

PE1442/C

Consideration of Petition PE1442 by Professor Sue Black OBE BSc PhD DSc FRSE FRAI FRCPE HFRCPsG, Director of the Centre for Anatomy and Human Identification at the University of Dundee.

The petition calls upon the Scottish Parliament to urge the Scottish Government to amend the law to provide that a person's dead body is part of their estate and in effect clearly 'invokes' their will.

The intention from the Petitioner (Mr Douglas Reid) is to be commended. He very clearly states his case that, for some, the wish to donate their remains for the purposes of anatomical instruction is reliant on the compliance of others. Should this compliance fail, then the wishes of the deceased may not be realised – hence his petition that the body be considered a part of the deceased's estate and therefore under legal directive. There is a clear logic to Mr Reid's argument and an admirable sentiment in his request but on balance I am unable to support his stance for a number of reasons, the major of which I should like to lay out below and I am in agreement with all points raised by HM Inspector for Anatomy (Scotland) in his communication. Perhaps there is more that the anatomical community may do to assist in these distressing situations and we have some previous experience in such matters which we offer in an attempt to go some way towards finding a positive outcome to this issue.

The process of bequeathal of remains is predicated on choice and good will and in the majority of cases this works exceptionally well. This manifests as a strong and supportive relationship not only between the anatomy department and the bequeather but also between the anatomy department and the families. For example, we have recently been contacted by a lady in the west of Scotland who desperately wishes to donate (she is terminally ill) and her distress was heightened because her husband disagreed vehemently with her decision and refused to contemplate her donation – illustrating that the bequeather is reliant on the compliance of others. This clearly led to a horrendously stressful situation for the lady, desperation and significant tension with her husband. She attended a public event where I was speaking so that she could talk with me in private. I explained to her that we do on occasion have contact with families who may feel less than comfortable with a decision to bequeath and as a result she asked if I would be prepared to talk with her husband. This I agreed to do, through email, along with our bequeathal secretary and our University Chaplain. It transpired that he had some seriously unrealistic and unfounded fears about what happened in a dissecting room and why we do what we do, and he was much reassured after receiving the facts and being able to talk dispassionately about his concerns. I genuinely feel that he gained much comfort from entering into a frank and honest discussion with us in relation to his wife's wishes. He has now agreed that on her death, he will contact

the anatomy department (Glasgow) and that depending how that goes, he may even now consider bequeathing himself.

This is an example of the empathic approach that anatomy has with its bequeather community, through trust, communication and information and I think this approach is more likely to succeed in the longer term than legislation. I wholeheartedly support HM Inspector's comment regarding the lack of desire for any anatomy department to be caught up in a legal wrangle over ownership of a body – we do not do this, our stance is dignity, decency and respect and none of those would be served should circumstances become hostile.

When we hold our funeral service every year we are guaranteed to have at least one family who will express that they were very apprehensive about why their loved one bequeathed in the first instance, but when they witness the gratitude from our staff and particularly from our students, they are quick to confirm that they were perhaps mistaken and that it is a wonderful gift that was given. Very frequently this leads to the spouse, or other family members, making a decision to bequeath which is a sure test of confidence, trust and partnership.

Time is of the essence in the acceptance of a body and such an arrangement requires there to be clear lines of immediate communication – this will not be served through legislation. There is no doubt that if a family does not wish to honour the requests of their family member then they simply will not notify the anatomy department of the death. It is better that we educate than legislate as it will give greater peace of mind to all involved. HM Inspector has suggested including within the forms a prompt for the bequeather to talk with family members and I know that our bequeathal secretaries also reinforce the importance of this communication every time they speak with a new bequeather. I do not know if all secretaries offer to speak with families if they have concerns, but it is something that we always offer and perhaps that could be considered more widely if it is not already done. Bequeathal secretaries are the lynch pin for the entire process and they provide a marvellously sensitive and supportive service to families at a time of their greatest distress.

Therefore with the greatest of respect to Mr Reid, I am not of the opinion that legislation will in fact resolve the issue he raises but I do believe that success is most likely to be achieved when we educate, not just our medical and legal professions, but the general public.

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