THE USAGE OF THE VOLUNTARY CADAVER IN EDUCATION OF MEDICINE THROUGH SILENT MENTOR PROGRAM

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ABSTRACT

In the medical education, the usage of animals, cadavers or patients for medical training is common practice all over the world. It is widely accepted that the use of human body is better than animal. The usage of cadavers for training in medical procedures and operations is more acceptable because it causes less harm than practicing directly to the patients. The cadavers for training are usually the unknown persons. Since the source of the unknown cadavers are decreasing from time to time, nowadays some Medical Faculties is looking for alternatives, such as the persons who voluntarily want to donate their bodies for medical education, known as Silent Mentor Program. In this program the live donor candidate (Silent Mentor) writes a will, in which the donor states that he/she want to donate the body for teaching anatomy, training on medical intervention and surgery, research, organ transplantation or even for museum preparation. This program introduces firstly in Hua Lien, Republic of China (Taiwan) and now has been widely accepted by the community.

In Indonesia, Silent Mentor is a new concept. Faculty of Medicine University of Indonesia has begun to adopt this system by sending some lecturers to learn about the Program. An healthy Indonesian male, 60 years old, Moslem, is the first SM candidate in Indonesia. He has signed a will in the front of his lawyer. Now there are about 20 SM candidates, who stated that they want to join Silent Mentor Program, but now is still waiting for preparation the administrative as well as legal procedures. In Indonesia, application of SMP needs some modification, due to differences in the culture, religion, facility and regulation.

Key Words: medical education – corpse – voluntary donor

INTRODUCTION

In medical education, medical students need to enhance their knowledge, skill and experience by practices. Studying anatomy and surgery skills can be done by using some materials, such as animals, cadavers, patients, or computer simulation. The education by using animals or computer simulation is easy, but the condition is not real. Mastering the medical skill by practicing directly to the patient need ethical considerations. By those reasons, the usage of cadavers in medical education it is the most common in medical education [1-11]

In Indonesia, Government Regulation (PP) No 18 /1981 gives the right to use cadavers for anatomic autopsy, clinical autopsy and organ transplantation. This regulation rules that doctor need to ask for informed consent (IC) from donor (during alive) or family. We can directly use the cadaver without informed consent, if within 2 days there is no any family presents. In Indonesia, we always use the unknown cadaver, sent to us by the police authority, without asking for informed consent. This situation causes cadaver anonymity, the situation that we treat the cadaver as a good only (not the human being)

Nowadays, Medical Faculties have difficulty to teach the medical student due to lack of unknown cadavers [5]. In the medical education, surgery training is usually done directly to the patients. In the recent days, the need for training by using the cadaver is enhanced, because training by using cadavers are ethically more acceptable and safe rather than by practicing on patients [8]. This situation rise the need for more cadavers, either those from unknown bodies or voluntarily donors [3, 4, 5, 6, 7]. The answer of this need is Silent Mentor Program [2].

SILENT MENTOR PROGRAM

Silent Mentor Program (SMP) is a Program that provides the cadaver material for teaching anatomy, medical intervention and surgery by using volunteer cadaver donors. This program begins when Tzu Chi Medical University at Hua Liân city, Taiwan, were lacking bodies for teaching Gross Anatomy. When the Principal of the University asked Master Cheng Yen, 72 years old Buddhist nun, for advice, she asked if he can ensure that the donated bodies could be stored in a bright, comfortable and dignified manner. The Principal answered that this can be done, and then Master Chang Yen made a public statement encouraging her disciples to donate their bodies after their death. She said:” While we live, our body is of use to us. After we have passed away, it can be of even greater use, by teaching doctors to save lives. The greatest suffering in life is illness. If doctors can save more lives by learning from our donated bodies, that would be have great worth. The society needs you” Her suggestion was answered by the first Silent Mentor, Mrs Lin. Since 1995 up to now more than 27,000 persons have signed the agreements to become Silent Mentors [1, 9].
The SMP will teach young doctors about the anatomy and surgery skills, with respect, gratitude and compassion to the donors. SMP teach the Students to become a doctor with compassionate heart, creative mind and skilled hands. In this Program the students must know the SM as a person by visiting and communicate personally with SM since they are alive. The students learn the identity of SM, and visit the family members after SM died to view the SM photos and hear the stories about SM life. They also discuss with the family what they will do to the body, and make the family understand and feel to be the part of Program [1, 2, 9].

When the SM dies, the body is sent to the Medical Faculty and frozen into −30 Centigrade within 2 hours, until it will be used in SMP. Anatomy and Surgery Simulation Courses are planned 3 times a year, with about 8 SMs will be used in one occasion. One day before the Course, the body is thawed and used for 4 days training. On the first day the student presents about the lives of each SM to school staff and family members. Then Head of Surgery Department addressed to the relatives: “The students are right next to you (9, 10). They know how dear the departed are to you. They will treat them with respect” SMP is performed in 4 consecutive days, with the topic of training as follows: day 1: training for medical student (tumor extirpation, vein section, WSD tubing, etc) and day 2 – 4: training for surgeons for various kinds of surgery fields [9, 10].

Before the trainings begin, the student gives the respect to SM. The supervisor explains about the planning before holding the scalpel. Then the surgery training begins. During the courses, the family of SM is allowed to watch what the student is doing in the course. At the end of the course, the student sews up the body, clothe and put SM into the coffins. After trainings are over, at the gratitude Concert to SM, the students perform the song wrote by the students and communicating the poems to express their gratitude to the SM. They also put lighting incense in their honor, and follow the nuns and the family to carry the coffins to Crematory. After cremation, the ashes of SM was put in a glass urns, created by the most popular craftsmen in the Island, Mr. Heinrich Wang. And if the family agreed the ashes can be put in the Room of Great Giving in the University. Every November the students can join the rites to thanks the SM [9].

**SILENT MENTOR IN INDONESIA**

Since 2007 Faculty of Medicine University of Indonesia (FMUI) had been interested in SMP and had sent delegates to study on SMP in Tzu Chi University, Hua Lien. The Dean of FMUI had assigned Silent Mentor Committee to prepare the realization of SMP in FMUI. The Committee has proposed a plan to build the Surgery Simulation Centre, and develop the Standard Operational Procedures of SMP. The author (DSA) together with some colleagues from Buddhist community, promoting the SMP to the donor candidates and up to now has accepted 20 persons who said that they want to become SM. The Committee also prepares ethical and medico-legal analysis, and asking for *fatwa* from 5 religions in Indonesia, Islam, Catholic, Christian, Buddha, and Hindu on SMP [9].

The application of SMP in Indonesia has some obstacles, such as: a) lack of donor: it is difficult to get healthy SM candidates, especially in Muslim community, b) the cultural and religion factors, c) personal reasons causes the refusal of the family to fulfill the will, d) the preservation problem: high cost, the need to choose the alternative chemical for preservation or decide the proper temperature for preservation, and e) geographic problems: when the death happens in the other parts of Indonesia, there is the need of additional preservation and also transportation preparation [9].

Now SMP in FMUI has already had the first candidate for SM, Mr. A, Indonesian businessman, Muslim, 60 years old. He came to FMUI, asking for legal back up to become SM. He wants to become SM because he wants to do something good for humanity. He had signed a will before the lawyer, stated that after death he will donate his body to FMUI through the 2 messengers, for studying anatomy, surgery training, research, organ transplantation or even for museum preparation. He also stated that his family has no right to reject the will [9, 10].

In application of SMP in Indonesia, ethical, religion a well as legal analysis must be discussed in deep. Ethically, SMP rises some questions on this matter: a) who owns the body, the person or God. If the person has the right, then he has the right to give the body for SMP, b) is the right on the body is inherited to the next of kin. If they have the right, they have the right to refuse the fulfill the will, c) is the next of kin have the right to donate the body of a family member without the willing of the late, d) is it ethical if SM candidate decide to become SM without asking the next of kin’s opinion, and e) what is the border between the commercial and non commercial SMP [9].

The other problem in SMP in Indonesia is the factor of religion, especially Islam who has its own Islamic Law. Islamic law is based on three pillars: Al Qur’an, Sunnah and Ijtihad by mujtahid. The SM is a new concept, then it has no regulation in either Al Qur’an, or Sunnah. Then the law must be looked for through Ijtihad by the mujtahid. In Indonesia, Indonesian Councill of Ulama (Majelis Ulama Indonesia or MUI) has already ruled out some fatwa related to the usage of cadaver in medical fields: a) usage of cadaver for medical education, research, training and organ transplantation is allowed (MUBAH) and b) the donation of cadaver for Museum is not allowed.
(HARAM), because all of the Muslim must be buried after death [11].

CONCLUSION

Silent Mentor is a new concept in which a voluntary person write a will to donate his/her body for medical education, research, training, organ transplantation and even for museum preparation. Ijtihad by Indonesian Council of Ulama (MUI) about the Silent Mentor issue said that: Usage of cadaver for medical education, research, training and organ transplantation is allowed (MUBAH), meanwhile the donation of cadaver for Museum is not allowed (HARAM) [11].

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