

The Nurse's Role in the Organ Donation Process in Brain Death

Atuação do Enfermeiro no Processo de Doação de Órgãos em Morte Encefálica

El Papel del Enfermero en el Proceso de Donación de Órganos en Muerte Encefálica

RESUMO

O objetivo deste estudo foi compreender a atuação do enfermeiro no processo de doação de órgãos na condição de morte encefálica, identificando as barreiras no processo de trabalho do enfermeiro. **Metodologia:** Trata-se de uma revisão integrativa de literatura, utilizou-se a estratégia PICO, com busca nas bases de dados PubMed e BVS, entre 2014 e 2024. **Resultados e Discussões:** Foram obtidos estudos que enfatizam a resistência na confiança perante as doações e o sistema de transplante, processos, aspectos técnicos e éticos da doação; Os enfermeiros carecem de mais educação em saúde e conhecimento específico sobre os procedimentos no contexto, sendo esse temática uma das fragilidades da enfermagem. **Conclusões:** Percebemos que o papel da comunicação e educação em saúde se fazem fundamentais para o enfermeiro. Nota-se o impacto que uma comunicação ativa, esclarecida e empática promove para a mudança desse cenário, fazendo-se necessária a capacitações que agreguem o aperfeiçoamento das condutas.

DESCRIPTORIOS: Papel do profissional de enfermagem; Obtenção de tecidos e órgãos; Morte encefálica; Transplante; Enfermagem.

ABSTRACT

The objective of this study was to understand the role of the nurse in the organ donation process in the condition of brain death, identifying the barriers in the nurse's work process. **Methodology:** This is an integrative literature review, using the PICO strategy, with searches in the PubMed and BVS databases between 2014 and 2024. **Results and Discussion:** Studies were obtained that emphasize the resistance in trust towards donations and the transplant system, processes, technical and ethical aspects of donation; nurses lack more health education and specific knowledge about procedures in this context, with this theme being one of the weaknesses of nursing. **Conclusions:** It is evident that the role of communication and health education is essential for nurses. The impact of active, clear, and empathetic communication is noticeable in promoting change in this scenario, highlighting the need for training that enhances conduct improvement.

KEYWORDS: Role of the nursing professional; Tissue and organ procurement; Brain death; Transplantation; Nursing.

RESUMEN

El objetivo de este estudio fue comprender el papel del enfermero en el proceso de donación de órganos en la condición de muerte encefálica, identificando las barreras en el proceso de trabajo del enfermero. Metodología: Se trata de una revisión integrativa de la literatura, utilizando la estrategia PICO, con búsquedas en las bases de datos PubMed y BVS entre 2014 y 2024. Resultados y Discusión: Se obtuvieron estudios que enfatizan la resistencia en la confianza hacia las donaciones y el sistema de trasplante, los procesos, aspectos técnicos y éticos de la donación; los enfermeros carecen de más educación en salud y conocimiento específico sobre los procedimientos en este contexto, siendo este tema una de las debilidades de la enfermería. Conclusiones: Se percibe que el papel de la comunicación y la educación en salud es fundamental para los enfermeros. Se nota el impacto que una comunicación activa, clara y empática tiene para promover el cambio de este escenario, destacando la necesidad de capacitaciones que mejoren las conductas.

PALABRAS CLAVE: Papel del profesional de enfermería; Obtención de tejidos y órganos; Muerte encefálica; Trasplante; Enfermería.

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INTRODUCTION

Brain death (BD) is defined as permanent, irreversible and true death and represents the cessation of all brain functions, even if hemodynamic functionality is present. The prognosis is reserved.¹ It is currently possible to use tissues, corneas, bone marrow, one of the double organs (e.g. kidney), part of the liver and lung from a living donor. From a person diagnosed with BD, lungs, heart, liver, pancreas, intestine, kidneys, cornea, skin, veins, heart valves, bones and tendons can be used.²

We can see that, over the years, there has been a growing awareness of the importance of organ donation, as well as the impact that its purpose can represent. In 2021, Brazil still had a low uptake of organ donation compared to the following years, performing only 23.5

thousand transplants and having kidney transplants as the most effective procedure (4.8 thousand).³ However, the refusal of relatives, even with a confirmed diagnosis of brain death, was the main factor for the low rate of donations this year, corresponding to 43% of the families contacted. 2 In terms of deceased donors, Brazil (18.1) is behind Argentina (19.6) and Uruguay (22.86) when comparing the regions of Latin America.⁴

The United States, with an average population of 334.8 million, leads the ranking of organ donations and in 2022 approximately 50 thousand transplants were performed, 40 thousand with organs from deceased people and 6 thousand with living people. 5 Brazil performed approximately 22 thousand transplants in 2022, with 59 thousand people on the waiting list. 3

This study seeks to fill the gap that

emerges in the nurse's performance in the process of organ donation in brain death. In this sense, it is necessary to research the existing deficiencies in this nursing process, the scarcity of human resources with knowledge in the researched area, materials and instruments that favor the identification of the possible donor, communication of this condition to the family members, maintenance of the viability of the organs for transplantation, in conducting the family interview and in releasing the donor's body for burial.⁶

Therefore, the objectives of the review were to understand the role of nurses in the process of organ donation in the condition of brain death, identifying the barriers in the nurse's work process for effective organ donation; and, to list the potential that nurses offer in the process of organ donation, characterizing their activity in the pro-

fessional scope.

METHOD

This is an integrative, descriptive literature review that seeks to highlight current knowledge on a specific topic, as it is conducted in order to identify, analyze and synthesize results of studies related to the given subject.⁷ In this context, since it is a qualitative research, it is governed by the identification of a phenomenon in the context in which it occurs and of which it is a part, and

must be analyzed in a comprehensive manner.

Qualitative research investigates the social reality of pre-defined groups, observing the complex reality of phenomena, facts and processes of that specific "scenario".⁸ The purpose of this analysis instrument is to provide reliable and concise information on the above, reporting in detail what the object of study proposes.⁹

To construct it, some strategies were necessary to choose the theme and the scientific direction of the research,

where the research question was submitted to the PICO strategy so that the bibliographic search would be more accessible and based on evidence from the literature. Thus, P (population) was defined as "Role of the nurse", I (Intervention) as "organ donation in brain death" and Co (Context) as "hospital/ICU". Subsequently, a search was carried out on the Health Sciences Descriptors (DeCS) website for the terms identified in PICO, resulting in the following descriptors:

Tabela 1 - Estratégia PICO.		
PICO	Descriptor	Alternative Terms
P= Nurse's role	Nursing Professional Role	Nursing Scope of Practice Role of the Nurse Role of the Nurse Role of Nurses Roles of Nurses Nurses' Competencies Profile Scope of Practice of the Nurse
I= Organ Donation in Brain Death	Tissue and Organ Procurement Brain Death	Tissue Donation Tissue and Organ Donation Organ Donation Organ and Tissue Donation Tissue Procurement Organ Procurement Organ and Tissue Procurement Brain Death Clinical Death Cortical Death
Co= Hospital/ICU	Intensive Care Units	Intensive Care Unit Adult Intensive Care Unit Specialized Intensive Care Unit ICU

As a result of this process, the search was performed in the PubMed databases, VHL Regional Portal, and all descriptors and alternative terms were placed in the advanced search bar, separating the subjects with the word "OR" and including all terms with the word "AND", selecting "Title, abstract, sub-

ject". The descriptor "Intensive Care Unit" and alternative terms were not submitted to the search due to the strict selection of articles, which restricted the documents presented to zero. The following were used as exclusion reasons: "Not an article", "Review article", "Repeated article", "Does not answer

the research question", "Incomplete text", "Paid article"; from this organization, 35 articles were identified, finally the "Full text" icon was applied, which reset the total to 12 articles and "Publication year range" to "Last 10 years", ending with 6 articles.

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Table 2 - Search Strategy

Databases and Electronic Portals	Search Strategies
PubMed and VHL Regional Portal	"Papel do Profissional de Enfermagem" OR "Escopo de Prática de Enfermagem" OR "Papel da Enfermeira" OR "Papel do Enfermeiro" OR "Papel dos Enfermeiros" OR "Papéis dos Enfermeiros" OR "Perfil de Competências de Enfermeiros" OR "Prática do Âmbito do Enfermeiro" AND "Obtenção de Órgãos e Tecidos" OR "Doação de Tecido" OR "Doação de Tecidos" OR "Doação de Tecidos e Órgãos" OR "Doação de Órgão" OR "Doação de Órgãos" OR "Doação de Órgãos e Tecidos" OR "Obtenção de Tecidos" OR "Obtenção de Órgãos"

Source: The author

RESULTS

The majority of the selected articles are qualitative research (83.3%). With

the exception of one article, they were unanimously written by nursing professionals. The studies were conducted in the years: 2014, 2016, 2018, 2019 and 2021. Regarding the continent in

which the articles were published, they belong to South America and Europe.

Quadro 1. Estudos selecionados para análise de dados.

Year	Authors	Title	Journal	Objective	Country where the study was carried out
2014	Grammenos et al., 2014	Einstellung von potenziell am Organspendeprozess beteiligten Ärzten und Pflegekräften in Bayern zu Organspende und Transplantation	DMW - Deutsche Medizinische Wochenschrift	To assess the attitude of teams towards transplants.	Germany
2016	Marujo Nunes da Fonseca; Tavares, 2016.	Emoções vivenciadas por coordenadores de transplantes nas entrevistas familiares para doação de órgãos	Ciência, Cuidado e Saúde	To understand the emotions experienced by transplant coordinators during family interviews for organ donation.	Rio de Janeiro, Brazil
2018	Magalhães, et al., 2018	Significados do cuidado de enfermagem ao paciente em morte encefálica potencial doador	Revista Gaúcha de Enfermagem	To understand the meanings of care for brain-dead patients who are potential donors for nurses, and to build a theoretical model.	Rio Grande do Sul, Brazil
2019	Oliva et al., 2019	Un modello integrato per l'identificazione dei potenziali donatori: un nuovo approccio nei trapianti di organi e tessuti.	Professioni Infermieristiche	To assess the effectiveness of Integrated Purchasing Models in terms of identifying potential donors and the number of donations.	Rome, Italy
2019	Magalhães, A. L. P. et al., 2019	Gerência do cuidado de enfermagem ao paciente em morte encefálica	Revista de Enfermagem UFPE Online	To understand the management of nursing care for brain-dead patients from the perspective of nurses working in the organ donation and transplant process.	Santa Catarina, Brazil
2021	Fernandes de Oliveira; Honorato; dos Santos Goulart Oliveira, 2021		Revista Nursing	To reveal the weaknesses and experiences of nurses in approaching the family of organ and tissue donors.	São Paulo, Brazil

Source: The author

Based on the selection of studies that met the methodology used, the following conclusions were reached:

The study entitled: *“Einstellung von potenziell am Organspendeprozess beteiligten Ärzten und Pflegekräften in Bayern zu Organspende und Transplantation”* highlights a significant drop in public and professional confidence in donations and the transplant system, mainly caused by the notable scandals of that year. It also mentions that approximately one third of doctors and nurses still feel insecure about obtaining information about the organ donation process and the technical and ethical aspects of donation.¹⁰

Another study, *“Emoções vivenciadas por coordenadores de transplantes nas entrevistas familiares para doação de órgãos”* consists of a qualitative study conducted with data collection at the Organ Notification, Collection and Distribution Center (CNCDO) of the State of Rio de Janeiro, from January to May 2012. The text addresses that the emotions felt are basic: negative, positive and neutral, enhancing the negative ones, such as discomfort with donation and opposition to the diagnosis of BD, which can affect the technical skills of the nurse, such as causing difficulty when informing the family about the death of the loved one and in digesting the reactions that relatives may have.¹¹

Considering the theme, the study *“Significados do cuidado de enfermagem ao paciente em morte encefálica potencial doador”* This is a qualitative study with nurses involved in intensive care practices or in the organ and tissue harvesting process at a university hospital in northeastern Brazil, from December 2010 to June 2011. The text infers that nurses need to identify and differentiate hospitalized patients, in the ICU, which include critically ill patients, potentially recoverable patients or patients with a negative prognosis, such as patients with BD. The definition of care for patients with BD is understood by nurses as something

delicate, difficult to perform, requiring comprehensive attention and requiring organizational care practices to maintain hemodynamic stability and management of pathophysiological changes in patients with BD who are potential donors.¹²

The study *“Un modello integrato per l'identificazione dei potenziali donatori: un nuovo approccio nei trapianti di organi e tessuti”*¹³ highlights the results before and after the implementation of the Integrated Procurement Model (IPM) in a university hospital in Rome. This new organizational model highlights the nurse as a crucial professional for the procurement of organs and tissues, optimizing and standardizing the process, increasing the number of donors and actual donations.¹⁴

The article *“Gerência do cuidado de enfermagem ao paciente em morte encefálica”* consists of a qualitative study with 35 participants, 25 of whom were nurses, divided into 15 nurses working in Hospital Transfusion Committees (HTC) of hospitals in Santa Catarina, 6 nurses in emergency services, and 4 nurses in intensive care units, from July 2014 to October 2015. Of those surveyed, the majority were female, with an average age of 35 years and an average time of 11 years of experience in the nursing profession; regarding the highest qualification, 13 of them had a specialist title, 9 had a master's degree, and another 3 had a bachelor's degree. According to the research evidenced in the text, nurses report limited infrastructure, human resources, material resources, and high demand for care, which interfere in the care of patients with BD, and it is the nurse's responsibility in the management scope, organization of work, and the administrative instruments necessary for the adequate functioning and management of the unit, such as materials, equipment, and facilities, in addition to the technical instruments of management.¹⁵

A qualitative research carried out with 7 nurses from a medium-sized

hospital in the interior of São Paulo, from August to September 2019 was proposed in the study: *“Fragilidades e vivências de enfermeiros na abordagem à família do doador de órgãos e tecidos”*. The text makes it possible to verify that the work of the nurse with the family is essential since the support offered by the nurses in the face of the emotional issues of the family members and the specific knowledge about the entire procedure to be used in the context of organ harvesting, can encourage the family member to decide and accept the donation, this dialogue being one of the weaknesses faced by nursing professionals.⁶

This study made it possible to highlight the vulnerabilities in the procedures offered to patients diagnosed with BD, which in turn directly affect the process of authorization and organ donation. Therefore, organ transplantation is a complex, comprehensive and multidisciplinary process, involving crucial steps, such as the diagnosis of BD, the clinical maintenance of the donor and family support, all of which require properly trained professionals.¹⁶ Failures at these stages contribute to the increasing disparity between the number of patients on the waiting list and the availability of organs.¹⁷

In this context, the nursing team plays a strategic role, not only in the physiological management of the patient, but also in the humanized conduct provided to family members, enjoying objective and clear approaches, with an ethical, moral and legal stance, to obtain the decision on the collection and distribution of organs.¹⁸ The bond established with family members can be fundamental to the success of the donation and transplant process.

When mentioning the duties of the nursing team in the BD and organ donation process, it includes ethical, moral and legal clarification in a succinct and objective manner, in all phases of the organ collection and distribution process, valuing at this and at all times,

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respect for the opinions, desires and pain that family members are going through.¹⁸

This way, it was possible to identify the relevance of continuous training for health teams, especially for nurses who have active contact with potential donors and their families, since it can be understood that there is vulnerability in the technical knowledge and emotional preparation of these professionals.¹²

The nurse plays a strategic role in the family's approach to possible organ donation, which is a complex and delicate moment for the family's acceptance, especially when seeing their loved one with a heartbeat and not assimilating the death.⁶ According to the proposed study¹⁶, the factors that add to the dissatisfaction mentioned by family members in relation to nursing care are: the team's indifference and lack of interest in the situation, the delay in releasing the body and the privacy gaps during the interview with the donor's family.

From this perspective, the motivation that leads them to authorize the donation is empathy and the search to promote some meaning to the life of the other, both to a potential recipient and to their deceased loved one.¹⁶ Thus, aiming at a better reception, the nurse can opt for some care processes within the units, such as the modification and flexibility of the sector's rules in order to provide adequate assistance to the patient's family members, being able to organize visits with a larger number of people and outside the hours scheduled by the institution, even in the ICUs.¹⁶

In view of this aspect, professionals are required to have technical-scientific preparation, competence and ability in therapeutic communication.¹⁸ They are assumed based on the idea that these attributes are essential to establish a bond based on mutual and humanistic trust with the patient and their family, so that this care mitigates the anguish and distress of that moment and determines the decision to donate.¹⁶

However, when we consider that the

nursing team is also composed of individuals who actively participate in the death and dying process, it is essential to offer constant technical and emotional support to these professionals. In addition, ongoing education programs should be implemented to clarify some issues that cause anxiety and uncertainty about the diagnosis of BD. This support can directly contribute to improving the care provided to family members.¹⁸

The above highlights in a significant way the continuing education programs, so that in this way, they can provide technical and emotional support to health professionals, mitigating their anxieties and promoting more qualified and empathetic assistance.¹⁸ The adoption of a proactive and humanistic stance by the nursing team can be decisive in increasing organ donation rates, bringing benefits to both recipient patients and donors' families.¹⁶

CONCLUSION

At the end of the study, we can see that it is of fundamental importance for health professionals to invest in deepening their knowledge about the pathophysiology of a patient diagnosed with BD. This study revealed the perception that it is essential for nurses and technical staff to participate in training, lectures and discussion groups to improve the provision of comprehensive and humanized care, mitigating the growing disproportion generated by the BD process. This aspect is crucial because it involves viable organs for donation and successful transplants.

Therefore, we realize that the decision not to authorize organ donation by family members may result in seeking more strategies to offer concise and safe information. We emphasize the approach techniques regarding the aspects of clarification and security of information about the condition experienced. Thus, we rescue once again the relevance of the impact that active,

clear and empathetic communication promotes in changing this scenario, making it necessary to provide training that improves the conduct in approaching family members. This is necessary, since the nurse continues to be the professional trained to raise awareness about the approach of family members to the diagnosis of BD and the importance of organ donation.

In terms of the community, it can be seen from the collection of information and statistical data regarding non-adherence to donations that families disapprove of these procedures, motivated by a lack of knowledge of their family member's "desire to donate while alive", a lack of understanding of the diagnosis of BD and how the transplant process works. Based on the factors presented, it can be concluded that there is a need to disseminate concrete information, breaking down stigmas and dogmas linked to this subject, so that the anxieties, doubts and anguish of the lay population can be reduced when there is a need to be or authorize a donation.

The hospital sector is a branch that has a high daily flow of people, being a gateway for accidents and situations that have repercussions on BD. Therefore, the inclusion of informative materials on the need for organ donors, as well as the demystification of the donation and transplant process, is an interesting alternative to be exposed in scenarios with a lot of movement and turnover, based on the idea that many companions wait in waiting rooms, being inert to the displays of materials in the environment. Today's society enjoys the technological era, and approaches in this environment are essential, since it is important to reach all target audiences.

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