – 2.6%; 2.6% – computer operators; 1% – security guard; emergency medical technician – 6.2%; health officer – 5.7%; medical secretary -0.5%.

Table 1.
The Gender Distribution of Health Workers

		n	%
Gender	Woman	161	80,5
	Man	39	19,5
	Total	200	100,0
Age	20-30	51	25,5
	31-40	102	51,0
	41-50	44	22,0
	50 and over	3	1,5
	Total	200	100,0
Profession	Doctor	14	7,0
	Nurse	101	50,5
	Obstetrician	43	21,5
	Laboratory technician	5	2,5
	Computer operator	5	2,5
	Security officer	2	1,0
	Emergency medical technician	12	6,0
	Health officer	11	5,5
	Medical secretary	1	,5
	Total	194	97,0
	Which specify the Job	6	3,0
	Total	200	100,0

As regards gender of the participants who answered the question "Been in the organ donation?". As a result of comparison of expression; female health workers located in the organ donation (68.6%) (n = 24), included in the organ donation (83%) (n = 137), male health workers found in organ donation (31.4%) (n = 11), organ included in the donor (17%) (n = 28), respectively. Female health workers has emerged in organ donation and they are more than the absence of both the organ donation. $P < 0.05$ ($0.50 < 0.05$) Been in the organ donation with the health worker is gender? There was a significant correlation between the expression (Table 2).

Table 2.
With Gender "Been in the organ donation?" Comparison of Expression

		Been in the organ donation?		Total	Two-tailed significance	
		Yes	No		x2	p
Gender	Woman	n	24	137	3,846	,050
		%	68,6%	83,0%		
	Man	n	11	28		
		%	31,4%	17,0%		
Total	n	35	165			
	%	100,0%	100,0%			

Gender of the participating health care research "Been in the organ donation?" As a result of comparison of the responses they gave to the testimony; it was found: women 68.6% (n = 24) yes, 83.0% (n = 137), 31.4% males (n = 11), 17% (n = 28). Female and male health workers from health professionals: from 24 to 11 people have understood that a total of 35 people, including organ donation. This ratio is $35/200 = 17.5\%$. The table with gender constitute the research group of health workers, as shown in Figure 2, that they exist in the perception about organ donation, was determined to be statistically significant difference ($p < 0.05$).

5. Discussion

Health thoughts on organ donation of employees and the factors influencing the results of this study which was carried out for identification male and female health workers most of their presence in the organ donation, 24 women and 11 male of health workers in organ donation, from 35 health workers, understand they are located.

200 survey of physicians found that 16.5% of physicians donate their organs (Koşar, 1994). Students of the Malatya School of Health Sciences in the performed study reached the conclusion that 4.2% of students in organ donations (Saritaş, 2005). Eskisehir in the study conducted in the society; of the individuals participated in the survey it was observed that some 2% of donated organs (Bal and Colak, 1998). In summary it is seen that the rate of organ donation in Turkey to address this topic in studies ranged from 2% to 16.5% (Çan et al., 1997). In other words: a higher rate of participation of the medical staff in the community stems from the fact sensitive organ donation organ donation. However, the maximum rate is 16.5%; both health professionals, still of organ donation in both segments of society shows that very inadequate. This issue of both health professionals and the media is to inform the community will be beneficial to handle this issue and encourage publications. A survey of participants in organ donation and the question whether they have information about transplant; 24 (9.1%) stated that there is

(Yumak, 1994). As regards knowledge of health care workers, who participated in another study, physicians were asked: 42 (21.0%) have “sufficient knowledge” while 158 (79.0%) were “insufficient” and opined that direction. When they have been asked about reasons: 133 (79.6%) were “lack of in-service training in the profession”, 123 (73.7%) were “professional is insufficient information on the subject of education” shall have (Kosar, 1994). Fully informed during vocational training in the training of health workers is very important. This information is followed by developing technology and techniques in working life after graduation will always be permanent if it is supported by continuous in-service training.

Studies in organ donation lack of health personnel surveyed when asked why; Of organs donated 19% reported that they did not want, because they believe that good ideas evaluated (Aktekin, 1994). Students donate their organs they think 55.9% reported in the research on the idea that they worried about the abuse after their death (Saritaş, 2005). Considering the above rates: One of the main barriers to organ donation as well as the cause of concern arising from the misuse of organs after death is due to lack of trust between health professionals. When evaluating relationships between age and examined the question of organ donation; of those surveyed 24 (7.9%) were “young individuals in individuals older than they feel more positive about organ donation” in the direction they respond. 64.8% of the students reported positive views about organ donation (Saritaş, 2005).

6. Conclusions and Recommendations

Health workers need about organ donation, according to data obtained from this study was concluded to donate their organs as well as to work on the case of organ donation in the hospital where the results are not sensitive enough to be willing to participate. The most important reasons for not to donate organs is thought to be afraid of familial and illegal practices. The most important work of the reasons for not wanting to participate in organ donation is expressed as they do not know what to do. Health care workers of the organization is to make them more conscious with the aim of training programs on organ donation, as well as considering they are a part of the society, considering the media in society router effect, the media also suggested to use this issue more effectively.

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