

# Attitude of critical care professionals (CCPs) towards implementation of organ donation as end-of- life care practice in Greek Intensive Care Units

The Hellenic Organ Donation in Intensive Care Unit Survey: **HODICUS**

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With the support of Hellenic  
Transplantation Organization



**\*I have no financial interests or relationships to disclose**

**Introduction:** Knowledge and attitude of critical care professionals towards organ donation has been proven to influence a country's donation rate. Compared to other European countries, **Greece** is lagging far behind in the field of organ donation after brain death, has not yet developed a DCD program and end-of-life practices are not formally applied.

**Objectives:** To investigate the knowledge and attitude of Greek ICU health professionals (physicians and nurses) towards current national practices of organ donation and future perspectives of implementing donation after circulatory death according to the new national plan on organ donation

**Methods:** ICU health professionals from Intensive Care Units of Greek hospitals with a dedicated transplant coordinator answered anonymously and voluntarily an electronic questionnaire after participating in a specialized lecture concerning present and future practices of deceased organ donation or studied an informative document



**9 hospitals**



**12 ICU**



**15 lectures on site**  
**150 handed-out documents**

**102 MD**



**130 RN**

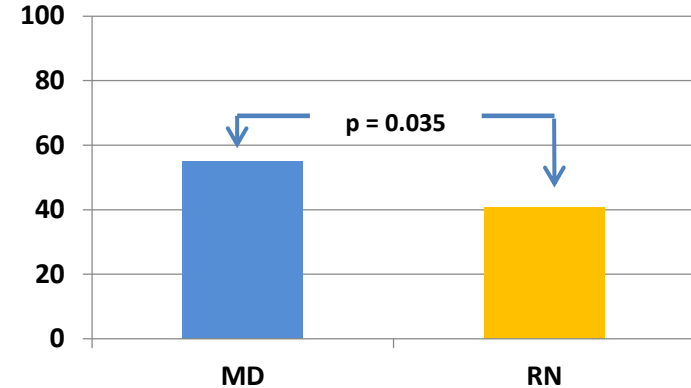
# Results

**Table 1. Demographic data**

Variable	MD	RN
Position in ICU	102 (44%)	130 (56%)
Working experience in ICU		
Up to 10 years	56 (54.9%)	79 (60.8%)
>10 years	46 (45.1%)	51 (39.2%)
Hospital category		
Trauma hospital	72 (71.6%)	102 (83.1%)
Non-trauma hospital	29 (28.4%)	22 (16.9%)
Transplantation program	29 (27.4%)	31 (23.8%)
No transplantation program	73 (72.6%)	99 (76.2%)

DBD: donation after brain death

**Figure 1. Formal education on DBD**



**Figure 2. Knowledge of Greek legal framework on DBD**

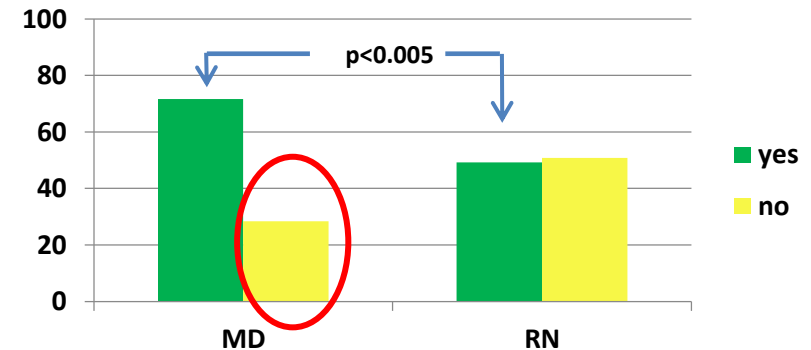


Figure 3. High self-reported confidence level about DBD (\*p<0.005)

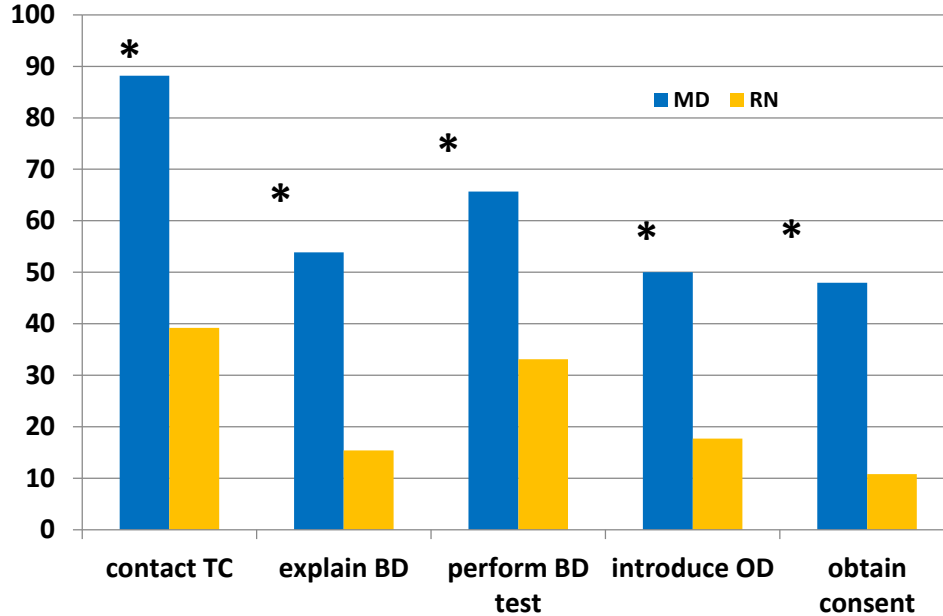
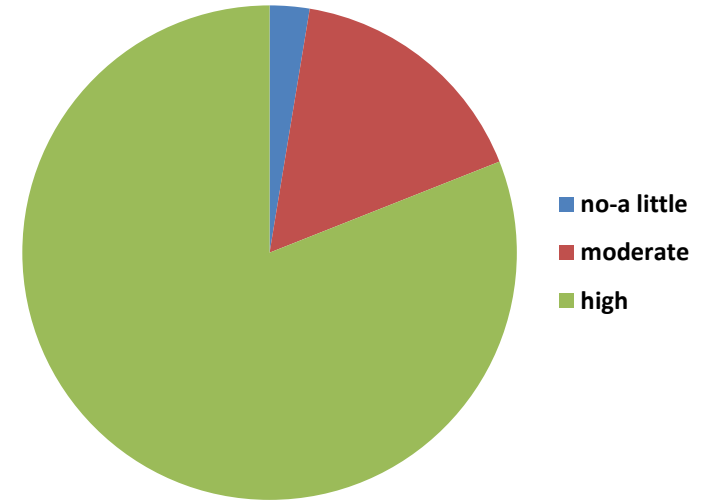


Figure 4. Acceptance of ICOD



ICOD: Intensive Care to facilitate Organ Donation  
OD: organ donation  
BD: brain death  
TC: transplant coordinator

Figure 5. Level of comfort to perform LLST

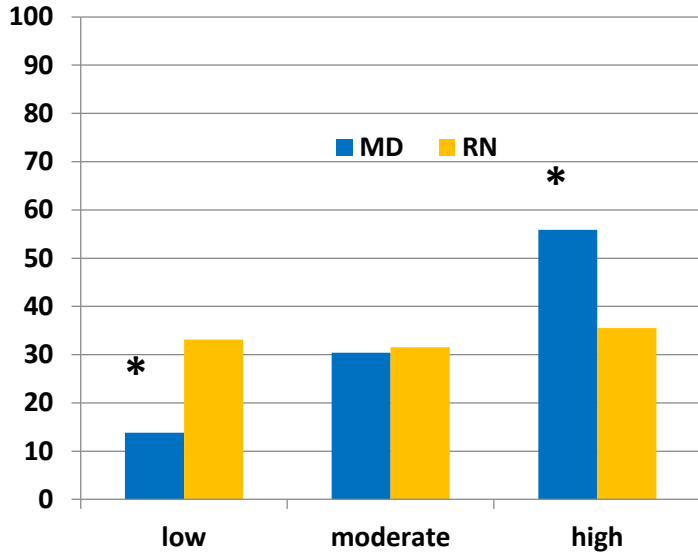
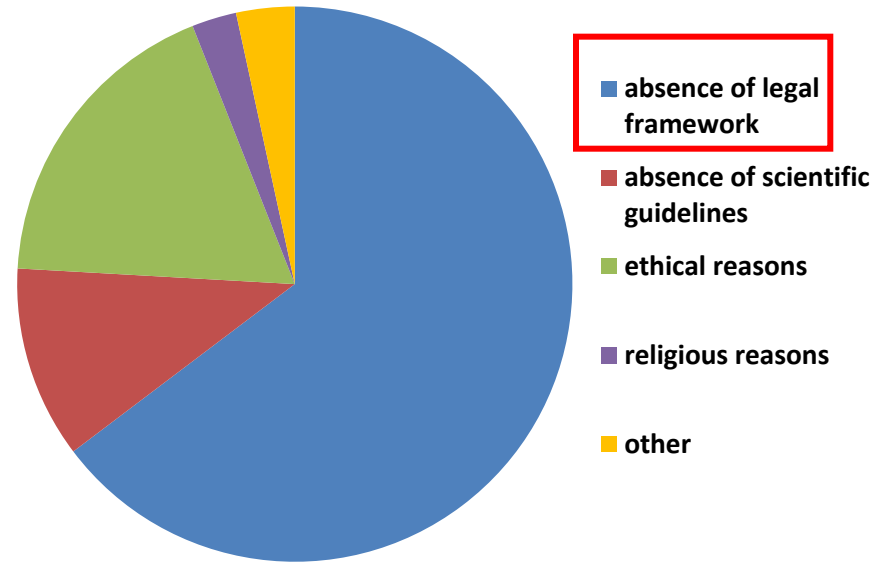


Figure 6. Reasons for NOT performing LLST



LLST: Limitation of Life Support Treatment  
\*p < 0.005

Figure 7. Acceptance of cDCD

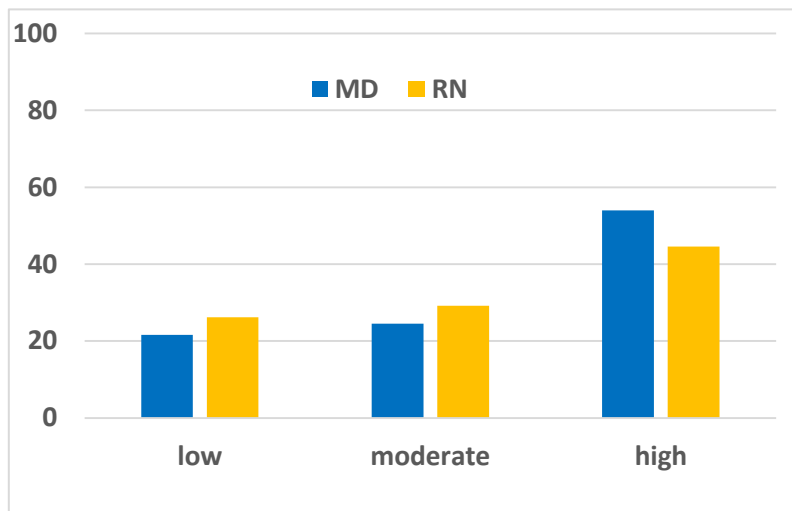
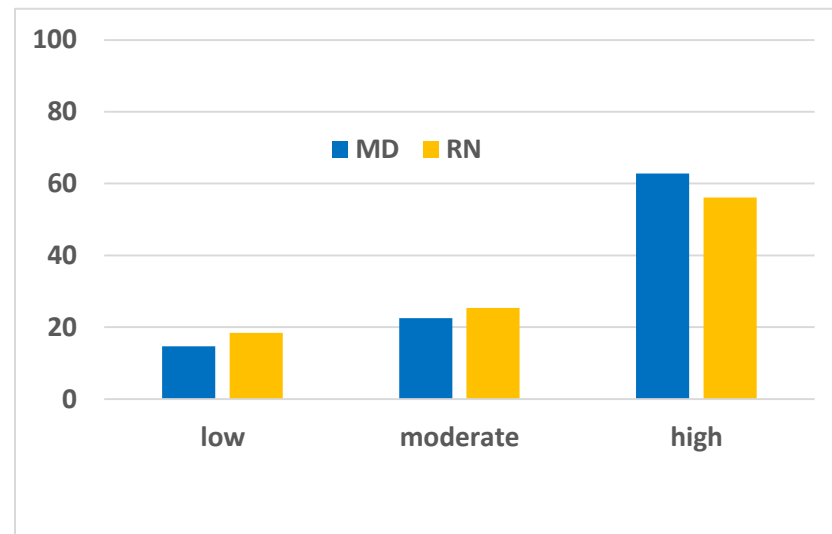


Figure 8. Acceptance of OD as EOL care practice



**Conclusions:**

- Need for **educational initiatives** to increase level of knowledge and self-confidence towards deceased OD among ICU professionals
- Structure of **legal framework and national protocols** for EOL care and LLST
- OD as EOL care practice is accepted but **training and education** is important to implement cDCD in Greece

cDCD: donation after controlled circulatory death  
OD: organ donation  
EOL: end-of-life