

Republic of the Philippines
HOUSE OF REPRESENTATIVES
Quezon City

FIFTEENTH CONGRESS
Second Regular Session

HOUSE BILL NO. 5325



Introduced by: **HON. ANNA YORK P. BONDOC, MD**

EXPLANATORY NOTE

This bill seeks to eliminate the waiting list for human organs and eradicate the lucrative trade in organ trafficking. It will give a second life to terminally ill patients.

In this program, once a Filipino reaches the age of 18, he will be informed that he is automatically an organ donor in the event of untimely death unless he "opts out" or specifically refuse to donate his organs. This "opt out" or dissent solution has been practiced successfully for many years in Singapore, Spain, Israel, Sweden and Austria.

Sadly, our country does not have enough organs for transplant. Yearly, thousands of patients die while waiting for available organs. Traditionally, we have relied on living related volunteers. In the event that there is no match within the family, desperate patients have resorted to "buying" organs from poor, unrelated donors.

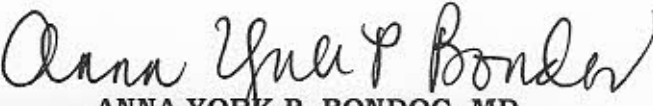
Patients have to rely on living donors since cadaveric organ supply is low. Very few people sign up to become donors in the even of death, either because of lack of information of the donor program or fear due to misinformation regarding medical consequences of being a donor. Based on the Philippine Renal Disease Registry 2006 Report, 90% of kidney transplants are from living donors while only 10% come from deceased donors.

The overwhelming demand for organ donors has lead to abuse, manipulation and exploitation due to organ trafficking. Our country is known as a *medical tourism paradise* where organs are available for only P30,000. Sadly, most of the living donors are exploited by middlemen and foreigners.

This is indeed a medical emergency. In 2007, the Philippine Renal Disease Registry (PRDR) reported that the prevalence of kidney diseases is increasing. 10,000 to 12500 Filipinos nationwide develop end-stage renal disease (ERSD) annually. 50-60% of the patients are suitable kidney transplant candidates but only less than 10% are actually transplanted because of insufficient organ supply.

Everyone is a potential in the dissent or "opt out" approach. This new approach will require intensive education of donors, patients and Philippine society as a whole. However, it will ultimately prove to be the most practical, humane and charitable solution both for donors and patients. It will eliminate the cruel and heartless waiting list for organs, protect the poor from organ trafficking and will give a second life to those who are desperately ill.

In light of the foregoing, the immediate passage of this urgent bill is earnestly sought.


ANNA YORK P. BONDOC, MD
Representative, 4th District, Pampanga

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HOUSE BILL NO. 5325

Introduced by: **HON. ANNA YORK P. BONDOC, MD**

AN ACT TO REGULATE ORGAN TRANSPLANTATION AND APPROPRIATING FUNDS THEREFOR

Be it enacted by the Senate and House of Representatives of the Philippines in Congress assembled:

PRELIMINARY

SECTION 1. Title. – This Act shall be known as the Human Organ Transplant Act.

SECTION 2. Declaration of Policy. – It is the policy of the state to protect and promote the health of the people.

SECTION 3. Definition of Terms. – As used in this Act the following terms shall mean:

- (a) "Advertisement" -includes every form of advertising, whether in a publication, or by the display of any notice or signboard, or by means of any catalogue, price list, letter (whether circulated or addressed to a particular person) or other documents, or by words inscribed on any article, or by the exhibition of a photograph or a cinematograph film, or by way of sound recording, sound broadcasting or television, or in any other way, and any reference to the issue of an advertisement shall be construed accordingly
- (b) "Authorized medical practitioner" - means a person who is registered, or deemed to be registered, as a medical practitioner under the law and who has been authorized to remove any organ pursuant to section 9 or to transplant any such organ
- (c) "Death" - the irreversible cessation of circulatory and respiratory functions or the irreversible cessation of all functions of the entire brain, including the brain stem. A person shall be medically and legally dead if either: (1) In the opinion of the attending physician, based on the acceptable standards of medical practice, there is an absence of natural respiratory and cardiac function and, attempts resuscitation would not be successful in restoring those functions. In this case, death shall be deemed to have occurred at the time these function ceased ; or (2) In the opinion of the consulting physician, concurred in by the attending physician, that on the basis of acceptable standards of medical practice, there is an irreversible cessation of all brain functions; and considering the absence of such functions, furthers attempts at resuscitation or continued supportive maintenance would not be successful in restoring such natural functions. In this case, death shall be deemed to have occurred at the time when these conditions first appeared.
- (d) "Decedent" - a deceased individual, and includes a still born infant or fetus
- (e) "Donor" - an individual authorized under this Act to donate all or part of the body or decedent
- (f) "Hospital" - a hospital licensed, accredited or approved under the law, and includes a hospital operated by the government.
- (g) "Investigating officer" - means an officer duly appointed by law to conduct investigation
- (h) "Organ" - for the purpose of this act includes transplantable organs, tissues, eyes, bones, arteries, blood, other fluids and other portions of the human body
- (i) "Person" - an individual, corporation, estate, trust, partnership, association, the Government or any of its subdivisions, agencies or instrumentalities, including government owned or controlled corporations; or any other legal entity
- (j) "Reward" - means any description of financial or other material advantage

NATIONAL ORGAN DONATION AND TRANSPLANTATION CENTER

SECTION 4. Establishment. – There shall be established, under the supervision of the Department of Health, The National Organ Donation and Transplantation Center, herein referred to as NODTC

The NODTC shall be administered by a Board of Trustees to be appointed by the President of the Philippines upon the recommendation of the Department of Health.

SECTION 5. Functions. – The NODTC shall have the following powers and functions

- (a) Review and approve policies in support of a rational, ethical, accessible and equitable organ transplantation program in the country.
- (b) Approve the issuances of the Certificate of Accreditation of transplant facilities.
- (c) Establish and maintain a register in which shall be entered the objection and withdrawal of objection of all persons lodged in accordance with this act.
- (d) The may appoint a transplant ethics committee to be in charge of matters relating to the selection of proposed recipients of any organ removed pursuant to section 17.
- (e) Prescribe appointment, functions, responsibilities and procedures of transplant ethics committees; and
- (f) To perform such other functions as may be necessary to achieve the objectives of this Act.

INFORMATION AND EDUCATION

SECTION 6. Responsibility. – The Government, through the NODTC, shall take measures, including the design, development, and dissemination of information and education materials, to promote, protect and support the dissent approach in cadaveric organ donation.

It shall also ensure that information materials produced by all government agencies and private entities and persons are not inconsistent with the provisions of this Act.

DEATH AND REMOVAL OF ORGAN AFTER DEATH

SECTION 7. When death occurs. – The death of the person shall be determined in accordance with the acceptable standards of medical practice and shall be diagnosed separately by the attending physician and another consulting physician, both of whom must be appropriately qualified and suitably experienced in the care of such patients. The death shall be recorded in the patient's medical record.

SECTION 8. Designated officers. – The NODTC may appoint, in writing, any medical practitioner to be the designated officer of a hospital for the purposes of this Act.

SECTION 9. Authorities may remove organ after death. –

The designated officer of a hospital may, subject to and in accordance with this section, authorize, in writing, the removal of any organ from the body of a person who has died in the hospital for the purpose of the transplantation of the organ to the body of a living person.

No authority shall be given under the preceding paragraph for the removal of the organ from the body of any deceased person:

- (a) who has during his lifetime registered his objection with the NODTC to the removal of the organ from his body after his death;
- (b) who is neither a citizen nor a permanent resident of the Philippines;
- (c) who is below 21 years of age unless the parent or guardian has consented to such removal;
- (d) who is above 60 years of age;
- (e) whom the authorized medical practitioners, after making such inquiries as are reasonable in the circumstances, has reason to believe was not of sound mind, unless the parent or guardian has consented to such removal ; or

- (f) immediate relatives at time of death object to organ transplant.

SECTION 10. Investigating Officer's consent. – If the designated officer of the hospital has reason to believe that the circumstances applicable to the death of the person are such that the investigating officer has jurisdiction to hold an inquest into the manner and cause of death of the person, the designated officer shall not authorize the removal of any organ from the body of the deceased person unless the investigating officer has given his consent to the removal.

The consent by the investigating officer under this section may be expressed to be subject to such conditions as specified in the consent. The consent may be given orally by the investigating officer, and if so given shall be confirmed in writing.

SECTION 11. Organ to be removed and transplanted by authorized medical practitioners. – No person other than an authorized medical practitioner in a hospital accredited by the NODTC shall remove any organ which is authorized to be removed pursuant to section 9 or transplant any such organ.

SECTION 12. Operation of other laws. – Nothing in this Part shall prevent the removal of any organ from the bodies of deceased persons in accordance with the provisions of any other written law.

RECIPIENT PROTECTION

SECTION 13. Recipient Protection. – Health and safety tests shall be conducted to protect the person receiving an organ. People with infectious disease or severe bacterial or fungal infections at the time of death may only donate their organs for lab research or education but not to a living recipient.

REGISTRATION OF OBJECTION

SECTION 14. Persons may register their objection. – Any person, upon reaching the age of 18, who objects to the removal of any organ from his body after his death for the purpose mentioned in section 9 may register his objection in respect of that organ with the NODTC in the prescribed form.

Upon receipt of the written objection of a person, the NODTC shall issue to that person an acknowledgment in the prescribed form.

SECTION 15. NODTC to maintain register. – The NODTC shall establish and maintain a register in which shall be entered the objection of all persons lodged in accordance with the preceding section. The register herein referred to shall not be open to inspection by the public.

SECTION 16. Persons may withdraw their objection. – Any person who has registered his objection with the NODTC in respect of any organ may withdraw his objection in the prescribed form.

Upon receipt of the withdrawal under the preceding provision, the NODTC shall issue to that person an acknowledgment in the prescribed form and shall remove the objection from the register referred to in the preceding section.

SECTION 17. Proposed recipients of organ. – In the selection of a proposed recipient of any organ removed pursuant to section 9:

- (a) a person who has not registered any objection with the NODTC in respect of that organ shall have priority over a person who has registered such objection; and
- (b) a person who has registered his objection with the NODTC in respect of that organ but who has withdrawn such objection shall have the same priority as a person who has not registered any such objection, over a person whose objection in respect of that organ is still registered with the NODTC, at the expiration of 2 years from the date of receipt of the withdrawal by the NODTC provided he has not registered again any such objection since that date.

PROHIBITED ACTS

SECTION 18. Certain contracts or arrangements. – Subject to this section, a contract or arrangement under which a person agrees, for valuable consideration, whether given or to be given to himself or to another person, to the sale or supply of any organ or blood from his body or from the body of another person, whether before or after his death or the death of the other person, as the case may be, shall be void.

Any person is prohibited to enter into a contract or arrangement of the kind referred to in the preceding subsection.

Any person either as vendor or supplier is prohibited to enter into a contract or arrangement for the sale or supply of a product derived from any organ or blood that has been subjected to processing or treatment.

The contract or arrangement referred to in the first paragraph of this section shall not apply to or in relation to:

- (a) a contract or arrangement providing only for the reimbursement of any expenses necessarily incurred by a person in relation to the removal of any organ or blood in accordance with the provisions of any other written law; and
- (b) any scheme introduced or approved by the Government granting medical benefits or privileges to any organ or blood donor and any member of the donor's family or any person nominated by the donor.

Nothing in this section shall render inoperative a consent or authority given or purporting to have been given under this Act in relation to any organ or blood from the body of a person or in relation to the body of a person if a person acting in pursuance of the consent or authority did not know and had no reason to know that the organ or blood or the body was the subject-matter of a contract or arrangement referred to in the first paragraph of this section.

SECTION 19. Removal of organ. – No person shall remove any organ from the body of a deceased person for the purpose referred to in section 9 except in pursuance of the authority therein given.

SECTION 20. Advertisements relating to buying or selling of organs or blood. – No person shall issue or cause to be issued any advertisement relating to the buying or selling of any organ or blood or of the right to take any organ or blood from the body of a person.

SECTION 21. Organ Trafficking. – Any person is prohibited to perform acts which promote or facilitate organ trafficking which include but not limited to recruiting, hiring, adopting, transporting or abducting a person, by means of threat or use of force, fraud, deceit, violence, coercion, or intimidation for the purpose of removal or sale of organs of said person

SECTION 22. Destruction, Mutilation and Alteration in the Register. – No person shall willfully destroy, mutilates or makes any unauthorized alteration in the register referred to in section 15.

SECTION 23. Disclosure of information. – Subject to this section, a person shall not disclose or give to any other person any information or document whereby the identity of a person:

- (a) from whose body any organ has been removed for the purpose of transplantation;
- (b) with respect to whom or with respect to whose body a consent or authority has been given under this Act; or
- (c) into whose body any organ has been, is being, or may be, transplanted, may become publicly known.

The preceding paragraph shall not apply to or in relation to any information disclosed:

- (a) for the purpose of administering and enforcing this Act;
- (b) for the purpose of referring any complaint or information concerning any registered medical practitioner under related laws;
- (c) in pursuance of an order of a Court or when otherwise required by law;

- (d) for the purposes of hospital administration or bona fide medical research;
- (e) with the consent of the person to whom the information relates; or
- (f) when the circumstances in which the disclosure is made are such that the disclosure is or would be privileged.

PENALTIES

SECTION 24. Penalties. – Any person who contravenes provisions of this act shall be guilty of an offense and shall be liable on conviction to a fine not exceeding P100,000 or to imprisonment for a term not exceeding 12 months or both.

MISCELLANEOUS

SECTION 25. Act does not prevent specified removal of organ, etc. – Nothing in this Act shall apply to or in relation to:

- (a) the removal of any organ from the body of a living person in the course of a procedure or operation carried out, in the interests of the health of the person, by a medical practitioner with the consent, express or implied, given by or on behalf of the person or in circumstances necessary for the preservation of the life of the person;
- (b) the use of any organ so removed;
- (c) the embalming of the body of a deceased person; or
- (d) the preparation, including the restoration of any disfigurement or mutilation, of the body of a deceased person for the purpose of interment or cremation.

Section 26. Repealing Clause. – All laws, orders, issuances, and rules and regulations or parts thereof inconsistent with this Act are hereby repealed or modified accordingly.

Section 27. Separability Clause. – The provisions of this Act are hereby deemed distinct and separable from each other. If any provision hereof be declared invalid or unconstitutional, such invalidity or unconstitutionality shall not affect the other provisions which shall remain in full force and effect.

Section 28. Effectivity. – This Act shall take effect one hundred twenty (120) days following its publication in at least two newspapers of general circulation.