



Previously, BC residents indicated their willingness to donate when renewing a driver's licence. However, because less than half of them informed their families, the BC Transplant Society estimates that 35% of organs that were potentially available were being lost. Conversely, when families were aware of the desire to donate, 96% of them agreed to proceed. Shortage problems are compounded because fewer than 1% of those who sign up eventually donate an organ because they must be declared brain-dead first.

With the new system, potential donors need only register once through a participating drugstore chain, their BC Care Card or a motor-vehicle licensing branch. As well, people can "specifically delineate an organ for transplantation," explains Bill Barrable, chief executive officer for the BC Transplant Society.

All BC intensive care units have confidential telephone and fax numbers linked to the registry, which allow them to check if a person has registered. A copy of the registration is faxed to the doctor; this can then be presented to the family as evidence of legal consent. The registration constitutes "an advance directive for a living will," says Barrable, so written consent from the family is not required. The procedure also allows donors to keep the information confidential if they do not wish to notify family members.

To educate health care professionals about the program, the British Columbia Medical Association has sent material to doctors and the Transplant Society has visited all intensive care units in the province.

The society hopes that 500 000 more people will register by 2000 and ease the province's problems in meeting the current annual need for about 350 organs and 900 corneas. About 25% of the people on waiting lists die before a donor organ is available. Today the average waiting time for a

kidney transplant is 809 days. Kidney transplants are considered particularly cost-effective; they cost \$20 000, plus \$6000 yearly for antirejection drugs, while annual dialysis treatment can cost \$50 000. Barrable says that since transplants became "mainstream and are no longer considered experimental, they have become a victim of their own success."

Funded by the Ministry of Health and the private sector, start-up costs for the registry will be \$1 million, with annual costs of \$71 000. — © Heather Kent

Grant applicants take note

The following edited list, which has been making the rounds in cyberspace, was forwarded to us by Roger Burford Mason, editorial director of the Electrical Group at Kerrwil Publications Ltd. It is entitled "Why God does not get research grants".

- He had only one major publication and it was in Hebrew.
- It had no references and wasn't published in a refereed journal.
- It may be true that he created the world, but what has he done lately?
- The scientific community has had a hard time replicating his results.
- He never applied to the ethics board for permission to use human subjects.
- When an experiment went awry he tried to cover it up by drowning his subjects.
- When subjects didn't behave as predicted he deleted them from the sample.
- He expelled his first 2 students.
- Although there were only 10 requirements, most of his students failed his tests.

Sale of CO detectors boom following Toronto deaths

There was a home invasion in East Toronto in January, but in this case

the invisible and silent killer was not a criminal. Over the course of 2 days it left 2 people dead and two more clinging to life. The stealthy invader was carbon monoxide, and it gained entry when a squirrel's nest blocked a chimney, causing fumes to back up into the house.

Bill Robinson of the Department of Toxicology at the Ontario Centre of Forensic Science says CO poisoning is deceptive because initial symptoms resemble the flu. They include a headache, which has been compared with having an elastic band tightened around the head, as well as nausea, weakness, confusion, stupor and coma. One visible sign of CO poisoning is a characteristic cherry-red colouring of the cheeks and lips. The danger it poses caused great concern during the recent ice storm in Ontario and Quebec when the lack of electricity caused people to run gas-powered generators near their homes. Several deaths were attributed to it.

Carbon monoxide kills by combining irreversibly with blood hemoglobin. Depending upon the amount of CO present in relation to the amount of oxygen, the poison can kill within minutes or, as was the case in East Toronto, over a few days.

Physicians who see patients with severe headache and nausea should consider asking if anyone else in the patient's home is experiencing the same symptoms. If others are, they should be advised to leave the home immediately and carbon monoxide levels should be checked.

CO kills between 200 and 300 Ontarians a year. Although the problem is usually confined to the winter months, deaths have occurred in summer when boaters and campers use a gas heater in a confined space.

The tragedy in East Toronto caused a surge in sales of carbon monoxide detectors, which cost from \$40 to \$60. Experts say one of the best methods of prevention is a yearly furnace inspection. — © Peter Wilton