Baines, L. and Jindal, R.M., 2017. Organ Donation After Euthanasia: A Dutch Practical Manual. *American Journal of Transplantation*, 17 (3), pp.842.

To The Editor,

The recent publication from the Netherlands regarding the Dutch Practical Manual, detailing guidelines relating to patients' requests for organ donation after euthanasia, highlights the legal and medical feasibility of such a procedure [1]. However, as of 2016, euthanasia is legal only in the Netherlands, Belgium, Ireland, and Colombia; remains controversial in Canada and the United States; and is the subject of much debate among health care professionals worldwide.

Although the primary aim of the paper is to introduce a newly devised patient-centered manual, the authors miss the opportunity to recognize the psychosocial issues that run parallel and that are central to both palliative care and renal disease patients, including ongoing chronic pain, prevailing low mood, reduced quality of life [2-4]. Indeed, pain or anticipated pain, deteriorating quality of life, loss of control over decision making and cognitive impairment have been identified as key drivers in patients requesting euthanasia [5] and primary motivators in living donors' willingness to donate kidneys [6].

The common psychosocial drivers of both cohorts of patients are the altruistic desire to alleviate suffering of fellow patients and the desire to introduce some continuance of life after their own death or kidney donation [1, 6]. This scenario presents physicians with an opportunity to introduce and develop from a psychosocial perspective the potential for organ donation in patients requesting euthanasia during the first phase of the manual, namely, "Patient's Request for Euthanasia." We suggest the use of the "Patient-Clinician Communication Framework" [7] as a means to facilitate and track psychosocial issues (eg managing uncertainty, responding to emotions) that could run parallel to the Dutch Practical Manual in the lead-up to euthanasia and among patients' families posteuthanasia. We, however, do not think that our suggestion can be tested in an evidenced-based manner owing to the complex ethical issues surrounding euthanasia.

Disclosure

The authors of this manuscript have no conflicts of interest to disclose as described by the American Journal of Transplantation.

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