

**UNITE
FOR
GOOD**

Rotary
Club of
**ORGAN DONATION
INTERNATIONAL**

**LET'S
INSPIRE !**

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NEW STEP

Weekly Bulletin of the Rotary Club of Organ Donation International

**UNITE
FOR
GOOD**

ROTARY CLUB OF ORGAN DONATION INTERNATIONAL

BRAINSTORMING ON ORGAN DONATION IN INDIA



Dr. Vatsala Dilip Trivedi
MBBS, MS, MCh (Urology)
Former Professor & Head of Department
Urology and Transplant Services, LTMGH,
Lokmanya Tilak Municipal General Hospital
Consultant Urology & Transplant Services
S L Raheja Hospital & Kohinoor Hospital,
Mumbai

Rtn. Lal Goel
Founder &
Charter President
Rotary Club of
Organ Donation
International

Rtn. Phf. Ritika Gupta
Inspire President
Rotary Club of
Organ Donation
International

Rtn. Alok Singh
Founder & Creator
Mithasha Foundation
Indore

Rtn. Harsh Vardhan
Kidney Recipient
Captain of Indian Archery Team
World Transplant Games 2025
Jaipur

Rtn. Jyoti Galada
Journalist, Creative
& Script Writer
Member, Rotary Club of
Organ Donation International
Kolkata

Rtn. Ruby Agarwal
Inspire Secretary

Rtn. Sunil Gupta
Public Image Chair

Time & Date: 8 PM on Saturday 17th Jan., 2026

Watch live on <https://www.youtube.com/@gyan8932>

**Organ donation turns
an end into a new beginning
DONATE ORGANS**

CHIEF MANAGING EDITOR IPP RTN LAL GOEL
PUBLISHED ON BEHALF OF INSPIRE PRESIDENT RTN PHF RITIKA GUPTA
BY INSPIRE SECRETARY RTN RUBY AGARWAL FOR ROTARY CLUB OF
ORGAN DONATION INTERNATIONAL.
CONTACT: rcorgandonation@gmail.com

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FROM THE DESK OF CHIEF MANAGING EDITOR



Dear Fellow Rotarians and Esteemed Members,

As we step into this new year with renewed purpose, I am pleased to present an issue that embodies our club's unwavering commitment to saving lives through organ donation awareness.

In the article "Organ Donation Systems Across India, the United States, and the United Kingdom," we try to conduct a comparative analysis, with its India-centric strategic roadmap, to illuminate where our nation stands on the world map of organ donation while exploring the ground realities, systemic barriers, and transformative pathways forward. Our goal is nothing less than dramatic improvement in India's organ donation landscape.

This issue brings you inspiring grassroots action from our Organ Donation Chair, Rotarian Dr. Kamal Jain, who recently addressed youth at the Swami Vivekananda Birth Anniversary celebration in Thane, planting seeds of this noble cause in young minds where they matter most.

Our President-Elect, Rtn Hemalatha Bhandari, honors Indian Army Day with her moving poem "Beyond the Uniform and Beyond the Breath Lives on through the Gift of Life," weaving together themes of patriotism, sacrifice, and the ultimate gift that transcends mortality.

In our beloved "Healthy Food-Healthy Organs" segment, our dynamic Secretary Rtn Ruby Agarwal shares a nutritious recipe for Til Laddu, perfectly timed with Makar Sankranti—because nourishing our bodies celebrates the organs we hope to keep healthy.

Finally, our "Interesting Facts About Our Members" spotlight celebrates one of our esteemed Rotarians, reminding us that behind every initiative stands a remarkable individual whose passion fuels our collective mission.

Every article, every story, every shared moment brings us closer to creating a culture where the gift of life becomes humanity's natural expression.

Yours in Rotary,

IPP Rtn Lal Goel
Chief Managing Editor
Founder & Charter President

ORGAN DONATION SYSTEMS : INDIA, THE UNITED STATES, AND THE UNITED KINGDOM



Rtn Lal Goel

**Founder & Charter President,
Rotary Club of Organ Donation International**

A Comparative Analysis with Strategic Recommendations for India

Organ donation systems worldwide confront a shared challenge: transplant demand vastly exceeds organ availability. Even high-performing systems fall short. The United States achieves approximately 50 deceased donors per million population (PMP) yet meets only 80% of transplant demand—demonstrating that institutional frameworks matter as much as public altruism.

India, the United States, and the United Kingdom represent three distinct governance models. Their contrasting outcomes offer practical lessons, but only if India's unique challenges remain central to any proposed solutions.

Comparative Overview

Deceased Donor Rates (PMP)

- India: 0.5–0.8
- United Kingdom: 21–25
- United States: 48–50

Approximate Active Waiting Lists

- India: 500,000+
- United Kingdom: 7,000
- United States: 100,000

India's challenge is fundamentally operational: converting intent into identification, pledges into retrievals, and policy into practice.

India: National Organ and Tissue Transplant Organisation (NOTTO)

Governance Structure

NOTTO operates under the Ministry of Health & Family Welfare through the Transplantation of Human Organs and Tissues Act (THOA). The system follows a three-tier architecture: national coordination, Regional Organ and Tissue Transplant Organisations (ROTTOs), and State Organ and Tissue Transplant Organisations (SOTTOs).

Because health is constitutionally a State subject, NOTTO lacks binding authority over State governments. Many SOTTOs exist nominally or function intermittently, often dependent on NGOs or individual advocates rather than systematic institutional support.

Core Functions

- Awareness and Registration: National campaigns, online donor registry, 24x7 helpline**
- Capacity Development: Training transplant coordinators and ICU staff**
- Allocation and Logistics: Standardised allocation protocols, green corridors for organ transport**
- Regulatory Oversight: Preventing commercial exploitation and enforcing THOA provisions**

Despite over 480,000 registered pledges, actual deceased donation remains at 0.5–0.8 PMP—revealing a substantial gap between intention and implementation.

Critical Challenges

1. Insufficient Awareness

Brain death remains poorly understood, even among healthcare professionals. Families rarely discuss organ donation before medical crises occur, leaving decisions to be made under extreme emotional distress.

2. Infrastructure Deficits

Only a small fraction of India's districts have functional organ retrieval centres. Approximately 15-20% of hospitals possess ICU capabilities adequate for deceased donation protocols. Rural and semi-urban areas remain largely excluded from the donation network.

3. Financial Barriers

Transplant procedures are prohibitively expensive for most families. Insurance coverage is inconsistent, government support mechanisms are limited and administratively slow, and long-term immunosuppression costs are rarely covered comprehensively.

4. Limited Federal Authority

Without enforceable oversight of State-level implementation, outcomes depend heavily on local political will—creating wide inter-state disparities. Tamil Nadu consistently achieves over 1.5 PMP, demonstrating what Indian states can accomplish with sustained commitment and effective systems.

5. Cultural and Religious Misconceptions

Persistent myths about bodily integrity, rebirth, and funeral rituals create hesitation. The absence of clear guidance from religious and community leaders reinforces uncertainty.

6. Gender Disparities

Women are over-represented as living donors but under-represented as recipients. Social norms, financial dependence, and differential access to healthcare drive this imbalance.

United States: Organ Procurement and Transplantation Network (OPTN/UNOS)

The US system operates through a decentralised but accountable framework, with 55 professional Organ Procurement Organisations (OPOs) coordinating donations. The United Network for Organ Sharing (UNOS) manages allocation through advanced digital systems (UNet) with real-time matching capabilities.

Strong performance incentives, transparent public reporting, and consistent federal oversight drive results: approximately 46,000-48,000 transplants annually at 50 PMP. The system demonstrates that professionalisation and accountability—not legislation alone—drive outcomes.

United Kingdom: NHS Blood and Transplant (NHSBT)

The UK employs a fully centralised national authority with Specialist Nurses for Organ Donation embedded in hospitals. National retrieval teams and unified logistics ensure consistent service delivery. While England operates under a “soft opt-out” consent system, families are always consulted before proceeding.

The UK performs over 4,000 transplants annually at 21-25 PMP, demonstrating that cultural normalisation and bedside expertise can be as effective as legislative frameworks.

Key Insight: Systems Create Donors, Not Laws Alone

Spain achieves approximately 50 PMP with an opt-out system, but its success derives primarily from trained professionals, systematic hospital identification protocols, and robust infrastructure—not the consent framework itself.

Strategic Roadmap for India

Vision

- 5-year target: 2-3 PMP
- 10-year target: 10+ PMP

Priority Actions

1. Professionalise Donor Identification

Require trained transplant coordinators in every ICU-capable hospital. Link brain-death identification audits to hospital licensing and accreditation standards.

2. Expand District-Level Infrastructure

Establish at least one functional organ retrieval centre per revenue district. Strengthen public-sector ICU capabilities rather than relying exclusively on private hospitals.

3. Ensure Financial Protection

Create a uniform national transplant insurance package. Provide comprehensive government support for economically vulnerable recipients, including post-transplant immunosuppression medications.

4. Strengthen Federal-State Coordination

Implement performance-linked funding for States with transparent, publicly reported benchmarks. Establish clear national standards while respecting State autonomy.

5. Sustain Cultural Engagement

Move beyond episodic campaigns to continuous community engagement. Actively involve religious leaders, women's organisations, and local influencers in normalising donation discussions.

6. Address Gender Inequities

Require mandatory counselling and ethics review for living donations. Implement priority correction mechanisms to ensure equitable access for women recipients.

Conclusion

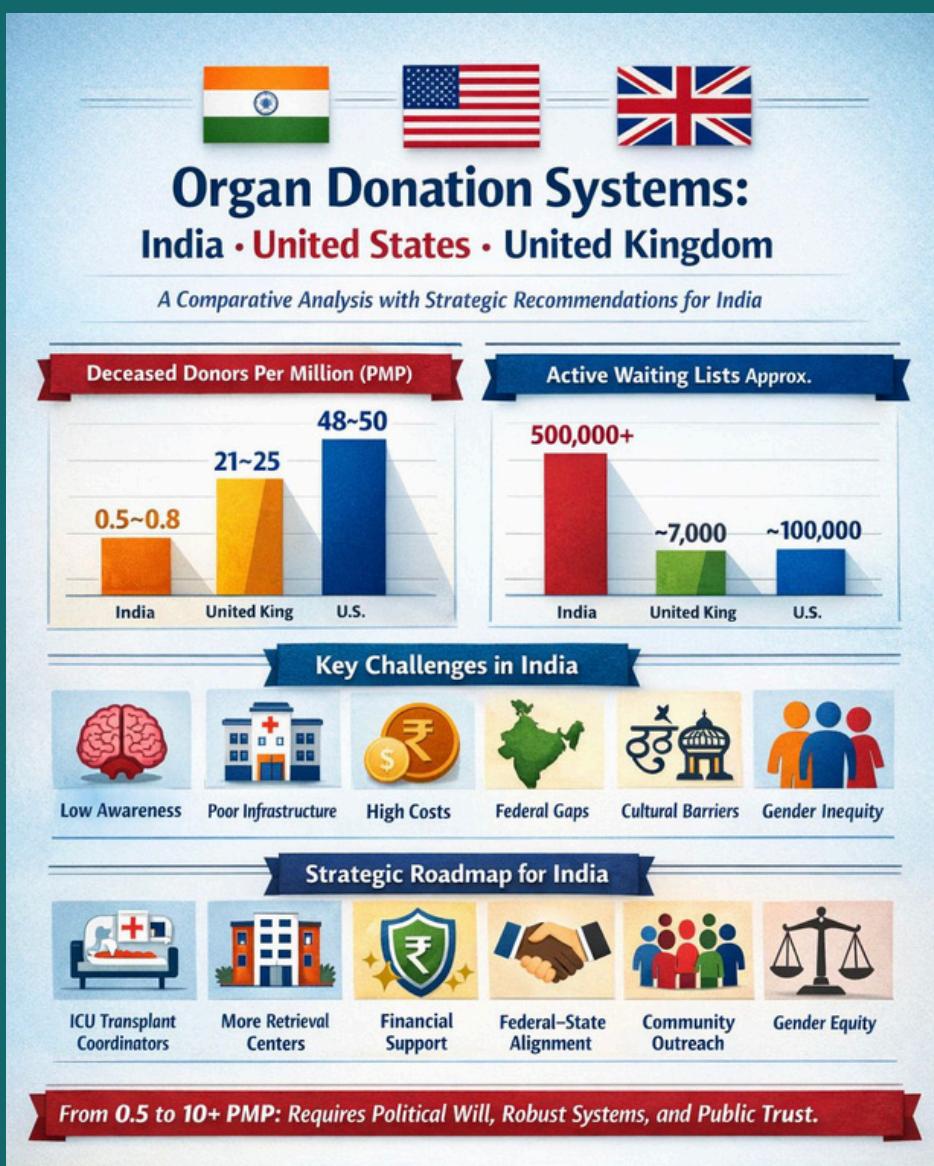
India's organ donation challenge is fundamentally systemic. With 0.5-0.8 deceased donors PMP and a waiting list exceeding 500,000, thousands die annually—not from lack of compassion, but from fragmented execution.

The United States demonstrates the power of accountable decentralisation. The United Kingdom shows the impact of centralised expertise and cultural normalisation. India must adapt—not copy—these approaches to its federal structure, economic realities, and cultural context.

The path from 0.8 to 10+ PMP is challenging but achievable. What is required is sustained political commitment, empowered institutional systems, professional staffing, and community trust.

The question is no longer what must be done. It is whether India will choose to implement these solutions—at scale, with urgency, and with consistency.

Thousands of lives depend on that choice.



ROTARIAN DR KAMAL JAIN ADDRESSES YOUTH ON ORGAN DONATION AT SWAMI VIVEKANANDA BIRTH ANNIVERSARY



Rtn Dr Kamal Jain, Organ Donation Chair of the Rotary Club of Organ Donation International, served as the chief guest at Swami Shree Gambhiranand Ashram in Bhiwandi, Thane. He addressed a gathering of over 500 people on the importance of organ donation during a program celebrating the 163rd birth anniversary of Swami Vivekananda, observed as National Youth Day.

“Beyond the uniform and Beyond the breath

Lives on through the Gift of Life”

ORGAN & TISSUE DONATION

Integrity and valor guard our nation's sovereign pride,

Nobly shielding every soul with a courage deep inside.

Deterring every shadow, from internal strife to foreign wall,

In selfless service, they answer every humanitarian call.

Aiding the broken when nature strikes or peace begins to fade,

Nation-building is the promise in every sacrifice they've made.

Arming the future with a legacy that transcends the grave,

Reliance on our own strength, a path for the bold and brave.

Military prowess meets the mercy of a healing hand,

Yielding hope to the weary across our vast and sacred land.

Donating life is the highest honor a hero can bestow,

Awarding a second chance where only darkness used to grow,

Yoking the spirit of the soldier to the lives we help to save.

“Beyond the uniform -

And Beyond the breath

Lives on Through the Gift of Life”



**Rtn Hemalatha Bhandari
President Elect**

HEALTHY FOOD - HEALTHY ORGANS

Healthy Til Laddu Recipe

A nutritious, lightly sweetened sesame seed treat
perfect for winter warmth and energy

Ingredients

Base:

- 1 cup sesame seeds (til) – white or black
- ½ cup unsweetened desiccated coconut
- ¼ cup skim milk powder
- ¼ cup mixed nuts (almonds, cashews, pistachios)

Sweetener & Flavouring:

- 1-2 tbsp monk fruit sweetener (adjust to taste)
- ½ tsp cardamom powder

Binder: - 2-3 tbsp skim milk or warm almond milk

Instructions

Roast the Sesame Seeds

In a heavy-bottomed pan over low heat, dry roast the sesame seeds for 3-5 minutes, stirring frequently, until aromatic and lightly popping. Transfer to a plate and let cool completely.

Roast Nuts

Using the same pan, lightly crushed nuts for 1-2 minutes until fragrant and barely golden. Set aside.

Pulse the Sesame Seeds

Once cooled, measure out ¾ cup of the roasted sesame seeds. Pulse in a blender for just 2-3 seconds to crack them slightly and release natural oils. Avoid over-blending to prevent turning into paste.

Combine Dry Ingredients

In a large mixing bowl, combine the pulsed sesame seeds, remaining whole seeds, roasted coconut, nuts, skim milk powder, monk fruit sweetener, and cardamom powder. Mix thoroughly.

Bind the Mixture

Add milk one tablespoon at a time, mixing with your hands after each addition. The mixture should hold together when pressed—avoid making it too wet.

Shape the Laddus

Lightly grease your palms with ghee or oil. Take small portions of the mixture and roll firmly into smooth, compact balls about 1-1.5 inches in diameter.

Store Properly

Place laddus in an airtight container and refrigerate. They'll stay fresh for 7-10 days due to the milk content.



Rtn Ruby Agarwal
Inspire Secretary





Rtn Rakhee Agarwal
Club Member

Name: Rakhee Agarwal
Mobile: 7017211088
E-mail: Meraki.learning2021@gmail.com
Profession: Law of Attraction Coach, Tarot Card Reader, Yoga Practitioner, Silva Method Coach
Family: Husband and 2 daughters
Favourite Food: Dal, Chawal, roti, sabzi
Favourite Holiday Destination: Vrindavan
Favourite Book: The Magic by Rhonda Byrne
Favourite Song: Pal Pal Dil ke Pas
Favourite Quote: Only I can change my life, no one can do it for me
Date of Birth: 17th March
Wedding Anniversary: 4th February
Your presence on social media: YouTube: "Meraki Thoughts"
Why did you choose to become a member of RC Organ Donation International: for a Nobel cause



SCAN
ME
FOR
QUICK
PLEDGE

(Pledge your Organs to donate only after talking to your family members)