You can register your intention at Japan Organ Transplant Network website.

Register now to make your intention clear!

You can now register on-line and on your mobile phone. After you register, a registration card with your ID will be issued. Once you complete your registration, the card will be used to confirm your intention concerning organ donor transplants.

Website: http://www.jotnw.or.jp
Mobile site: http://www.jotnw.or.jp/m

Please contact us if you have any questions about organ transplantation.

Japan Organ Transplant Network (JOT)
Address: Bansui Bldg, 3rd floor, 1-5-16 Toranomon, Minato-ku, Tokyo 105-0001, Japan
Phone: 0120-78-1069 (free) From mobile phones: 03-3502-2071

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Japan Organ Transplant Network
What is an organ transplant?

Organ transplantation is a medical procedure which involves replacing a failing organ, such as a heart or liver, with a healthy one from a donor. This procedure allows the patient who receives the transplant, or recipient, to return to health and improve their quality of life. There are two types of organ transplants: transplants from living donors, which involve the donation of partial organs, such as a lung, liver or kidney, typically from a family member; and, transplants from deceased donors, which involve organ donations from individuals following brain death and donations of kidneys and corneas following cardiac death (refer to pages 3 and 4, bottom).

In many countries brain death is treated as equivalent to clinical death and it is common in such cases for their organs to be donated. In Japan, however, very few organs are donated in such circumstances and as a result living donors remain the greatest source of organ donations. Transplants from living donors, however, entail risks for the donor in terms of surgery as well as increasing the burden on the donor’s family.

After receiving a transplant recipients must continue to take immunosuppressants, drugs that suppress the bodies reaction to the transplant that would otherwise result in the new organ being rejected. Aside from this, however, recipients are able to go to school or resume work and lead a relatively normal life. Recipients value their health highly and are extremely grateful to the donors and their families.

Number of deceased donors and transplants in Japan and the U.S. (2010)

<table>
<thead>
<tr>
<th></th>
<th>Japan</th>
<th>U.S.</th>
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<tbody>
<tr>
<td>No. of donors</td>
<td>118</td>
<td>7,943</td>
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</table>

Four years after the operation she entered junior high school.

Prior to entering elementary school, Kahe was diagnosed with dilated cardiomyopathy. Two years later she traveled to the U.S. to receive a heart transplant.

Number of deceased donors and transplants in Japan and the U.S. (2010)

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While the U.S. has twice as many people as Japan, it performs 100 times more transplants!

How many patients need a transplant?

In order for our bodies to work properly we rely on many different organs, such as the heart, lungs, liver and kidneys. However, for many people these organs do not function properly, whether due to injury, disease or for other reasons. As many as 13,000 patients are currently registered with Japan Organ Transplant Network, or JOT, and are on a waiting list to receive an organ transplant. In addition, approximately 3,000 patients are awaiting corneal transplants.

<table>
<thead>
<tr>
<th></th>
<th>Heart</th>
<th>Lung</th>
<th>Liver</th>
<th>Kidney</th>
<th>Pancreas</th>
<th>Small intestine</th>
<th>Eyes (cornea)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of patients registered to date</td>
<td>199</td>
<td>184</td>
<td>407</td>
<td>12,623</td>
<td>198</td>
<td>3</td>
<td>42</td>
</tr>
</tbody>
</table>

The latest data are available at http://www.jotnw.or.jp
The intentions of both donors and their families are important.

Explanation from a transplant coordinator
In cases where a donor has either previously expressed their intention to donate an organ or no clear intention exists, the family can request further information before making a final decision. In such cases, the doctor in charge would contact a transplant coordinator and arrange for them to visit the hospital and answer any questions.

The family reaches a decision
After meeting the transplant coordinator, a step that can be declined at any stage, family members discuss the matter thoroughly and make a decision on whether to proceed with the organ donation or not.

Diagnosis and pronouncement of brain death
If the family decides to proceed, a diagnosis of the donor will be performed. Diagnosis and pronouncement of brain death is a rigorous procedure conducted in strict compliance with the law. Time of death is pronounced upon a second diagnosis of brain death. The family can request to witness the process of the diagnosis and pronouncement of brain death.

For donations of organs such as kidneys and eyes following cardiac death a legal diagnosis of brain death is not required.

Selecting patients to receive a transplant
To receive a transplant it is necessary for a patient to be already registered with the Japan Organ Transplant Network, or JOT. Recipients are selected based on a fair selection process using medical criteria to ensure selection of the most suitable recipient.

Removal and transport of the organ
Once the recipient is selected, the organ is surgically removed from the donor and is transported to the medical facility where the organ will be transplanted.

What is cardiac death, brain death and a vegetative state?

The following symptoms are seen to indicate cardiac death: (a) stoppage of the heart, (b) stoppage of breathing, and (c) dilated pupils (indicating a loss of brain function). Advances in medical technology, however, have seen the development of artificial respirators and other similar devices. This has led to cases where even though brain functions have stopped and cardiac death would otherwise have occurred, it has become possible to maintain breathing and pump the heart through artificial means. This condition is referred to as brain death. Less than 1% of people who have died as a result of accident or stroke have suffered brain death. There is no chance of recovery, regardless of the medical treatment administered and in most cases the heart stops functioning within several days (although in some cases it has taken longer). Many countries consider brain death as equivalent to clinical death.

On October 16, 1997 the Organ Transplant Law was enacted in Japan. As a result, brain death was recognised as equivalent to clinical death for the purposes of organ donation. This compares to a vegetative state, in which a person may have no consciousness and appear to be in a condition akin to brain death, but still maintain brainstem function and spontaneous respiration. As there is also a possibility of recovery it is treated as distinct from brain death.

Legal diagnosis of brain death
In order for an organ to be donated following brain death, a legal diagnosis test is required. This test is called the legal diagnosis of brain death.

The following criteria are used:
1. Deep coma
2. Dilated and fixed pupils
3. Loss of brain stem reflex
4. Flat brain waves
5. Hypothermia

These five criteria are checked twice, following an interval of 6 hours or more (in the case of children aged from 12 weeks after birth to five years, an interval of 24 hours or more is required).

Donating an organ entails no costs, but donors or their families receive no recompense either. It is purely an act of goodwill.
What can I do to help?

While we are all destined to die, we can make a significant difference to other people’s lives by allowing our organs to be transplanted. This is an important decision that requires careful and serious consideration. It is imperative to discuss the issue thoroughly with your family and communicate your intentions clearly. This includes any decision not to donate your organs. The quality of any medical treatment you receive will not vary according to your decision.

From March 2007 it has become possible to register your will to donate or not using your mobile phone or computer via the Internet. After registering, a Registration Card declaring your intention will be issued to you. When you register, your intentions will be readily accessible and can be more readily confirmed. For details on how to register, please refer to the back cover of this booklet.

How to fill out the new Organ Donation Decision Card

1. Declare your intention.
   Circle the number that best matches your intention.

2. Specify which organs you do not want to donate.
   If yes, choose 1 to 3, but would like to exclude any organs, place an X over the organs in question.

3. Fill out the special comments section.
   a) Donation of Tissues
      If you choose 1 or 2, and agree to donate organs as well, such as skin, cardiac valves, blood vessels, bones, etc., you should write “44 tissues” or stipulate which tissues you are willing to donate for example, “heart,” “cardiac valve,” “blood vessels” or “bone,” etc.
   b) Designating family members as priority donors/recipients for organ donation
      If you wish to designate family members as priority donor recipients, write “priority family” in this section (read the page on the right for further details).

4. Sign your name, etc.
   Please sign your name and write the date. If possible, have a member of your family who is aware of your declaration sign his/her name, to confirm the fact.

Important points when designating family members as priority organ recipients

1. If you designate a family member as a priority recipient, this will be taken to reflect your intention concerning all family members, including co-recipient.
2. If you designate only one recipient, regardless of whom, then it will not be possible to donate your organs to other individuals, whether family members or not.
3. To prevent possible conflicts arising over organ donation, the priority donor recipients are restricted to the designated family members of the donor. However, a donor’s wish to donate organs to the designated family members is possible even if the donor dies as a result of suicide.

Since January 17, 2010 it has become possible to designate family members as priority organ recipients.

Since January 17, 2010 it has been possible for people under the age of 15 to donate their organs following brain death.

Following amendments to the law, organ donations are possible whether a donor’s intention has been clearly stated or not, provided the family gives its consent. This charge has allowed children under the age of 15 to be eligible donors following brain death.

This will significantly expand the opportunities for small children to receive transplants.